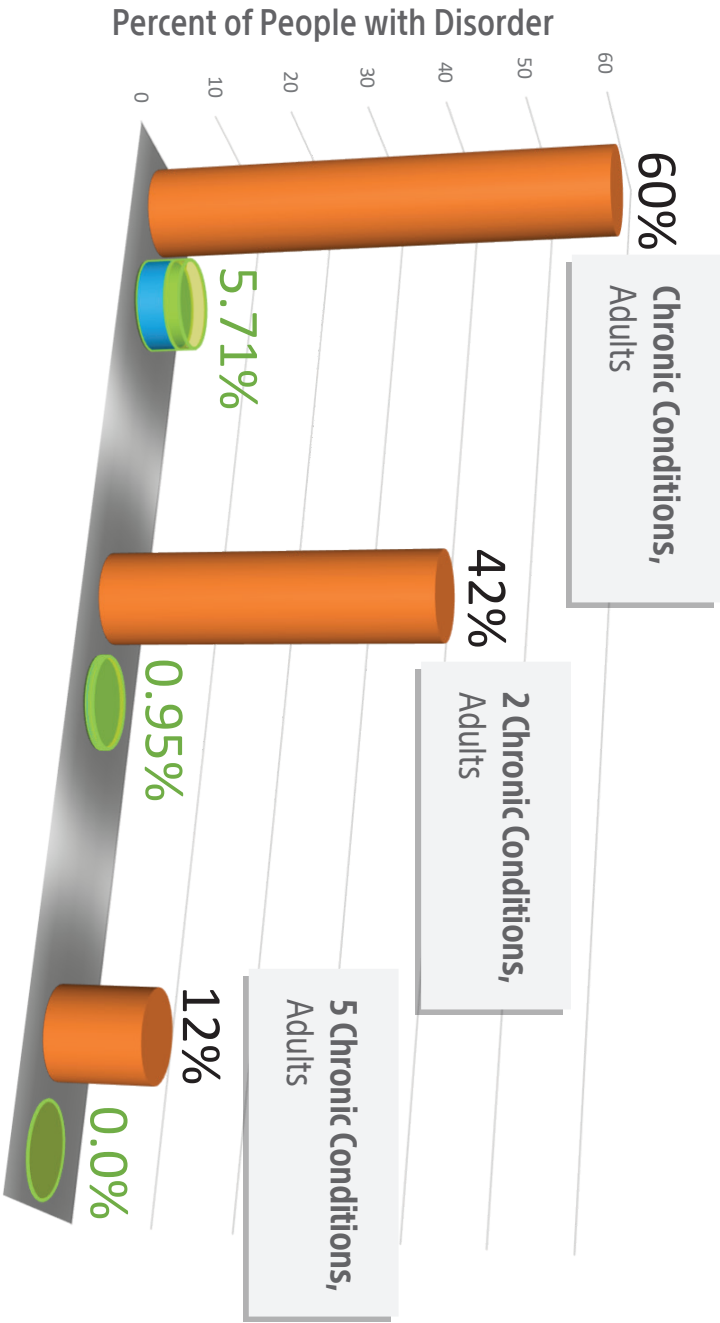


EXHIBIT 471

2020 Pilot Survey Data Comparison

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”
 - President Donald J. Trump, October 22, 2020, Presidential Debate

- **U.S. National data for approximately 99%+ Vaccinated Population** (CDC, Chronic Diseases in America. <https://www.cdc.gov/chronicdisease/resources/infographic/chronic-diseases.htm>)
- **Pilot survey data for 100% Unvaccinated Control Group**
- ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
- ▲ Unvaccinated and unexposed to K-shot and maternal vaccination



Unvaccinated Population

- **Risk Factor in Total Population = 5.71%**

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of chronic illness in America. Specifically, the odds that this large control group of unvaccinated adults (as featured on this chart) would be exponentially healthier than vaccinated adults by mere chance: 1 in 245,083,100,778,672,000. This calculation is supported by the p-value 4.08E-63. See full report for detailed explanation.

Subsets - Chronic Conditions

- ▲ **12.50%** (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ **4.49%** (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

- **Risk Factors in Total Population = 0.95%**

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of chronic illness in America. Specifically, the odds that this large control group of unvaccinated adults (as featured on this chart) would be exponentially healthier than vaccinated adults by mere chance: 1 in 4,105,862,277,506,450,000. This calculation is supported by the p-value 2.44E-46. See full report for detailed explanation.

Subsets - 2 Chronic Conditions

- ▲ **3.13%** (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ **0.56%** (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

- **Risk Factors in Total Population = 0.00%**

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of chronic illness in America. Specifically, the odds that this large control group of unvaccinated adults (as featured on this chart) would be exponentially healthier than vaccinated adults by mere chance: 1 in 455,557,841,434. This calculation is supported by the p-value 2.19E-12. See full report for detailed explanation.

*Total survey produced 99% confidence interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

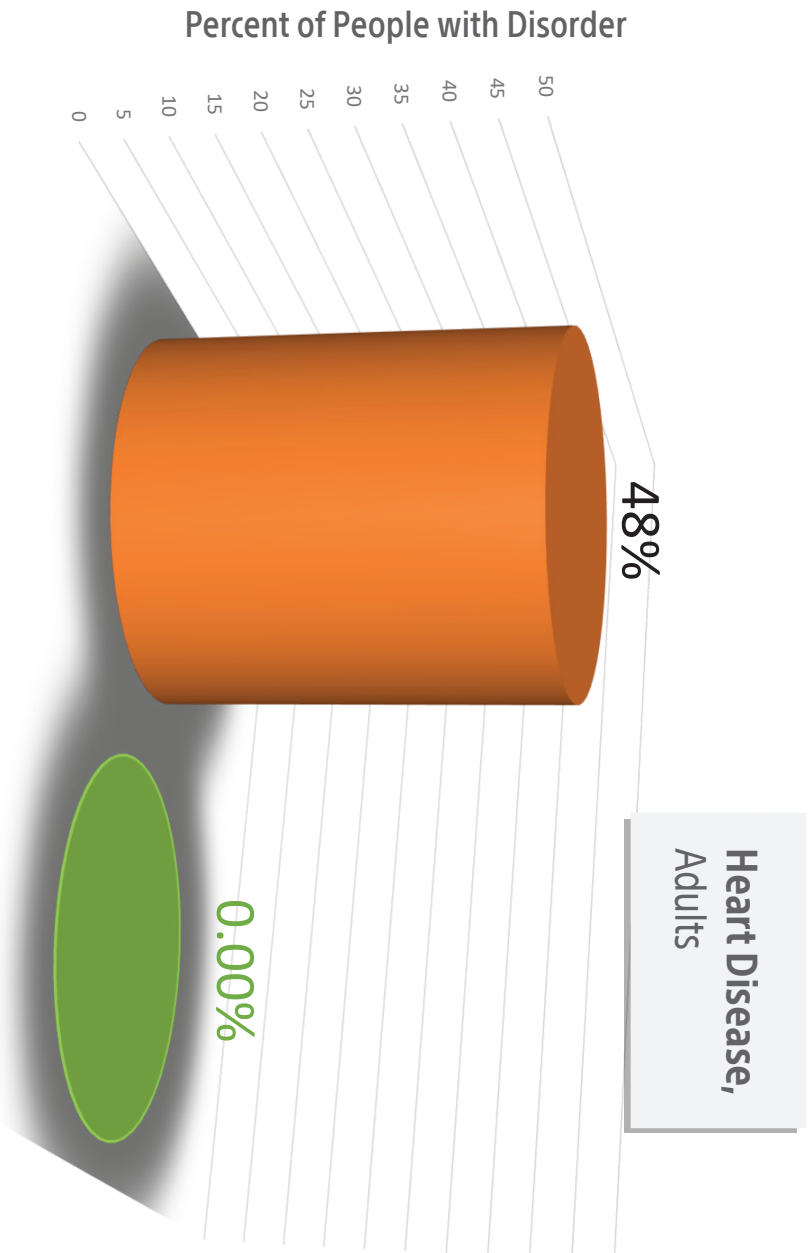
VACCINATED - VS - UNVACCINATED



Unvaccinated Population

● Risk Factor in Total Population = 0.0%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of heart disease in America. Specifically, the odds that this large control group of unvaccinated adults (as featured on this chart) would be exponentially healthier than vaccinated adults by mere chance: infinite / incalculable. This calculation is supported by an infinitesimal p-value. See full report for detailed explanation.

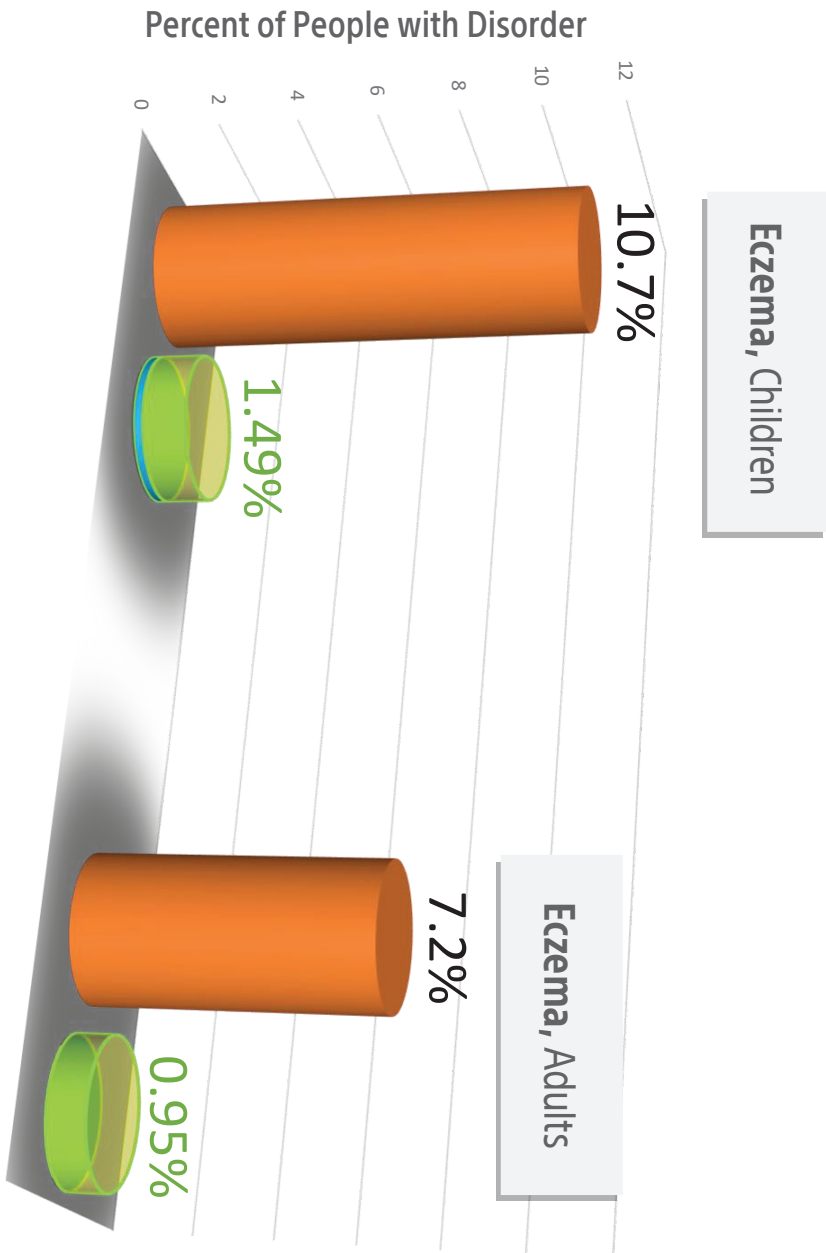


“The cure cannot be worse than the problem itself.”
- President Donald J. Trump, October 22, 2020, Presidential Debate

- U.S. National data for approximately 99%+ Vaccinated Population (AHA, Cardiovascular diseases affect nearly half of American adults, statistics show. <https://www.heart.org/en/news/2019/01/31/cardiovascular-diseases-affect-nearly-half-of-american-adults-statistics-show>)
- Pilot survey data for 100% Unvaccinated Control Group

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”
 - President Donald J. Trump, October 22, 2020, Presidential Debate

- U.S. National data for approximately 99%+ Vaccinated Population (AJMC, Overview of Atopic Dermatitis. <https://www.ajmc.com/journals/supplement/2017/atopic-dermatitis-focusing-on-the-patient-care-strategy-in-the-managed-care-setting/overview-of-atopic-dermatitis-article>)
- Pilot survey data for 100% Unvaccinated Control Group
- ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
- ▲ Unvaccinated and unexposed to K-shot and maternal vaccination

Unvaccinated Population

● Risk Factor in Total Population, Children = 1.49%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of eczema in America. Specifically, the odds that this large control group of unvaccinated children (as featured on this chart) would be exponentially healthier than vaccinated children by mere chance: 1 in 133,383,762,863,829,000,000,000,000,000,000,000,000,000. This calculation is supported by the p-value 7.50E-39. See full report for detailed explanation.

Subsets

- ▲ 3.27% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ 0.36% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

● Risk Factor in Total Population, Adults = .95%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of eczema in America. Specifically, the odds that this large control group of unvaccinated adults (as featured on this chart) would be exponentially healthier than vaccinated adults by mere chance: 1 in 43,711. This calculation is supported by the p-value 2.29E-05. See full report for detailed explanation.

Subsets

- ▲ 6.25% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ 0.00% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”
 - President Donald J. Trump, October 22, 2020, Presidential Debate

- U.S. National data for approximately 99%+ Vaccinated Population (CDC, Asthma. https://www.cdc.gov/asthma/most_recent_national_asthma_data.htm)
- Pilot survey data for 100% Unvaccinated Control Group



Unvaccinated Population

- Risk Factor in Total Population, Children = 0.71%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of asthma in America. Specifically, the odds that this large control group of unvaccinated children (as featured on this chart) would be exponentially healthier than vaccinated children by mere chance: 1 in 3,017,587,025,023,760,000,000,000,000. This calculation is supported by the p-value 3.31E-31. See full report for detailed explanation.

Subsets

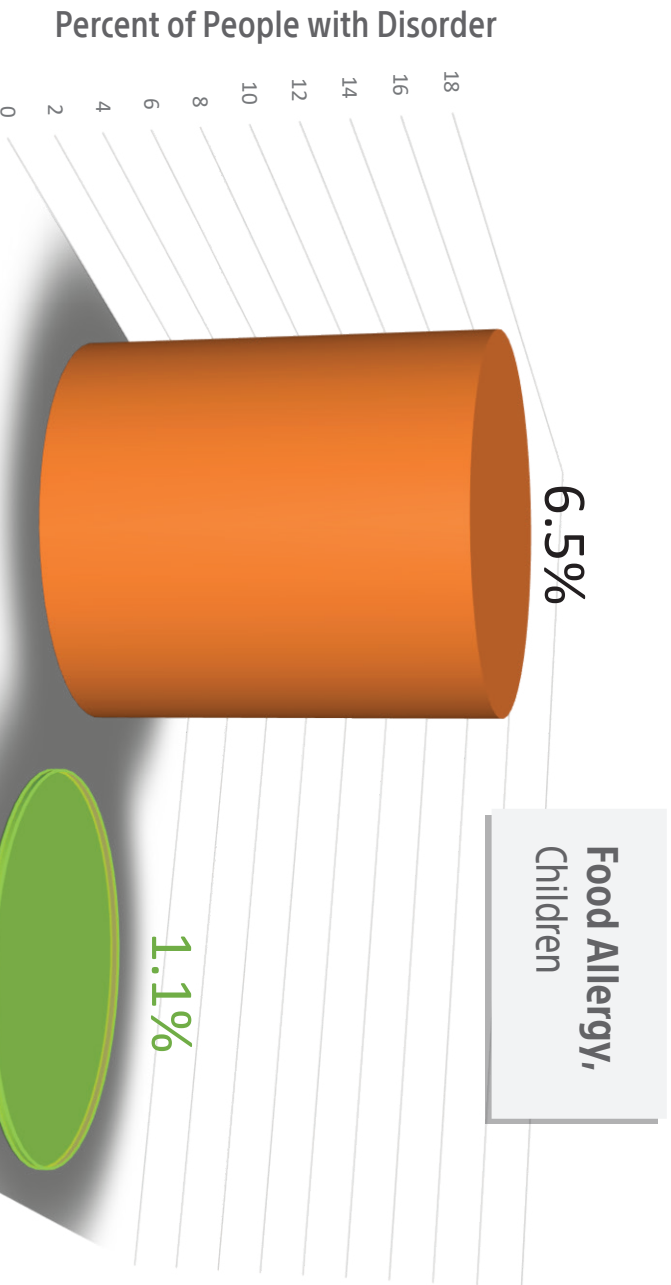
- ▲ 1.64% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ 0.24% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

- Risk Factor in Total Population, Adults = 0.00%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of asthma in America. Specifically, the odds that this large control group of unvaccinated adults (as featured on this chart) would be exponentially healthier than vaccinated adults by mere chance: 1 in 20,306,860. This calculation is supported by the p-value 4.92E-08. See full report for detailed explanation.

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”
 - President Donald J. Trump, October 22, 2020, Presidential Debate

Unvaccinated Population

● Risk Factor in Total Population = 1.10%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of food allergy in America. Specifically, the odds that this large control group of unvaccinated children (as featured on this chart) would be exponentially healthier than vaccinated children by mere chance: 1 in 592,075,437,482,422,000,000. This calculation is supported by the p-value 1.69E-21. See full report for detailed explanation.

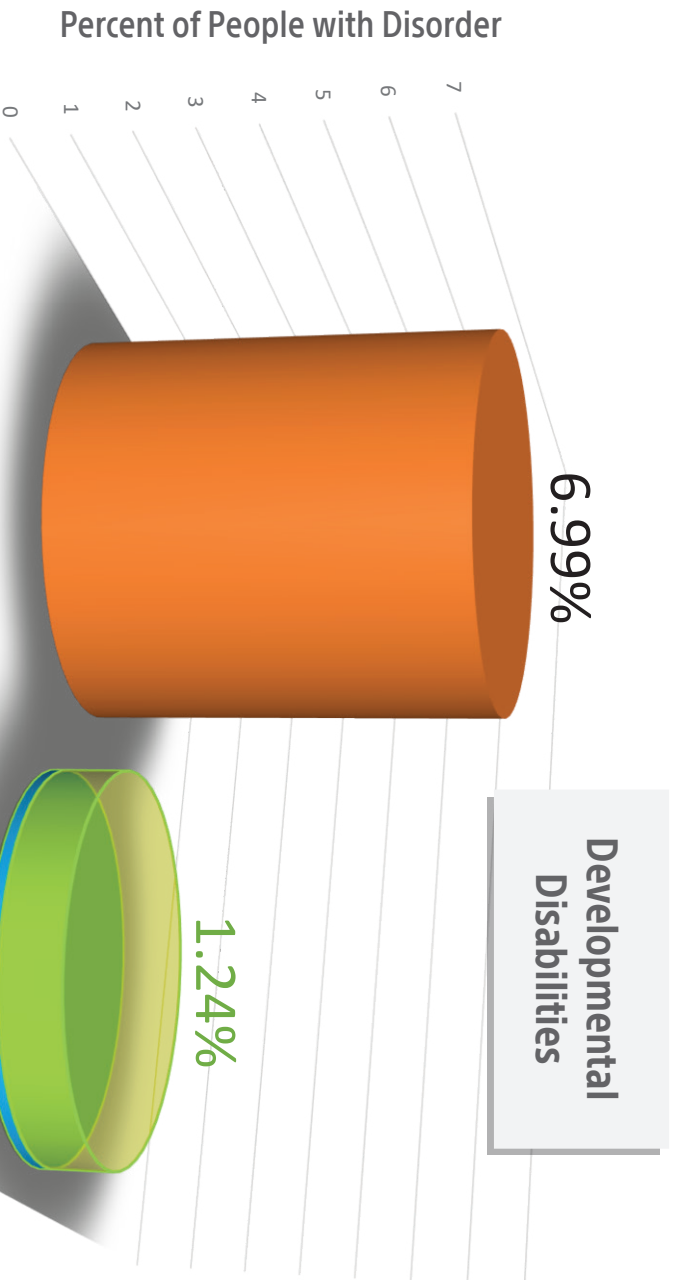
Subsets

- ▼ 1.87% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▼ 0.71% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

- U.S. National data for approximately 99%+ Vaccinated Population (CDC Summary Health Statistics: National Health Interview Survey, 2018. https://ftp.cdc.gov/pub/Health_Statistics/NCHS/NHIS/SHS/2018_SHS_Table_C-2.pdf)
- Pilot survey data for 100% Unvaccinated Control Group
 - ▼ Unvaccinated but exposed to K-shot and/or maternal vaccination
 - ▼ Unvaccinated and unexposed to K-shot and maternal vaccination

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



Developmental Disabilities

“The cure cannot be worse than the problem itself.”
 - President Donald J. Trump, October 22, 2020, Presidential Debate

Unvaccinated Population

● Risk Factor in Total Population = 1.24%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of developmental disabilities in America. Specifically, the odds that this large control group of unvaccinated children age 3-17 (as featured on this chart) would be exponentially healthier than vaccinated children age 3-17 by mere chance: 1 in 53,393,538,932,590,800. This calculation is supported by the p-value 1.87E-17. See full report for detailed explanation.

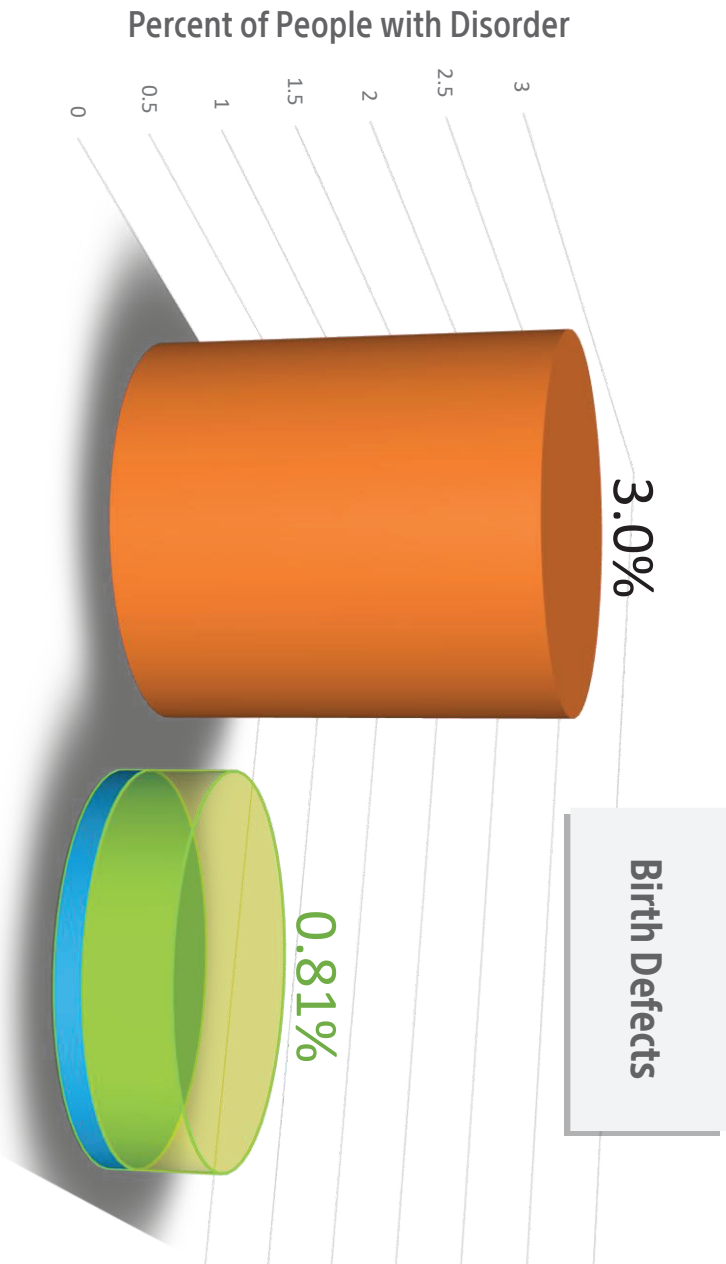
Subsets

- ▼ 2.97% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination) **9**
- ▼ 0.32% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

- U.S. National data for approximately 99%+ Vaccinated Population (CDC, NCHS Data Brief No. 291. <https://www.cdc.gov/nchs/products/databriefs/db291.htm>)
- Pilot survey data for 100% Unvaccinated Control Group
- ▼ Unvaccinated but exposed to K-shot and/or maternal vaccination
- ▼ Unvaccinated and unexposed to K-shot and maternal vaccination

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”
 - President Donald J. Trump, October 22, 2020, Presidential Debate

- U.S. National data for approximately 99%+ Vaccinated Population (CDC, Birth Defects. <https://www.cdc.gov/ncbddd/birthdefects/index.html>)
- Pilot survey data for 100% Unvaccinated Control Group
- ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
- ▲ Unvaccinated and unexposed to K-shot and maternal vaccination



Unvaccinated Population

● Risk Factor in Total Population = 0.81%*

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of diagnosed “birth defects” in America. Specifically, the odds that this large control group of unvaccinated people (as featured on this chart) would be exponentially healthier than vaccinated people by mere chance: 1 in 174,173,338. This calculation is supported by the p-value 5.74E-09. See full report for detailed explanation.

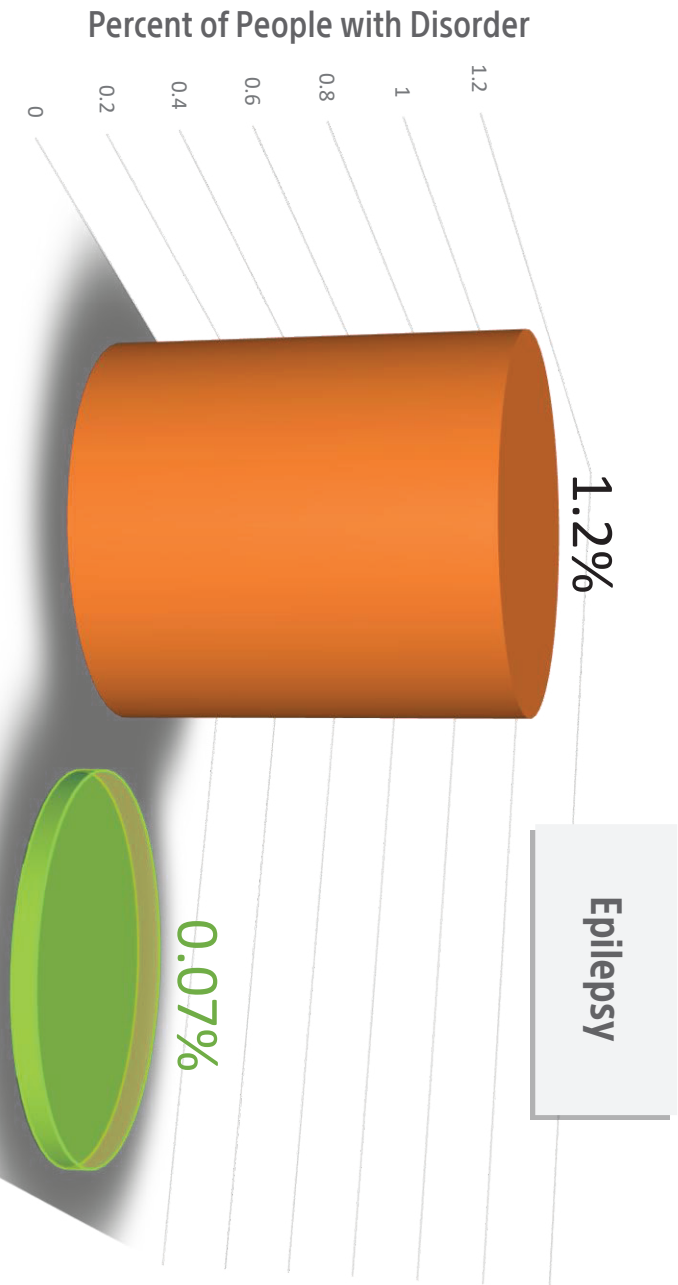
Subsets

- ▲ 1.96% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ 0.29% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

*Only 3.31% of the unvaccinated surveyed were exposed to maternal vaccines, and yet they accounted for 43% of the reported birth defects in this pilot survey.

More specifically, this Control Group pilot survey data shows that the risk of being born with birth defects within a maternal vaccine subset group is 6.12%, which correlates almost precisely to national data: the national maternal vaccination rate is 48.8% (<https://www.cdc.gov/vaccines/pregnancy/hcp-toolkit/maternal-vaccination-coverage.html>), and the national birth defect rate is 3% (see chart citation to CDC). As 3% doubled is 6%, and because there is a near absence of birth defects in the control group subset without maternal vaccination, this pilot survey provides corroborating evidence that maternal vaccination is causing a pandemic rate of birth defects in the USA.

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”
 - President Donald J. Trump, October 22, 2020, Presidential Debate

- U.S. National data for approximately 99%+ Vaccinated Population (CDC, Epilepsy, <https://www.cdc.gov/epilepsy/data/index.html>)
- Pilot survey data for 100% Unvaccinated Control Group
- ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
- ▲ Unvaccinated and unexposed to K-shot and maternal vaccination

Unvaccinated Population

● Risk Factor in Total Population = 0.07%

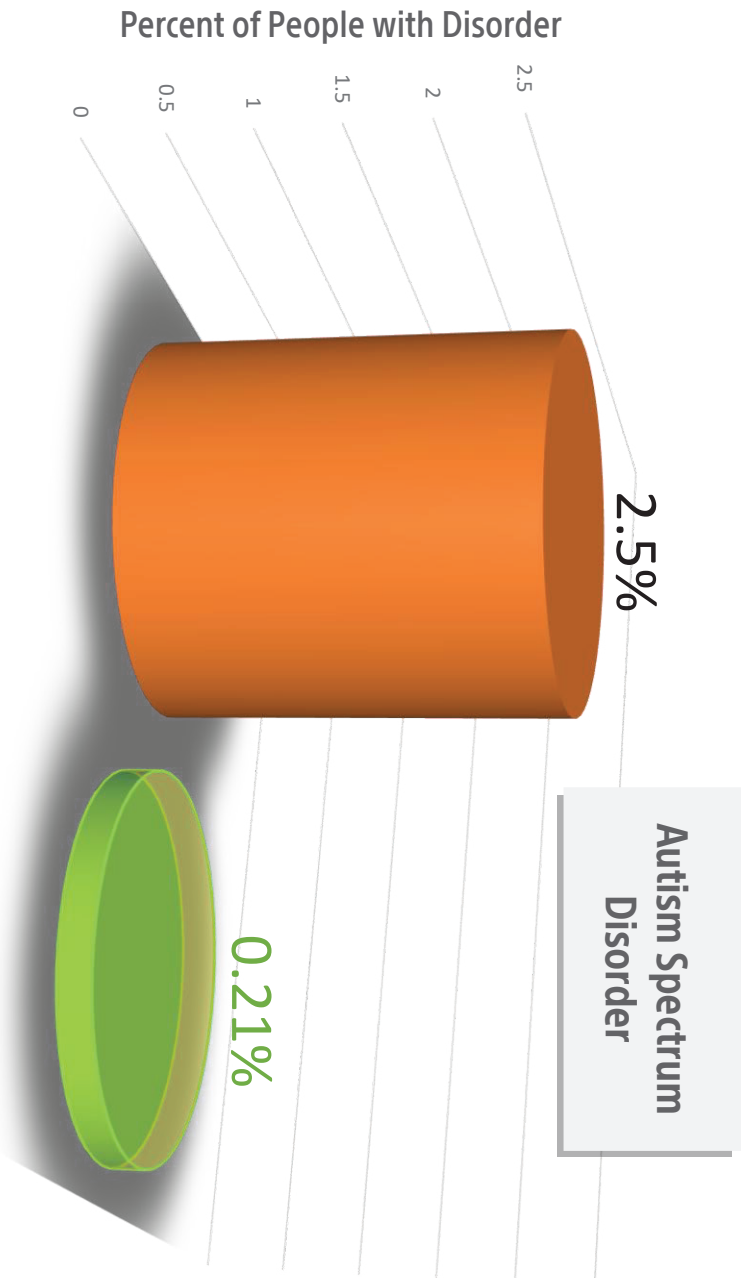
This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of epilepsy in America. Specifically, the odds that this large control group of unvaccinated people (as featured on this chart) would be exponentially healthier than vaccinated people by mere chance: 1 in 3,100,663. This calculation is supported by the p-value 3.23E-07. See full report for detailed explanation.

Subsets

- ▲ 0.22% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ 0.00% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”

- President Donald J. Trump, October 22, 2020, Presidential Debate

- U.S. National data for approximately 99%+ Vaccinated Population (Kogan et al. (2018). The Prevalence of Parent-Reported Autism Spectrum Disorder Among US Children. Pediatrics 142 (6) e20174161. <https://doi.org/10.1542/peds.2017-4161>)
- Pilot survey data for 100% Unvaccinated Control Group
- ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
- ▲ Unvaccinated and unexposed to K-shot and maternal vaccination



Unvaccinated Population

● Risk Factor in Total Population = 0.21%

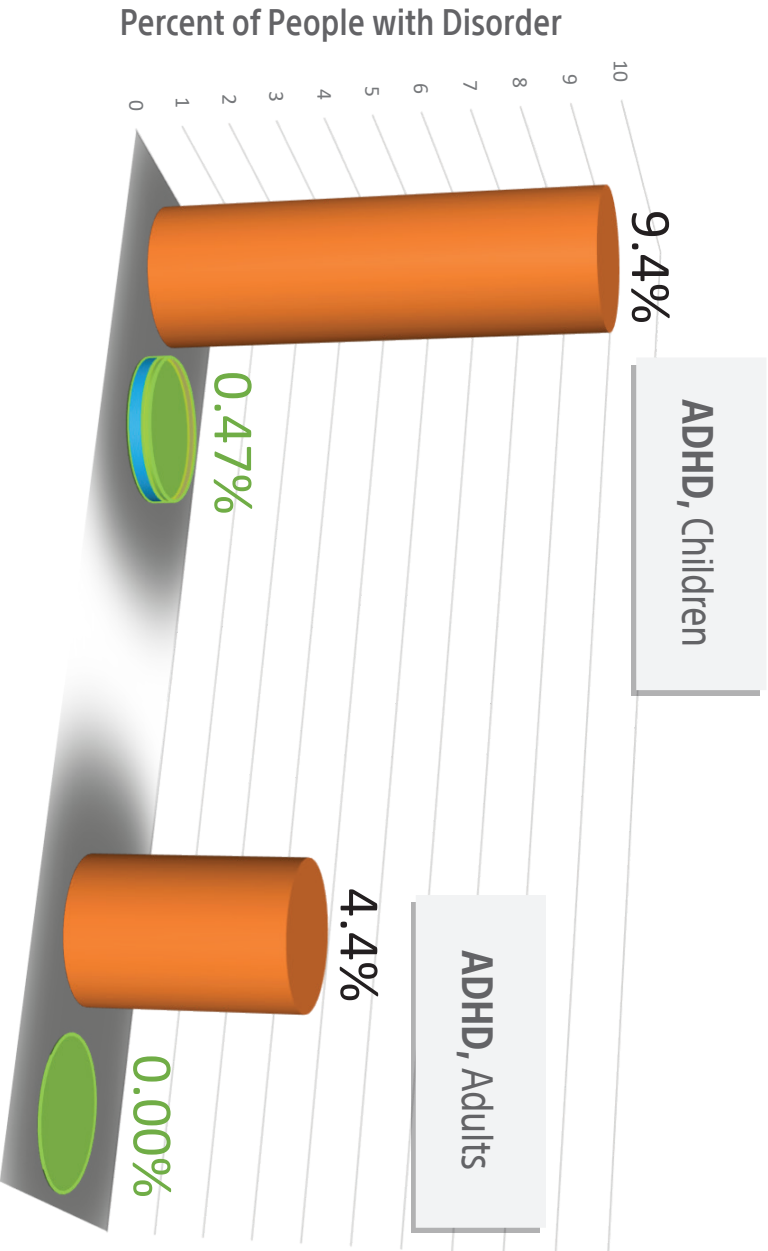
This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of autism in America. Specifically, the odds that this large control group of unvaccinated children (as featured on this chart) would be exponentially healthier than vaccinated children by mere chance: 1 in 128,902,754. This calculation is supported by the p-value 7.76E-09. See full report for detailed explanation.

Subsets

- ▲ 0.59% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ 0.00% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”

- President Donald J. Trump, October 22, 2020, Presidential Debate

- U.S. National data for approximately 99%+ Vaccinated Population (CDC, Attention-Deficit / Hyperactivity Disorder (ADHD). <https://www.cdc.gov/ncbddd/adhd/data.html>; NIMH, Attention-Deficit/Hyperactivity Disorder (ADHD). <https://www.nimh.nih.gov/health/statistics/attention-deficit-hyperactivity-disorder-adhd.shtml>)

- Pilot survey data for 100% Unvaccinated Control Group
- ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
- ▲ Unvaccinated and unexposed to K-shot and maternal vaccination



Unvaccinated Population

● **Risk Factor in Total Population, Children = 0.47%**
 This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of ADHD in America. Specifically, the odds that this large control group of unvaccinated children (as featured on this chart) would be exponentially healthier than vaccinated children by mere chance: 1 in 449,104,622, 125,953,000,000,000,000,000,000,000,000,000,000. This calculation is supported by the p-value 2.23E-45. See full report for detailed explanation.

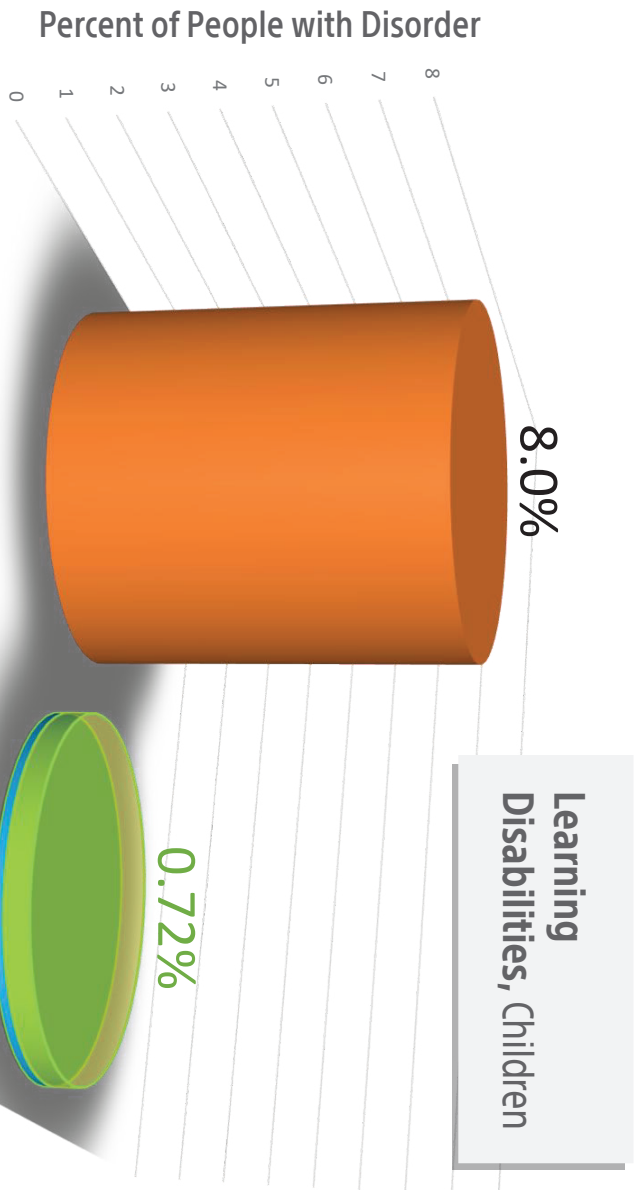
Subsets

- ▲ 0.47% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ 0.47% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

● **Risk Factor in Total Population, Adults = 0.00%**
 This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of ADHD in America. Specifically, the odds that this large control group of unvaccinated adults (as featured on this chart) would be exponentially healthier than vaccinated adults by mere chance: 1 in 12,701. This calculation is supported by the p-value 7.87E-05. See full report for detailed explanation.

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”
 - President Donald J. Trump, October 22, 2020, Presidential Debate

● U.S. National data for approximately 99%+ Vaccinated Population (Prevalence of Learning Disabilities in Mental Disorders and Disabilities Among Low-Income Children. Boat TF, Wu JT, eds. Washington (DC): National Academies Press (US); 2015. <https://www.ncbi.nlm.nih.gov/books/NBK332880>)

● Pilot survey data for 100% Unvaccinated Control Group
 ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
 ▼ Unvaccinated and unexposed to K-shot and maternal vaccination

Unvaccinated Population

● Risk Factor in Total Population = 0.72%

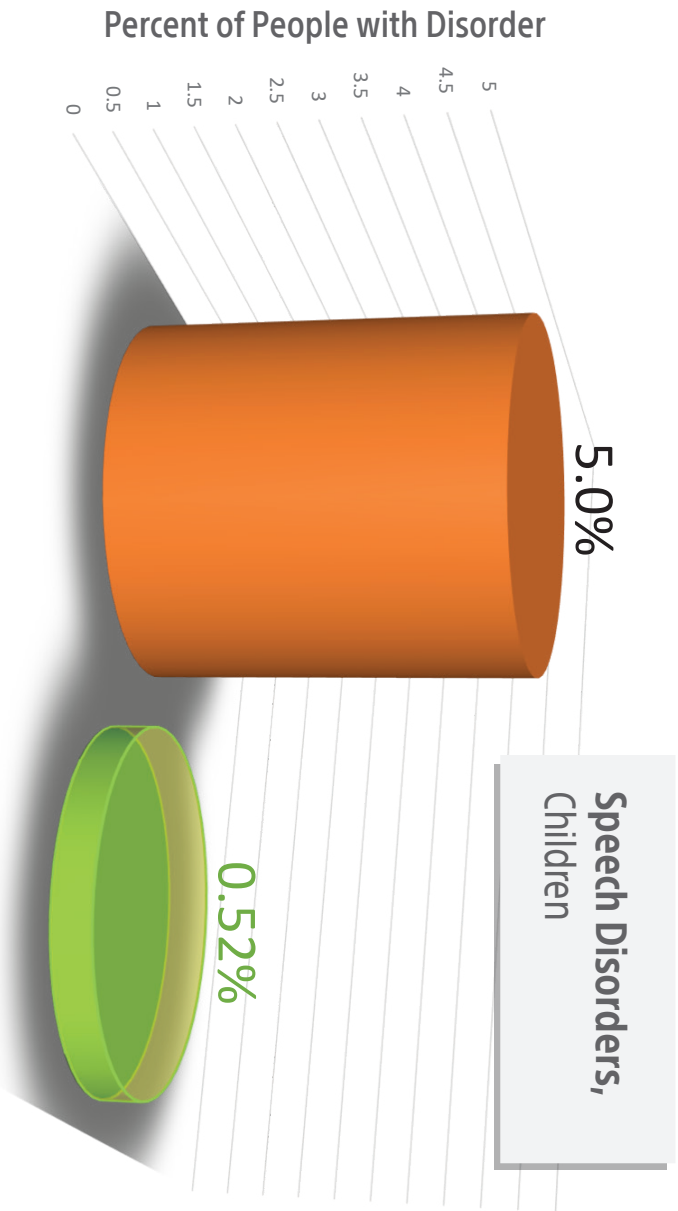
This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of learning disabilities in America. Specifically, the odds that this large control group of unvaccinated children (as featured on this chart) would be exponentially healthier than vaccinated children by mere chance: 1 in 16,537,382,528,756,600,000,000,000 This calculation is supported by the p-value 6.05E-26. See full report for detailed explanation.

Subsets

- ▲ 1.48% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▼ 0.32% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”
 - President Donald J. Trump, October 22, 2020, Presidential Debate

- U.S. National data for approximately 99%+ Vaccinated Population (CDC, NCHS Data Brief No. 205, <https://www.cdc.gov/nchs/products/databriefs/db205.htm>)

- Pilot survey data for 100% Unvaccinated Control Group
- ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
- ▲ Unvaccinated and unexposed to K-shot and maternal vaccination

Unvaccinated Population

● Risk Factor in Total Population = 0.52%

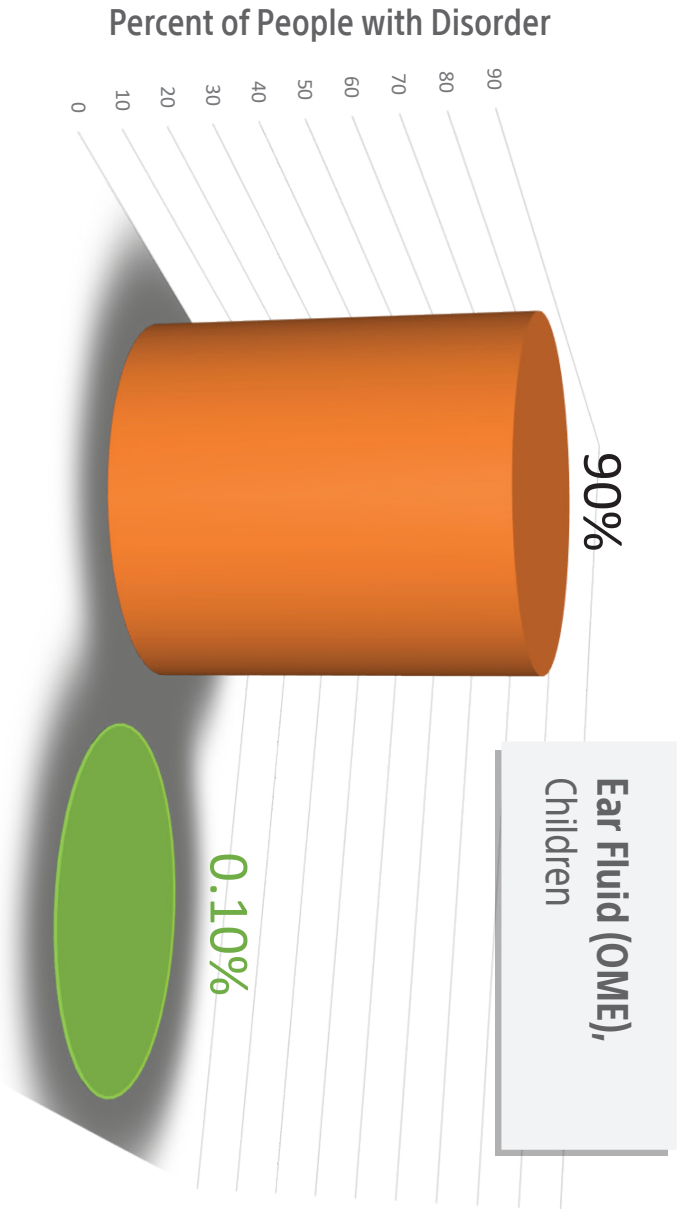
This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of speech disorders in America. Specifically, the odds that this large control group of unvaccinated children (as featured on this chart) would be exponentially healthier than vaccinated children by mere chance: 1 in 1,115,522,286,215,680. This calculation is supported by the p-value 8.96E-16. See full report for detailed explanation.

Subsets

- ▲ 1.48% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ 0.00% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”
 - President Donald J. Trump, October 22, 2020, Presidential Debate

● U.S. National data for approximately 99%+ Vaccinated Population (AHRQ, Orits Media With Effusion: Comparative Effectiveness of Treatments. <https://effectivehealthcare.ahrq.gov/products/ear-infection/research-protocol>)

- Pilot survey data for 100% Unvaccinated Control Group
- ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
- ▲ Unvaccinated and unexposed to K-shot and maternal vaccination

Unvaccinated Population

● Risk Factor in Total Population = 0.10%

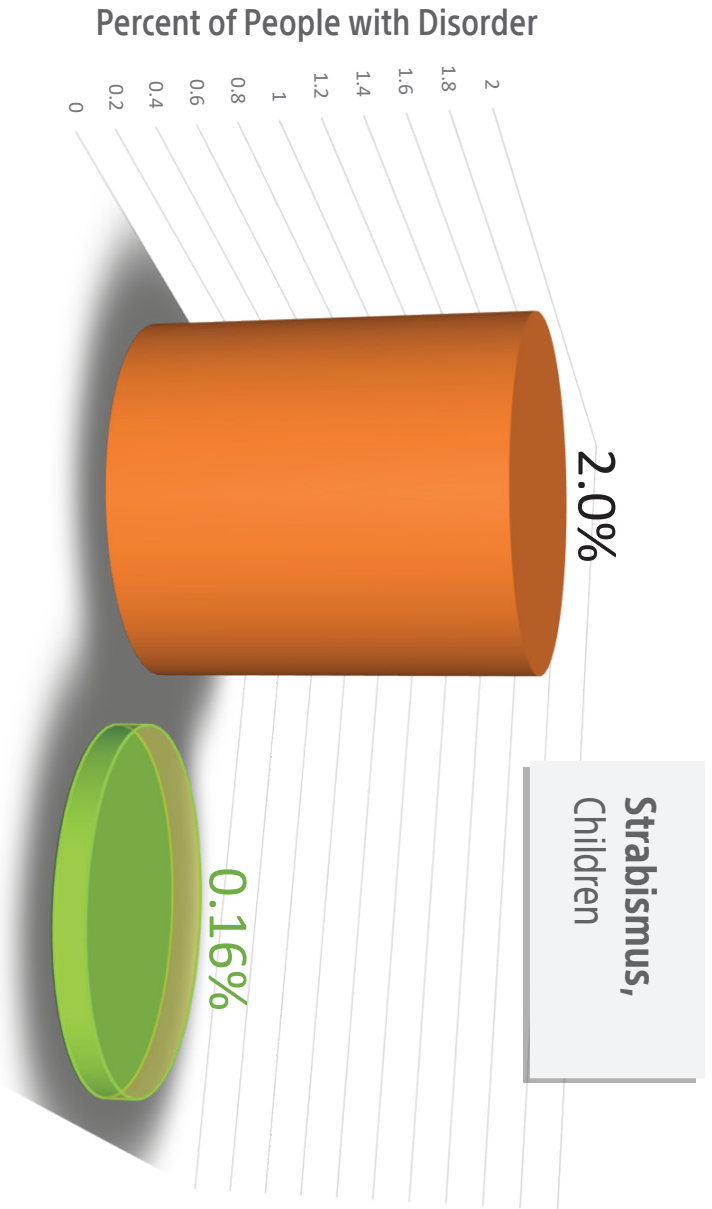
This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of OME in America. Specifically, the odds that this large control group of unvaccinated children (as featured on this chart) would be exponentially healthier than vaccinated children by mere chance: infinite / incalculable. This calculation is supported by an infinitesimal p-value. See full report for detailed explanation.

Subsets

- ▲ 0.29% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ 0.00% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



“The cure cannot be worse than the problem itself.”

- President Donald J. Trump, October 22, 2020, Presidential Debate

- U.S. National data for approximately 99%+ Vaccinated Population (Prevent Blindness, Eye Diseases & Conditions, Strabismus. <https://preventblindness.org/strabismus/>)

- Pilot survey data for 100% Unvaccinated Control Group
- ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
- ▲ Unvaccinated and unexposed to K-shot and maternal vaccination



Unvaccinated Population

● Risk Factor in Total Population = 0.16%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of strabismus in America. Specifically, the odds that this large control group of unvaccinated children (as featured on this chart) would be exponentially healthier than vaccinated children by mere chance: 1 in 397,893,965. This calculation is supported by the p-value 2.51E-09. See full report for detailed explanation.

Subsets

- ▲ 0.47% (risk factor within the subset group that received the K-shot and/or pregnancy vaccination)
- ▲ 0.00% (risk factor within the subset group unexposed to the K-shot and pregnancy vaccination)

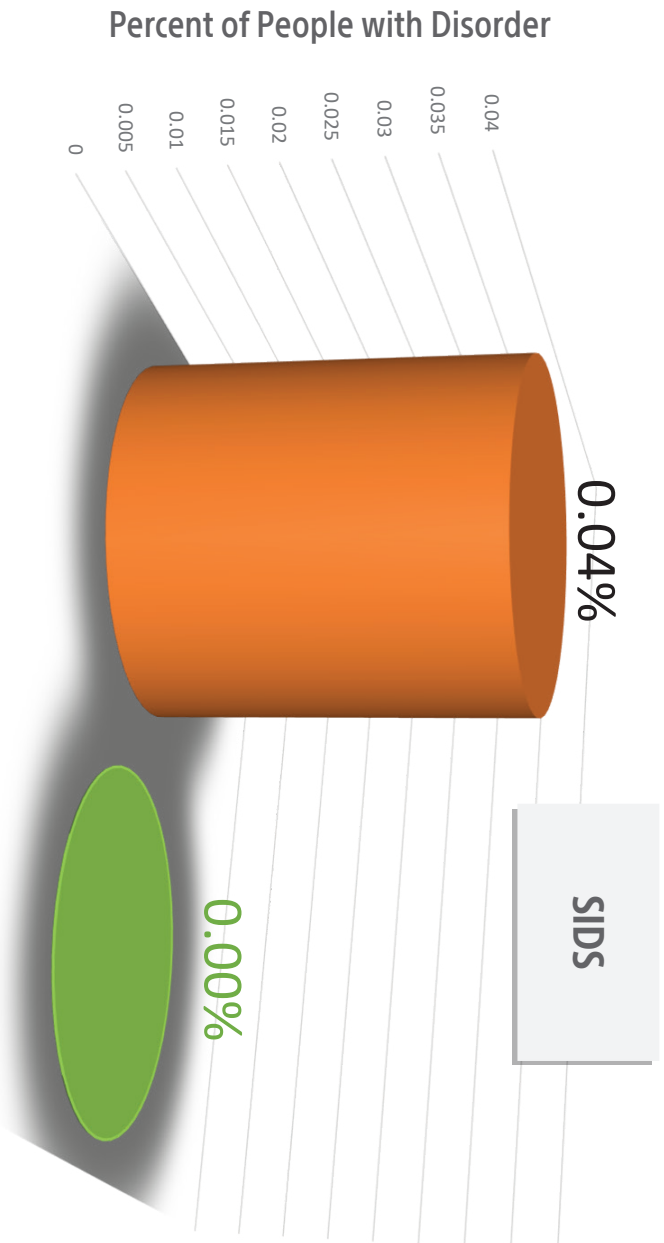
*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED -VS- UNVACCINATED



Unvaccinated Population

● Risk Factor in Total Population = 0.00%



“The cure cannot be worse than the problem itself.”

- President Donald J. Trump, October 22, 2020, Presidential Debate

● U.S. National data for approximately 99%+ Vaccinated Population

(Biomarkers of Sudden Infant Death Syndrome (SIDS) Risk and SIDS Death in SIDS Sudden Infant and Early Childhood Death: The Past, the Present and the Future. Duncan JR, Byard RW, eds. Adelaide (AU): University of Adelaide Press; 2018. <https://www.ncbi.nlm.nih.gov/books/NBK513404>)

● Pilot survey data for 100% Unvaccinated Control Group

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

VACCINATED - VS - UNVACCINATED



Unvaccinated Population

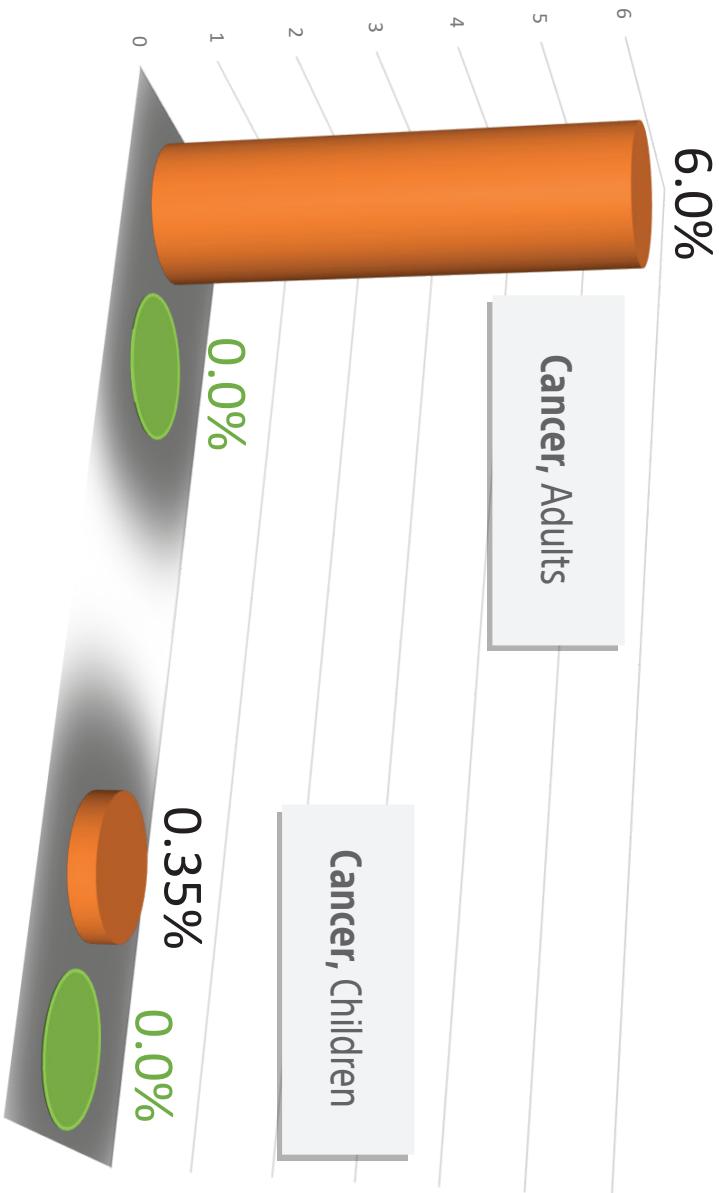
- Risk Factor in Total Population, Adults = 0.00%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of cancer in America. Specifically, the odds that this large control group of unvaccinated adults (as featured on this chart) would be exponentially healthier than vaccinated adults by mere chance: 1 in 439,694. This calculation is supported by the p-value 2.27E-06. See full report for detailed

- Risk Factor in Total Population, Children = 0.00%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of cancer in America. Specifically, the odds that this large control group of unvaccinated children (as featured on this chart) would be exponentially healthier than vaccinated children by mere chance: 1 in 86. This calculation is supported by the p-value 1.16E-02. See full report for detailed explanation.

Percent of People with Disorder



“The cure cannot be worse than the problem itself.”

- President Donald J. Trump, October 22, 2020, Presidential Debate

- U.S. National data for approximately 99%+ Vaccinated Population (CDC, Cancer Prevention and Control. https://www.cdc.gov/cancer/dcpcc/research/articles/cancer_2020.htm; ACCO, US Childhood Cancer Statistics. <https://www.acco.org/us-childhood-cancer-statistics/>)
- Pilot survey data for 100% Unvaccinated Control Group

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

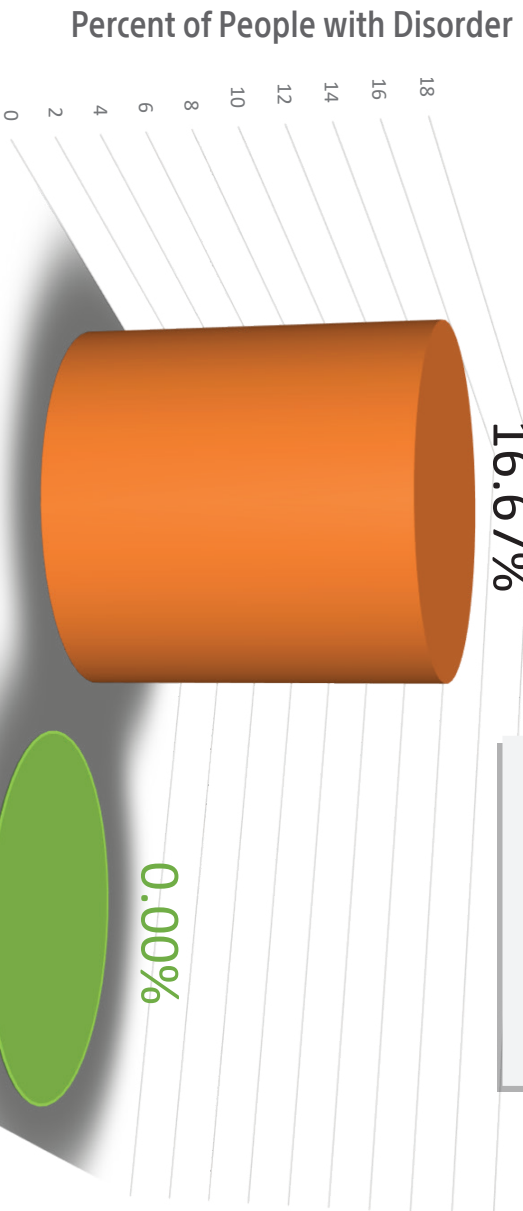
VACCINATED - VS - UNVACCINATED



Unvaccinated Population

● Risk Factor in Total Population = 0.00%

This pilot survey provides numerical proof that vaccines are causing an exponential increased risk of arthritis in America. Specifically, the odds that this large control group of unvaccinated people (as featured on this chart) would be exponentially healthier than vaccinated people by mere chance: 1 in 42,826,227,194,256,900. This calculation is supported by the p-value 2.34E-17. See full report for detailed explanation.



“The cure cannot be worse than the problem itself.”

- President Donald J. Trump, October 22, 2020, Presidential Debate



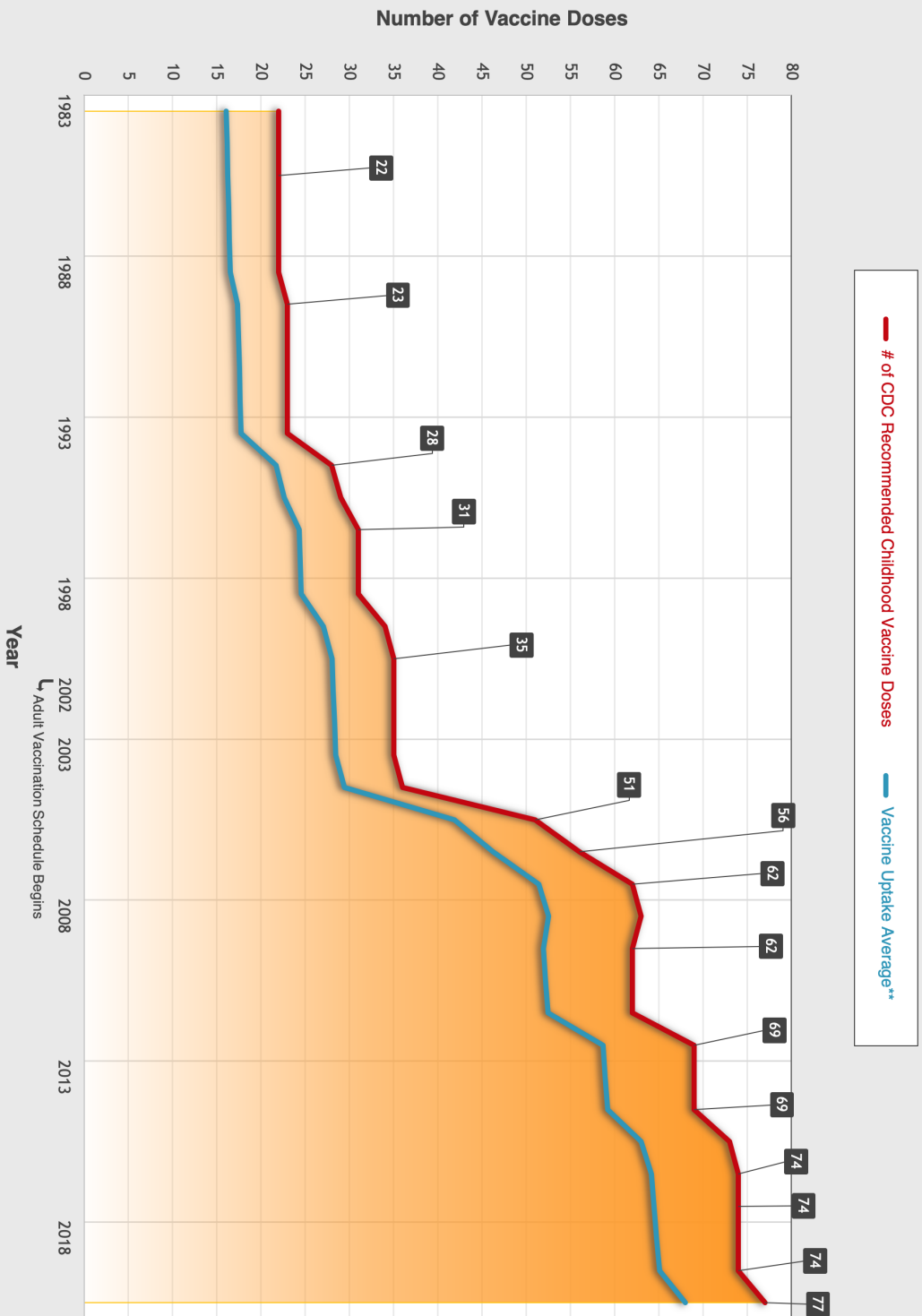
- U.S. National data for approximately 99%+ Vaccinated Population (CDC, Arthritis. https://www.cdc.gov/arthritis/data_statistics/state-data-current.htm)
- Pilot survey data for 100% Unvaccinated Control Group

*Total survey produced 99% Confidence Interval [5.95, 5.99] without finite population correction. Please see full report for all sample rates, equations, values, and methodology.

EXHIBIT 472

VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

Increase in the Number of Childhood Vaccine Doses

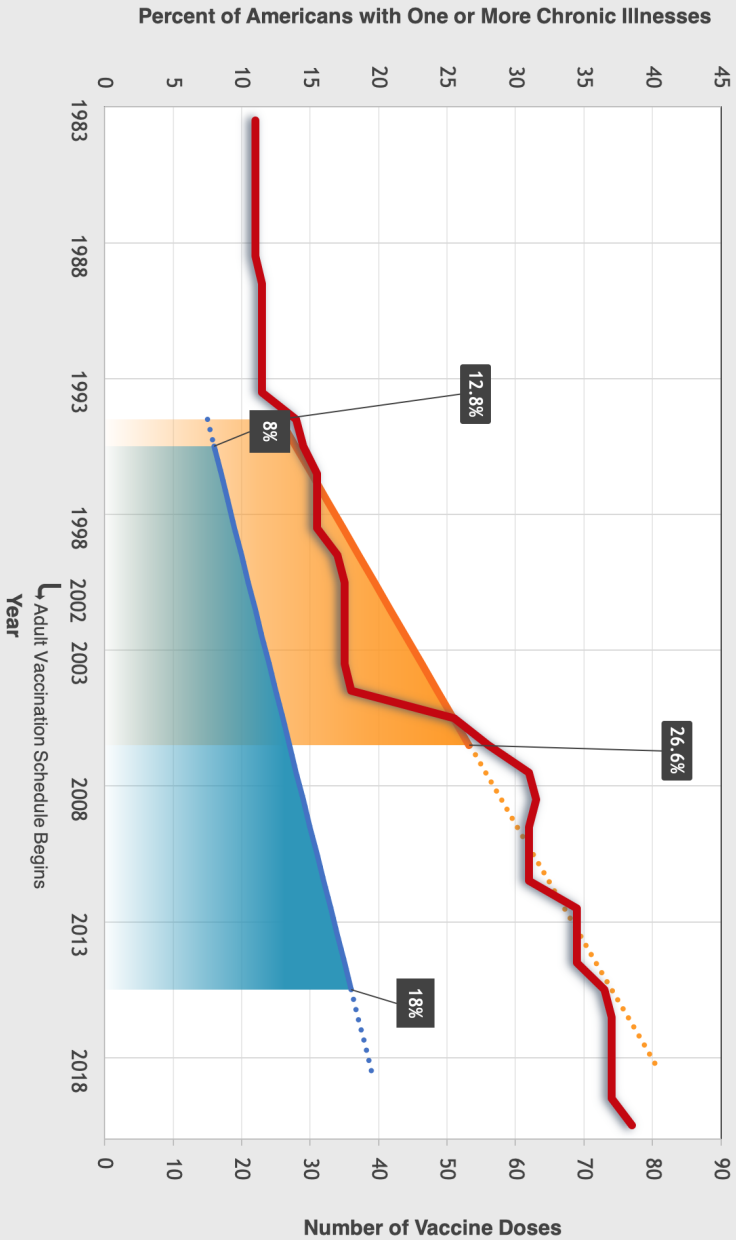


* CDC (2020) Prior Immunization schedules. <https://www.cdc.gov/vaccines/imz/downloads/prior-immunization-schedules-resources.html>
 ** CDC (2018) Vaccine Coverage Levels - United States, 1962-2016. The Pink Book, 13th Edition, Appendix E. <https://www.cdc.gov/vaccines/pinkbook/downloads/appendices/e/vaccine-coverage-levels.pdf>
 CDC (1971) Immunization Survey - 1970. *Weekly and Monthly* 2013:114-115. www.fda.gov/oc/ohrt/4405987
 CDC (2003) National, State, and Urban Area Vaccination Levels Among Children Aged 19-35 Months - United States, 2002. *MMWR* 52(131):728-732. <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm5213a1.htm>
 CDC (2008) National, State, and Local Area Vaccination Coverage Among Children Aged 19-35 Months - United States, 2007. *MMWR* 57(15):961-966. <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm5715a1.htm>
 CDC (2012) National, State, and Local Area Vaccination Coverage Among Children Aged 19-35 Months - United States, 2011. *MMWR* 61(13):689-696. <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6113a1.htm>
 CDC (2013) National, State, and Local Area Vaccination Coverage Among Children Aged 19-35 Months - United States, 2012. *MMWR* 62(12):733-740. <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6212a1.htm>
 CDC (2018) Vaccination Coverage Among Children Aged 19-35 Months - United States, 2017. *MMWR* 67(40):1123-1128. <https://www.cdc.gov/mmwr/volumes/67/wr/mm6740a4.htm>



VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

Increase in Chronic Disease Rates in the U.S. Population



Number of Vaccine Doses

† Correlation between Number of Vaccine Doses and Chronic Illnesses in Children: Correlation Coefficient = 0.99 (includes origin)
 ‡ Correlation between Number of Vaccine Doses and Adult Chronic Illnesses: Correlation Coefficient = 0.90 (includes origin)

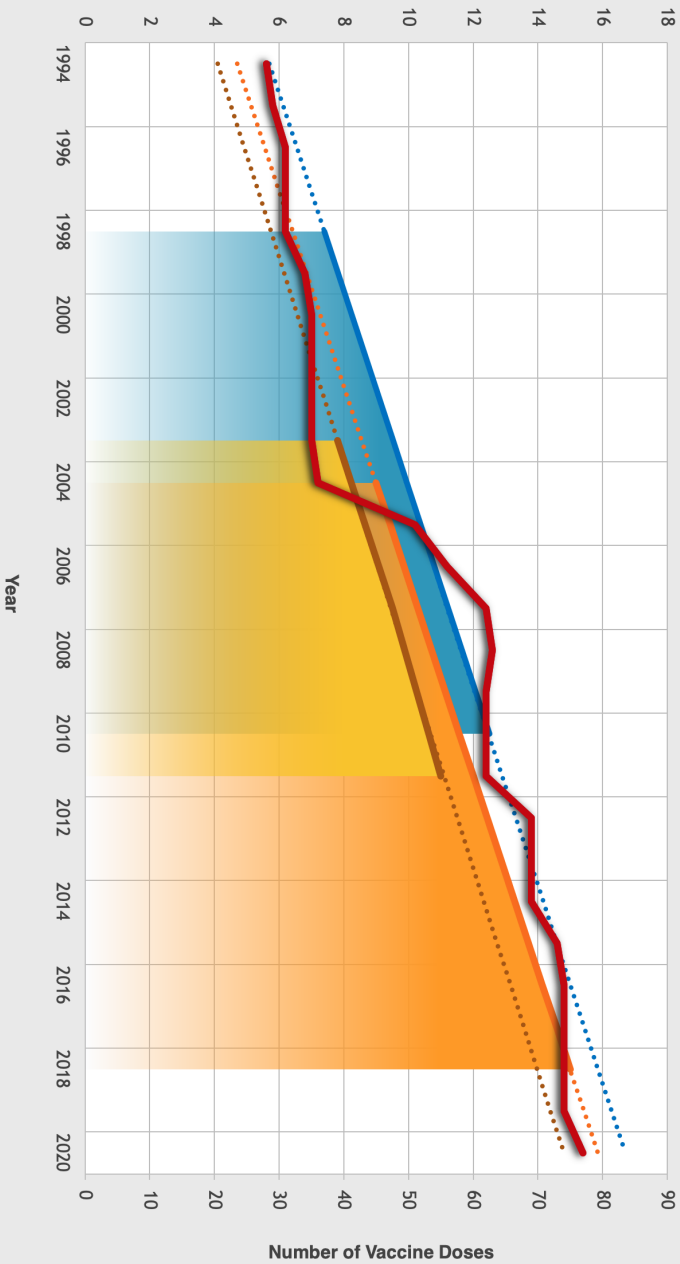
* Van Cleave et al. (2010). Dynamics of obesity and chronic health conditions among children and youth. *JAMA* 303(7):623-630. <https://doi.org/10.1001/jama.2010.104>
 ** Aspen Health Strategy Group (2019). Reducing the Burden of Chronic Disease. Washington DC: The Aspen Institute. <https://assets.aspeninstitute.org/content/uploads/2019/02/AHSG-Chronic-Disease-Report-2019.pdf>
 *** CDC (2020). Prior Immunization schedules. <https://www.cdc.gov/vaccines/schedules/nscv/schedule-related-resources.html>

Pearson Correlation Coefficient†	
1.0	Perfect Correlation
0.99 – 0.90	Very High Correlation
0.89 – 0.80	High Correlation
0.79 – 0.60	Moderately High Correlation
0.59 – 0.40	Moderate Correlation
0.39 – 0.20	Low Correlation
0.19 – 0.10	Negligible Correlation
< 0.09	No Correlation



VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

Increase in Miscellaneous Disease/Disorder Rates in U.S. Children



Pearson Correlation Coefficient†

This graph is here >>> **0.99 - 0.90** Perfect Correlation

0.89 - 0.80 High Correlation

0.79 - 0.60 Moderately High Correlation

0.59 - 0.40 Moderate Correlation

0.39 - 0.20 Low Correlation

0.19 - 0.10 Negligible Correlation

< 0.09 No Correlation

- Children with Skin Allergies*
- MDE (Major Depressive Episode) Age 12-17**
- Children with ADHD***
- # of CDC Recommended Childhood Vaccine Doses****

† Correlation between Number of Vaccine Doses and Skin Allergies: Correlation Coefficient = 0.99 (includes origin)

‡ Correlation between Number of Vaccine Doses and MDE: Correlation Coefficient = 0.99 (includes origin)

§ Correlation between Number of Vaccine Doses and ADHD: Correlation Coefficient = 0.99 (includes origin)

* CDC (2013). Trends in Allergic Conditions Among Children United States, 1997-2011. <https://www.cdc.gov/nchs/data/ahar/aharbrk5/dbr121.pdf> United States Centers for Disease Control (CDC). Trends in the Parent-Report of Health Care

** SAMHSA (2018). Key Substance Use and Mental Health Indicators in the United States: Results from the 2018 National Survey on Drug Use and Health. <https://www.samhsa.gov/data/sites/default/files/2k18-nhsr-report/2018NSDUHNationalFindingsReport2018.pdf>

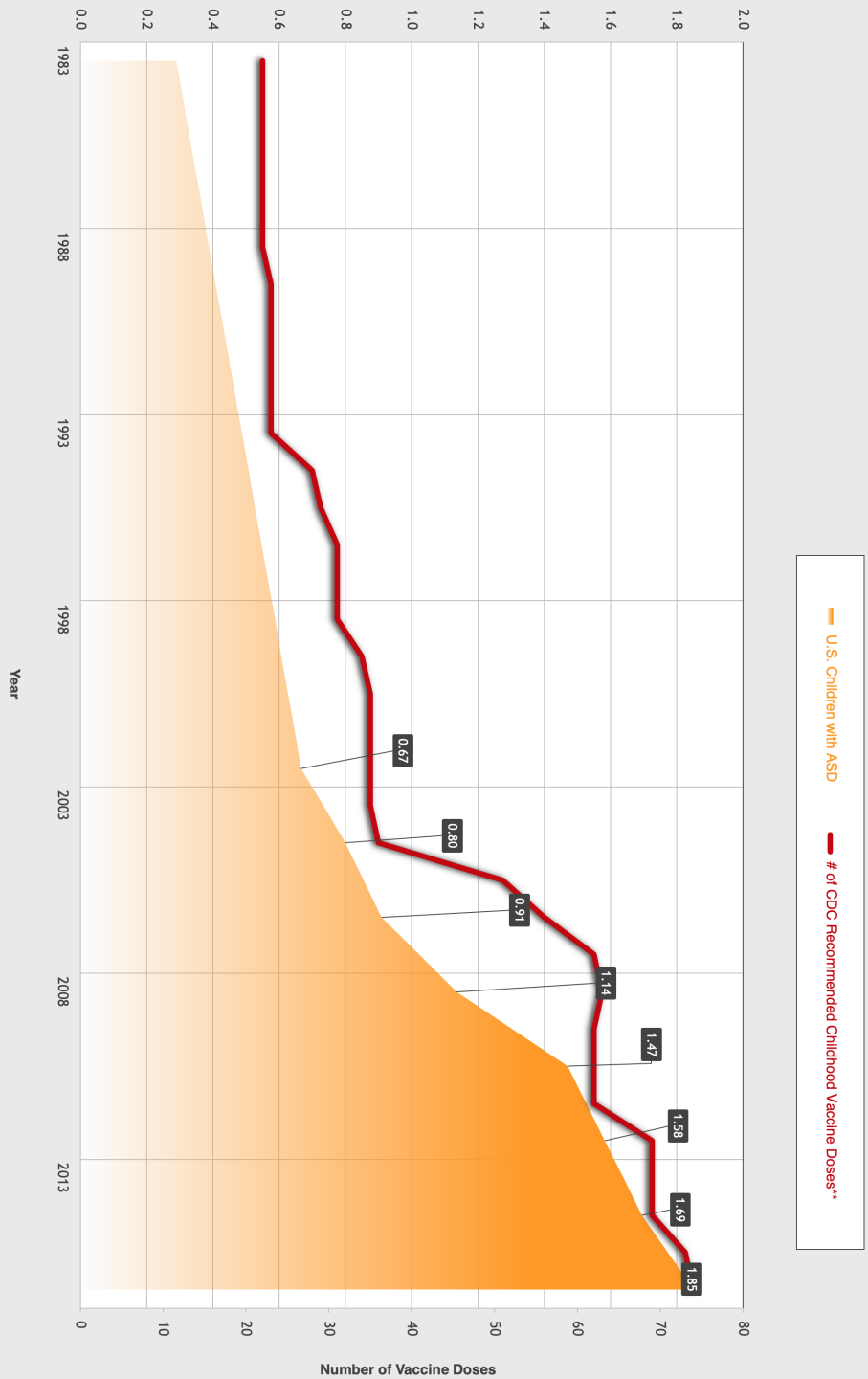
*** CDC. Attention-Deficit / Hyperactivity Disorder (ADHD). <https://www.cdc.gov/nbddd/atlhd/features/Key-Findings-adhd2013.html>

**** CDC (2020). Prior Immunization schedules. <https://www.cdc.gov/vaccines/schedules/Ascp/schedule-related-resources.html>



VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

Increase in Autism Spectrum Disorder (ASD) in U.S. Children



† Correlation between Number of Vaccine Doses and ASD: Correlation Coefficient = 0.93
 * Nelson et al. (2018). California autism prevalence trends from 1991 to 2014 and comparison to national ASD data from IDEA and ADDM. *Journal of Autism and Developmental Disorders*, 48:4103-4117. <https://doi.org/10.1007/s10803-018-3670-2> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6144444/>
 ** CDC (2020). Prior immunization schedules. <https://www.cdc.gov/nczod/diseases/zoonotic/diagnosable/prior-immunization-schedules>

Pearson Correlation Coefficient†

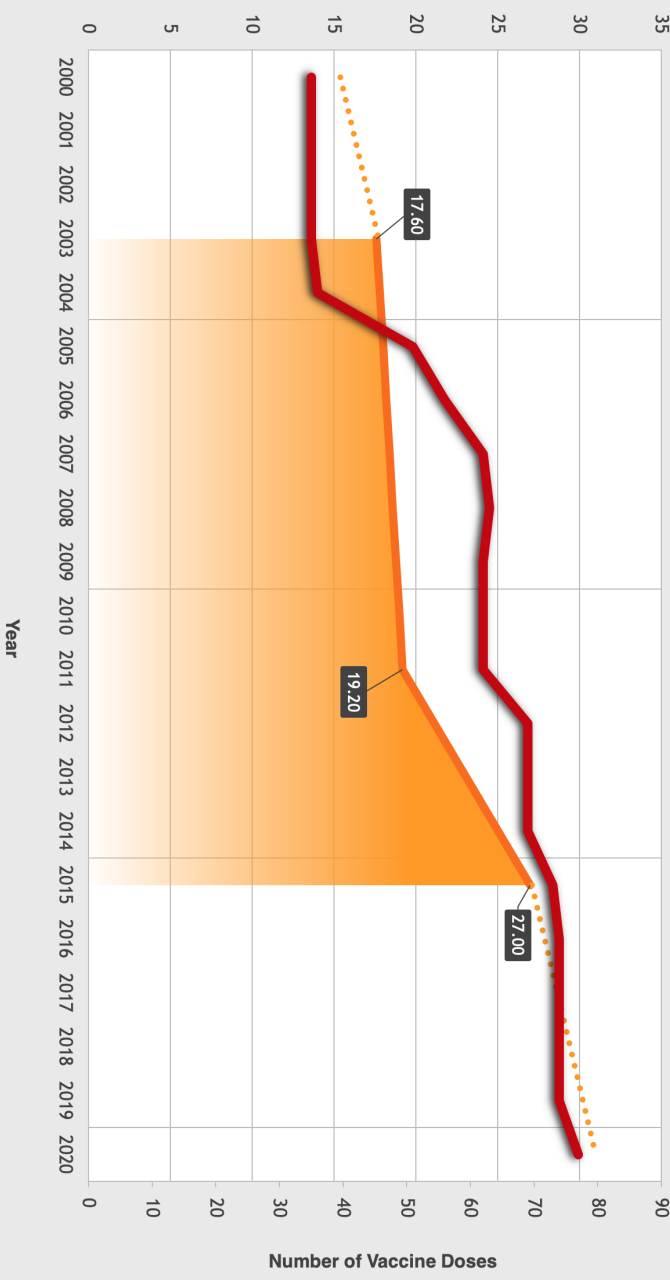
1.0	Perfect Correlation
0.99 – 0.90	Very High Correlation
0.89 – 0.80	High Correlation
0.79 – 0.60	Moderately High Correlation
0.59 – 0.40	Moderate Correlation
0.39 – 0.20	Low Correlation
0.19 – 0.10	Negligible Correlation
< 0.09	No Correlation

This graph is here



VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

Increase in U.S. Children with Special Healthcare Needs



+ Correlation between Number of Vaccine Doses and Percent of U.S. Children with Special Healthcare Needs: Correlation Coefficient = 0.96 (includes origin)
 * Bethell et al. (2011). A national and state profile of leading health problems and health care quality for US children: key insurance disparities and across-state variations. *Academic Pediatrics* 11(13 Suppl):S22-S33. <https://doi.org/10.1016/j.aap.2010.08.011>
 CDC, *Preventing Chronic Disease*. https://www.cdc.gov/pcd/issues/2015/12_p097.htm
 ** CDC (2020). Prior immunization schedules. <https://www.cdc.gov/vaccines/schedules/hpdp/schedule-related-resources.html>

Pearson Correlation Coefficient**

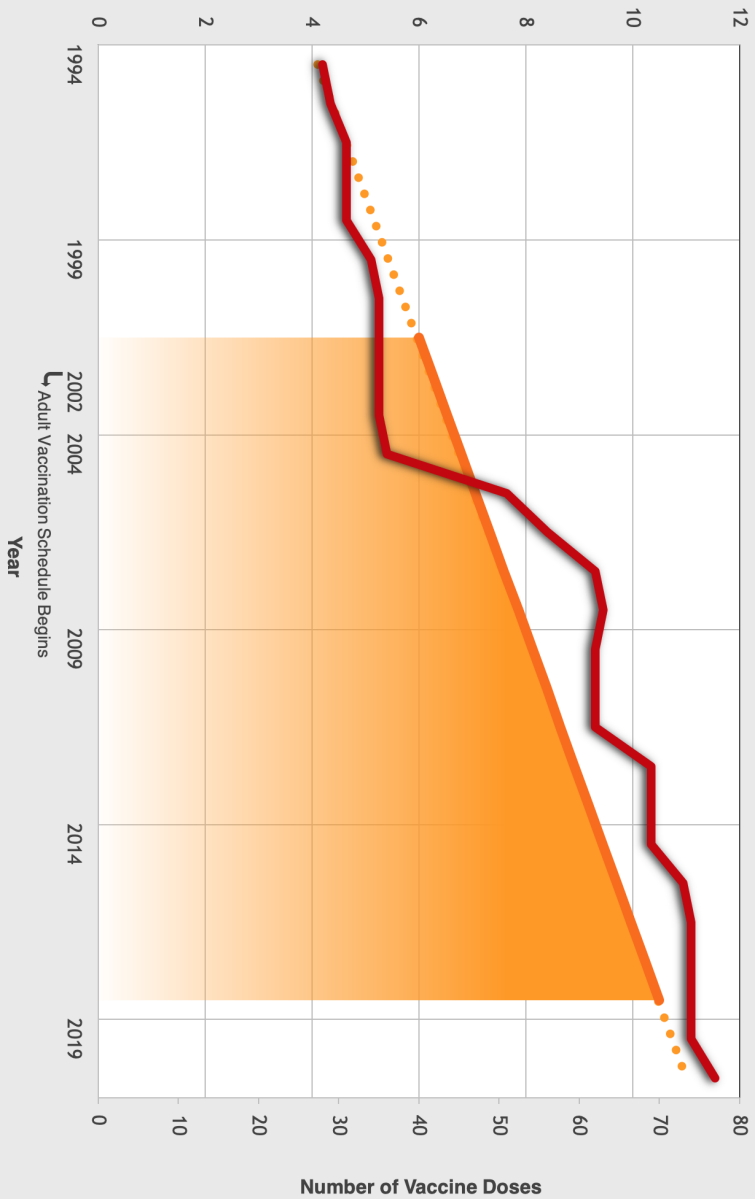
This graph is here >>> 1.0 Perfect Correlation
 0.99 - 0.90 Very High Correlation
 0.89 - 0.80 High Correlation
 0.79 - 0.60 Moderately High Correlation
 0.59 - 0.40 Moderate Correlation
 0.39 - 0.20 Low Correlation
 0.19 - 0.10 Negligible Correlation
 < 0.09 No Correlation

— U.S. Children with Special Healthcare Needs*
 — # of CDC Recommended Childhood Vaccine Doses**



VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

Diabetes Increasing In Americans



+ Correlation between Number of Vaccine Doses and Percent of Americans with Diabetes: Correlation Coefficient = 0.98 (includes origin)
 * American Diabetes Association, *Statistics About Diabetes*, <https://www.diabetes.org/resources/statistics/factsheets/about-diabetes>
 Diabetes et al. (2014), *Prevalence of type 1 and type 2 diabetes among children and adolescents from 2001 to 2009*, *JAMA* 311(17):1778-1786. <https://doi.org/10.1001/jama.2014.3201>
 ** CDC (2020), *Prior Immunization Schedules*, <https://www.cdc.gov/vaccines/schedules/child/schedule-child.html>

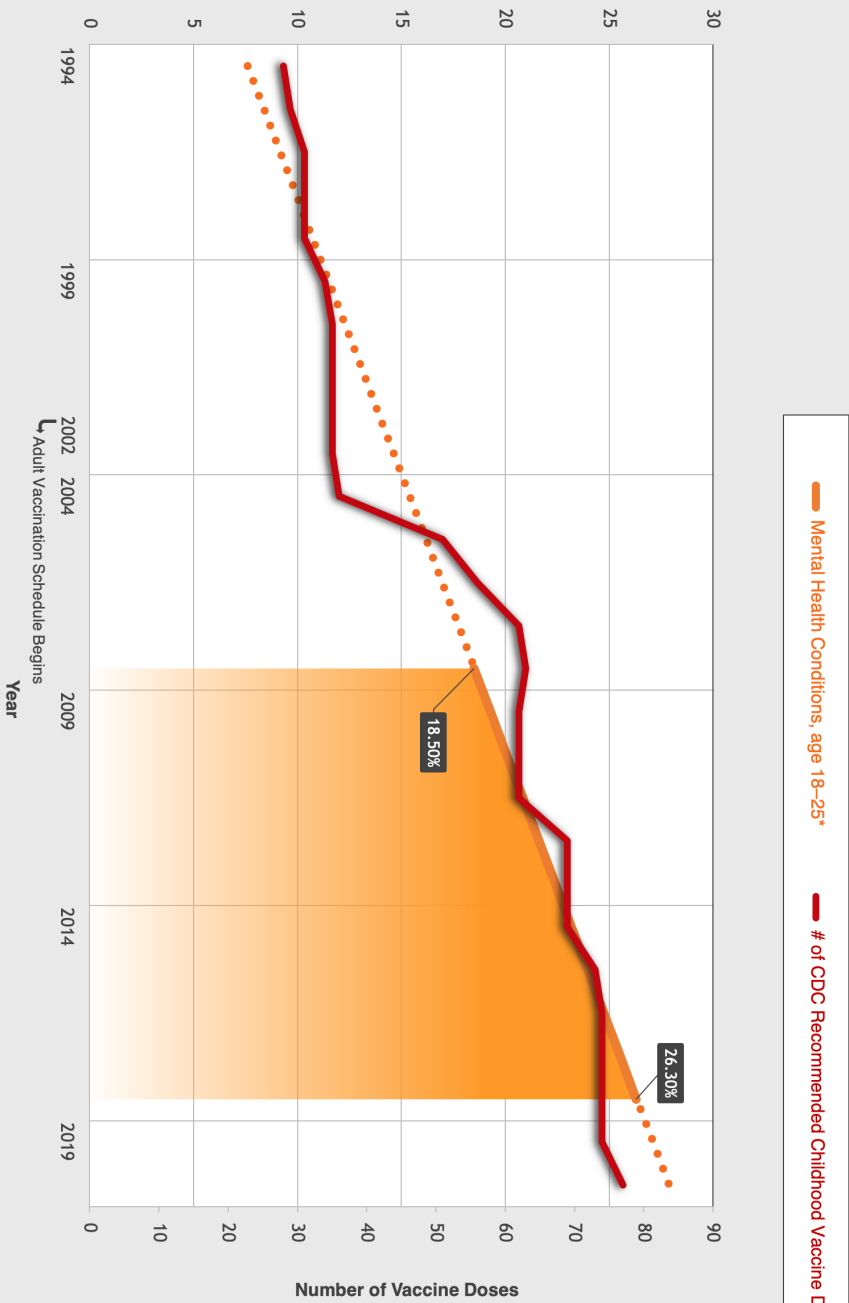
Pearson Correlation Coefficient†

This graph is here >>> **0.99 – 0.90** Perfect Correlation
 0.89 – 0.80 Very High Correlation
 0.79 – 0.60 High Correlation
 0.59 – 0.40 Moderately High Correlation
 0.39 – 0.20 Moderate Correlation
 0.19 – 0.10 Low Correlation
 < 0.09 Negligible Correlation
 No Correlation

Diabetes *
 # of CDC Recommended Childhood Vaccine Doses**

VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

Increase in Mental Health Conditions, age 18–25 in the U.S.



† Correlation between Number of Vaccine Doses and Percent of Americans with Mental Health Conditions; Correlation Coefficient = 0.99 (includes origin)

* SAMHSA (2018). Key Substance Use and Mental Health Indicators in the United States: Results from the 2018 National Survey on Drug Use and Health. <https://www.samhsa.gov/2k18/files/default/files/2k18-cr-reports/NSDUH-national-findings-report-2018/NSDUH-national-findings-report-2018.pdf>

** CDC (2020). Prior Immunization Schedules. <https://www.cdc.gov/vaccines/schedules/hcp/schedule-related-resources.html>

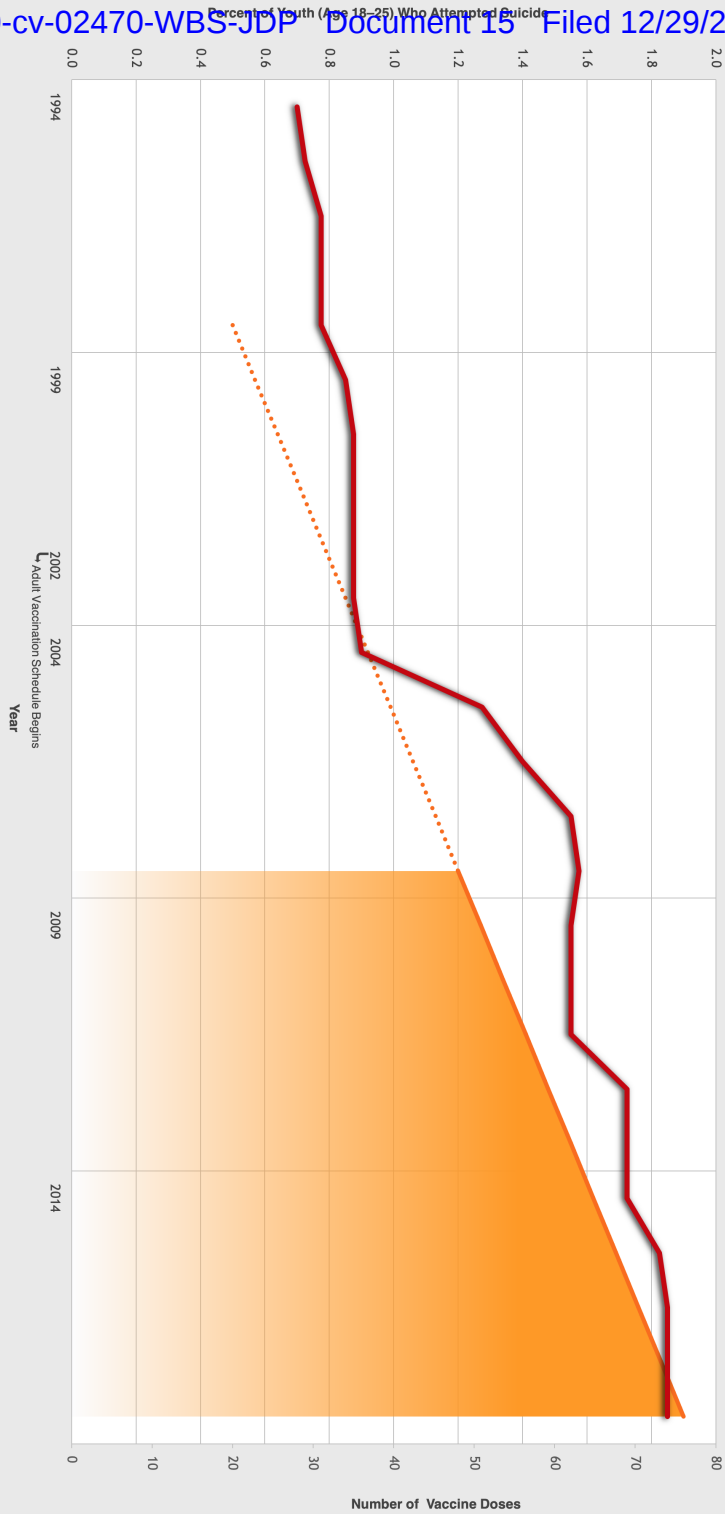
Pearson Correlation Coefficient†	
1.0	Perfect Correlation
0.99 – 0.90	Very High Correlation
0.89 – 0.80	High Correlation
0.79 – 0.60	Moderately High Correlation
0.59 – 0.40	Moderate Correlation
0.39 – 0.20	Low Correlation
0.19 – 0.10	Negligible Correlation
< 0.09	No Correlation

This graph is here

VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

A Bellwether for Mental Health

Increase in Attempted Suicide, Age 18-25 in the U.S.



+ Correlation between Number of Vaccine Doses and Attempted Suicide, age 18-25; Correlation Coefficient = 0.97 (includes origin)
 * SAMHSA (2018). Key Substance Use and Mental Health Indicators in the United States: Results from the 2018 National Survey on Drug Use and Health. <https://www.samhsa.gov/2k18/key-substance-use-and-mental-health-indicators-in-the-united-states>
 ** CDC (2019). 1999 Immunization Schedule. <https://www.cdc.gov/vaccines/imz/downloads/pdf/1999-immunization-schedule.pdf>

Pearson Correlation Coefficient†

This graph is here

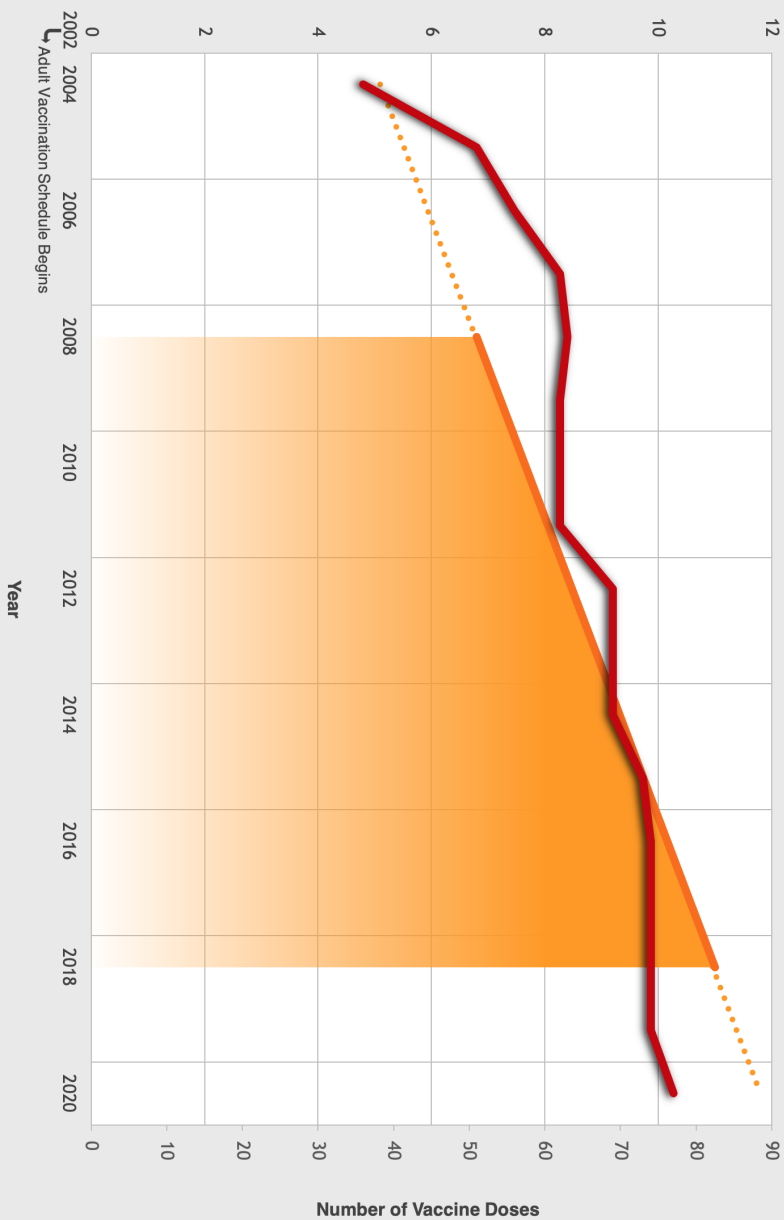
- 1.0 Perfect Correlation
- 0.99 - 0.90 Very High Correlation
- 0.89 - 0.80 High Correlation
- 0.79 - 0.60 Moderately High Correlation
- 0.59 - 0.40 Moderate Correlation
- 0.39 - 0.20 Low Correlation
- 0.19 - 0.10 Negligible Correlation
- < 0.09 No Correlation

— Attempted Suicide*

— # of CDC Recommended Childhood Vaccine Doses**

VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

A Bellwether for Mental Health Serious Thoughts of Suicide, Age 18–25 in the U.S.



+ Correlation between Number of Vaccine Doses and Percent of Americans with Serious Thoughts of Suicide: Correlation Coefficient = 0.97 (includes origin)

* SAMHSA (2018). *Key Substance Use and Mental Health Indicators in the United States: Results from the 2018 National Survey on Drug Use and Health*. <https://www.samhsa.gov/data/files/default/files/ckbbsr-reports/NSDUHNationalFindingsReport2018.pdf>
 ** CDC (2020). *Prior immunization schedules*. <https://www.cdc.gov/vaccines/schedules/who/schedule-related-resources.html>

Pearson Correlation Coefficient†

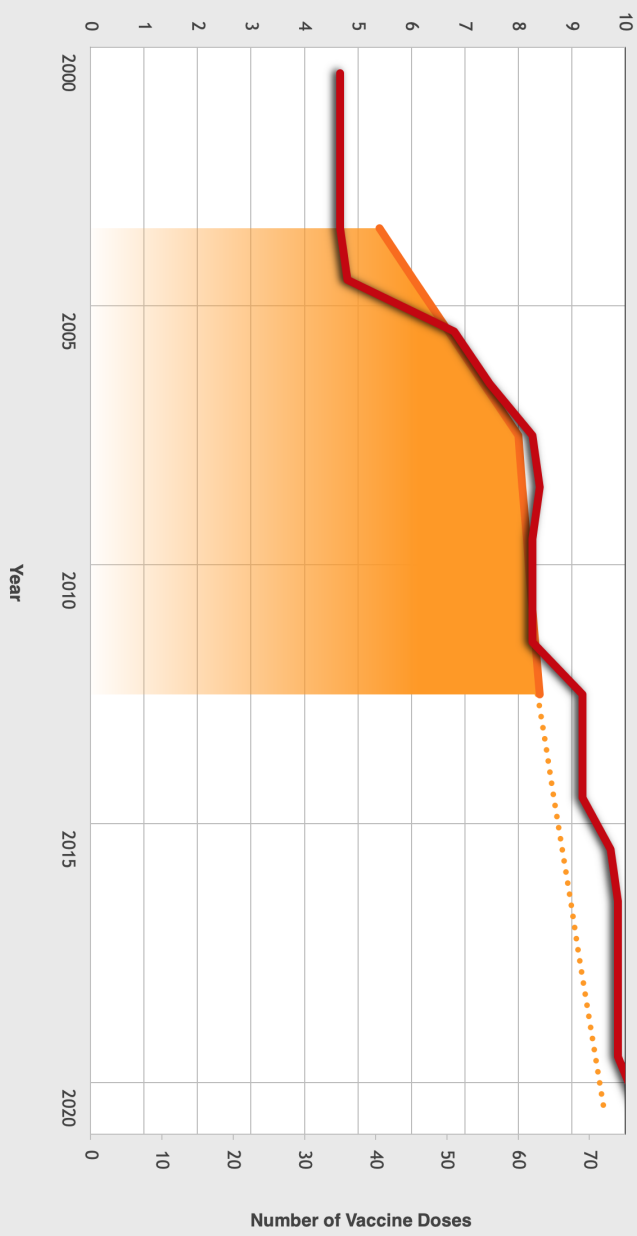
This graph is here **>>> 0.99–0.90** **Very High Correlation**

1.0	Perfect Correlation
0.89–0.80	High Correlation
0.79–0.60	Moderately High Correlation
0.59–0.40	Moderate Correlation
0.39–0.20	Low Correlation
0.19–0.10	Negligible Correlation
< 0.09	No Correlation

- Serious Thoughts of Suicide*
- # of CDC Recommended Childhood Vaccine Doses**

VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

A Bellwether for Mental Health Increase in Anxiety or Depression in U.S. Children, Age 6–17



+ Correlation between Number of Vaccine Doses and Percent of Children with Anxiety or Depression: Correlation Coefficient = 0.99 (includes origin)
 * CDC Children's Mental Health, <https://www.cdc.gov/childrementalhealth/features/anxiety-depression-children.html>
 ** CDC (2020). Prior Immunization Schedules. <https://www.cdc.gov/vaccines/schedules/hcp/schedule-related-resources.html>

Pearson Correlation Coefficient†

This graph is here **>>> 0.99 – 0.90** **Very High Correlation**

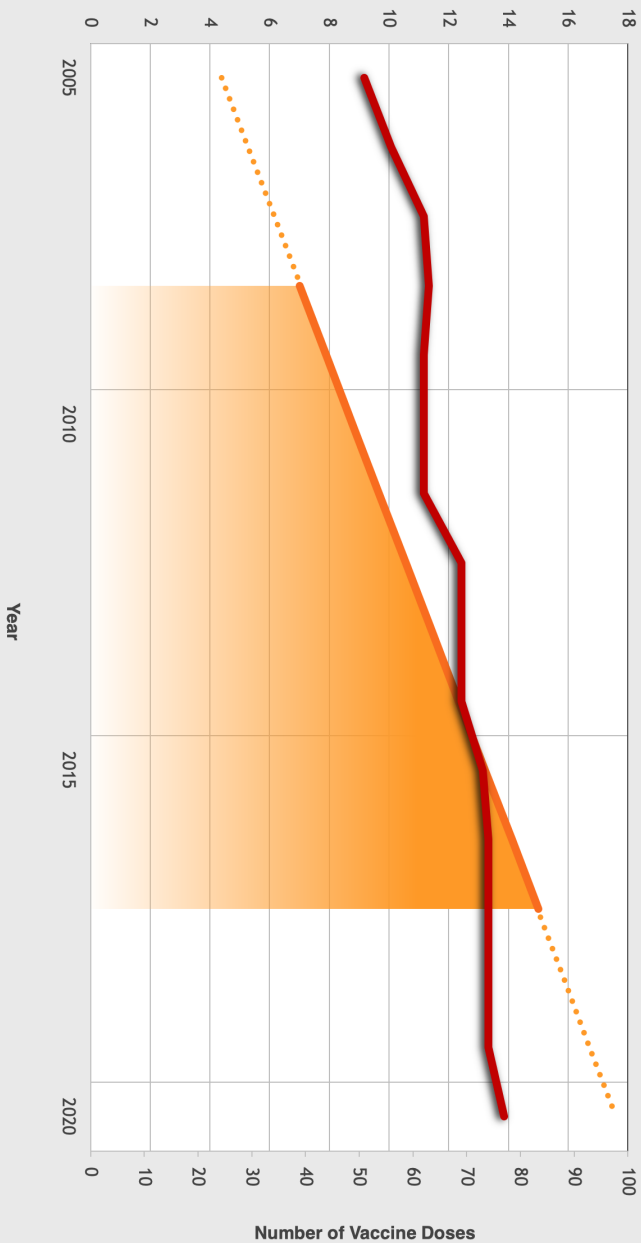
1.0	Perfect Correlation
0.99 – 0.90	Very High Correlation
0.89 – 0.80	High Correlation
0.79 – 0.60	Moderately High Correlation
0.59 – 0.40	Moderate Correlation
0.39 – 0.20	Low Correlation
0.19 – 0.10	Negligible Correlation
< 0.09	No Correlation

Anxiety or Depression*

of CDC Recommended Childhood Vaccine Doses**



Percent of 20–21 Year Olds with Major Depression



+ Correlation between Number of Vaccine Doses and Percent of 20–21 Year Olds with Major Depression: Correlation Coefficient = 0.91 (includes origin)
 * SAMHSA (2017), National Survey on Drug Use and Health, 2017. <https://www.datafiles.samhsa.gov/study-data/ncadd/ncadd-2017-nsduh-2017-4d8003-4nd17399>
 ** CDC (2020), Prior Immunization Schedules. <https://www.cdc.gov/nczod/diseases/zoonotic/d192020a.htm>

VACCINES ARE A REASONABLE SUSPECT IN AMERICA'S PANDEMIC OF CHRONIC DISEASES AND DISORDERS

A Bellwether for Mental Health
 Increase in Major Depression among 20–21 Year-olds in the U.S.

Pearson Correlation Coefficient†

This graph is here **>>> 0.99 – 0.90** **Very High Correlation**

1.0	Perfect Correlation
0.89 – 0.80	High Correlation
0.79 – 0.60	Moderately High Correlation
0.59 – 0.40	Moderate Correlation
0.39 – 0.20	Low Correlation
0.19 – 0.10	Negligible Correlation
<0.09	No Correlation

Major Depression*

of CDC Recommended Childhood Vaccine Doses**

EXHIBIT 473

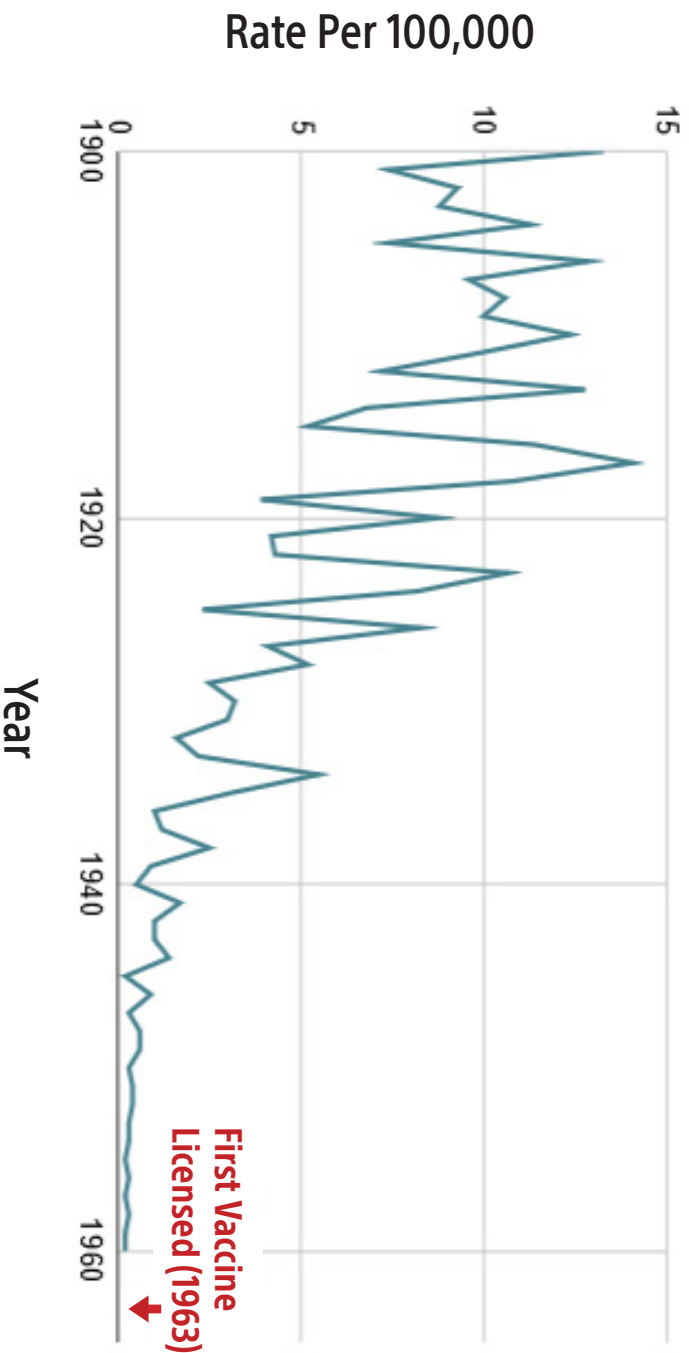


20TH CENTURY DISEASE MORTALITY

Reductions Caused By Improved Living Conditions Prior To Vaccines

Exhibit 473

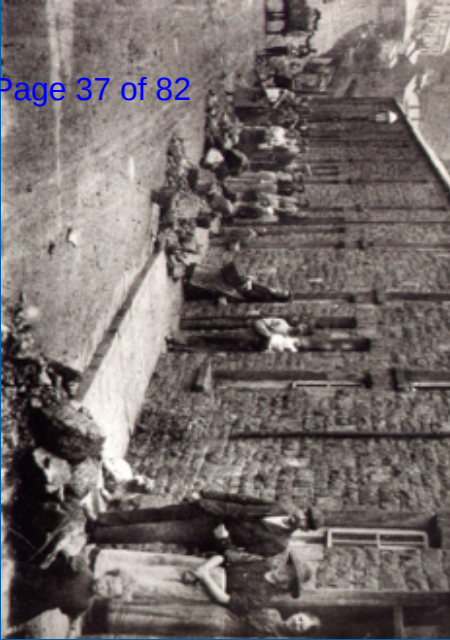
Measles Disease Mortality United States, 1900-1960¹



1

SOURCES:

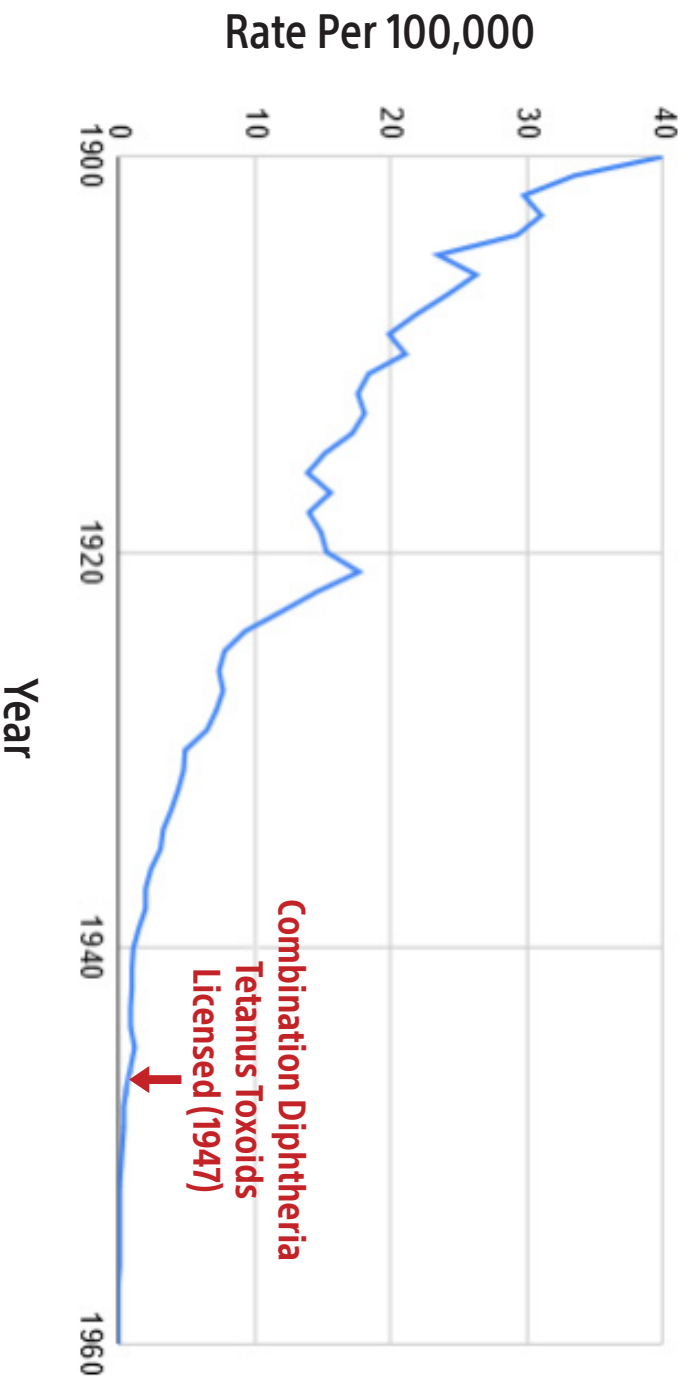
1. Grove, R., D., Hetzel, A., M., (1968). Vital statistics rates in the United States, 1940-1960, pp 559 - 603. Washington, D. C.: U.S. Department of Health, Education, and Welfare, Public Health Service, National Center for Health Statistics, 1968. 2. "The first measles vaccines were licensed in 1963." Centers for Disease Control and Prevention. Epidemiology and Prevention of Vaccine-Preventable Diseases. Hamborsky J, Kroger A, Wolfe S, eds. 13th ed. Washington D.C.: Public Health Foundation, 2015.



20TH CENTURY DISEASE MORTALITY Reductions Caused By Improved Living Conditions Prior To Vaccines

Exhibit 473

Diphtheria Disease Mortality United States, 1900-1960¹



SOURCES:

1. Grove R., D., Hetzel A., M., (1968). Vital statistics rates in the United States, 1940-1960, pp 559 - 603. Washington, D.C.: U.S. Department of Health, Education, and Welfare, Public Health Service, National Center for Health Statistics, 1968. 2. Antitoxin was invented in the late 19th century, and toxoid was developed in the 1920s. Widespread use of diphtheria toxoid in the late 1940s. Centers for Disease Control and Prevention. Epidemiology and Prevention of Vaccine-Preventable Diseases. Hamborsky J, Kroger A, Wolfe S, eds. 13th ed. Washington D.C. Public Health Foundation, 2015.

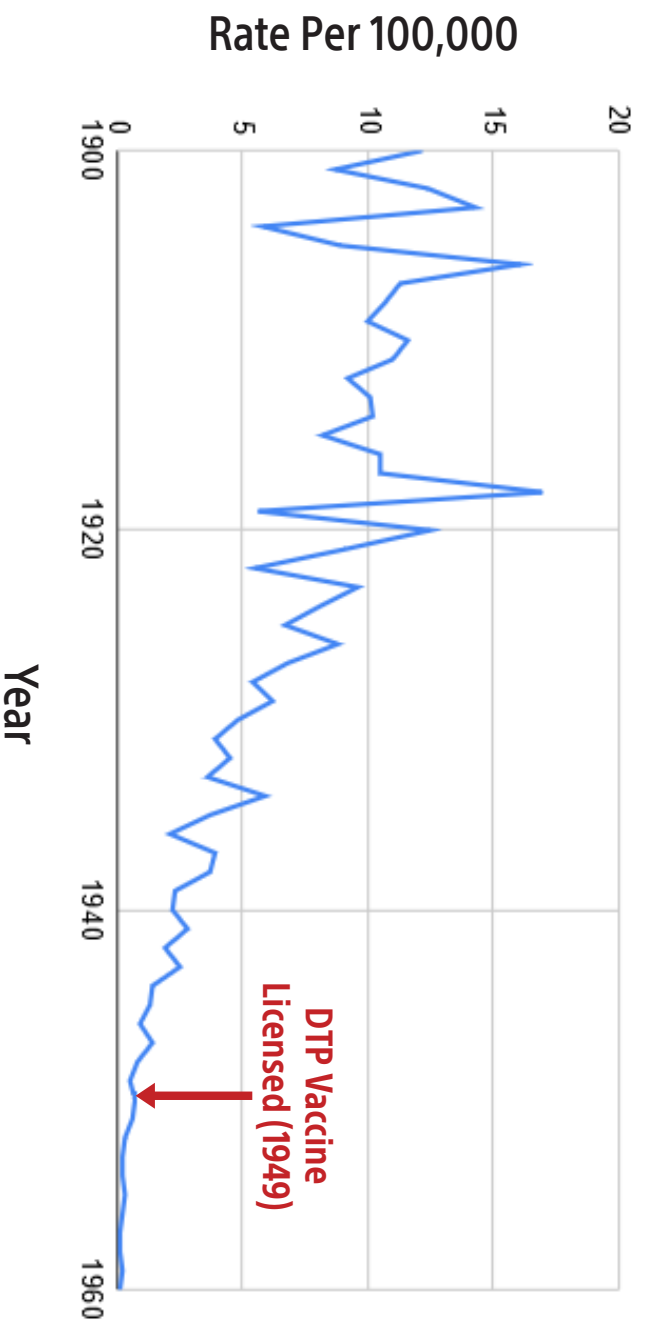


20TH CENTURY DISEASE MORTALITY

Reductions Caused By Improved Living Conditions Prior To Vaccines

Exhibit 473

Whooping Cough Disease Mortality United States, 1900-1960^{1,2}



SOURCES:
1. Grove, R., D., Hetzel, A., M., (1968). Vital statistics rates in the United States, 1940-1960, pp 559 - 603. Washington, D. C.: U.S. Department of Health, Education, and Welfare. Public Health Service. National Center for Health Statistics, 1968. 2. "Before the availability of pertussis vaccine in the 1940s, more than 200,000 cases of pertussis were reported annually." Centers for Disease Control and Prevention. Epidemiology and Prevention of Vaccine-Preventable Diseases. Hamborsky J, Kroger A, Wolfe S, eds. 13th ed. Washington D.C. Public Health Foundation, 2015.

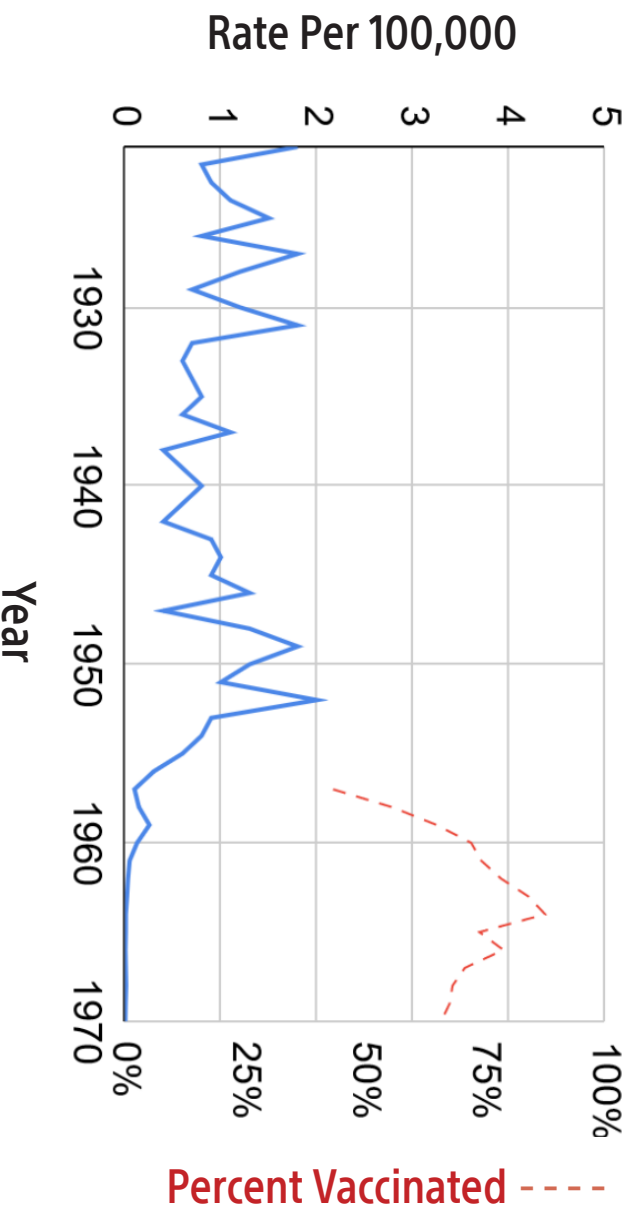


20TH CENTURY DISEASE MORTALITY

Reductions Caused By Improved Living Conditions Prior To Vaccines

Exhibit 473

Polio Disease Mortality United States, 1921-1970¹⁻⁶



4

SOURCES:

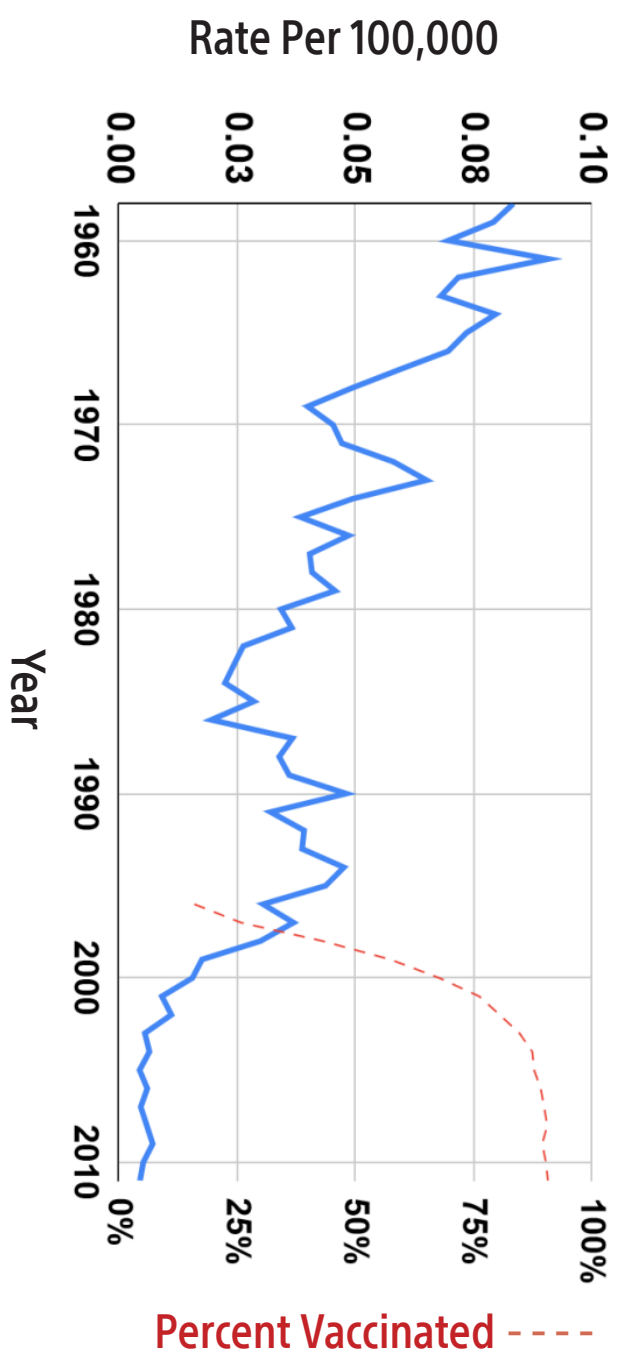
1. Sirkken, M. G. National Participation Trends, 1955-61, in the Poliomyelitis Vaccination Program. Pub. HealthRep. 77: 661-670(Aug.), 1962. 11 2. Morbidity and Mortality Vol. 20, No. 13 (April 3, 1971), pp. 114-115 (2 pages) IMMUNIZATION SURVEY - 1970 (1971), from www.istor.org/stable/440699873. Centers for Disease Control and Prevention. Epidemiology and Prevention of Vaccine-Preventable Diseases. Appendix E. Vaccine Coverage Levels, United States, 1962-2016. Hamborsky J, Kroger A, Wolfe S, eds. 13th ed. Washington D.C. Public Health Foundation, 2018. 4. Grove, R., D., Hetzel, A., M., (1968). Vital statistics rates in the United States, 1940-1960, pp 559 - 603. Washington, D.C.: U.S. Department of Health, Education, and Welfare, Public Health Service, National Center for Health Statistics, 1968. 5. Centers for Disease Control. Annual summary 1969: reported morbidity and mortality in the United States. Morbidity Mortality Weekly Rep 1970;18(54). <https://stacks.cdc.gov/view/cdc/1829> 6. Centers for Disease Control. Annual summary 1971: reported morbidity and mortality in the United States. Morbidity Mortality Weekly Rep 1972;20(53). <https://stacks.cdc.gov/view/cdc/11577>



20TH CENTURY DISEASE MORTALITY Reductions Caused By Improved Living Conditions Prior To Vaccines

Exhibit 473

Varicella (Chicken Pox) Disease Mortality United States, 1958-2011¹⁻¹⁰



SOURCES:

1. 1959 - 1968: Centers for Disease Control. Annual summary 1969: reported morbidity and mortality in the United States. Morbidity Mortality Weekly Rep 1970: 181(54). <https://stacks.cdc.gov/view/cdc/18292>. 1969 - 1978: Centers for Disease Control. Annual summary 1971: reported morbidity and mortality in the United States. Morbidity Mortality Weekly Rep 1972: 201(53). <https://stacks.cdc.gov/view/cdc/15773>. 1970 - 1979: Centers for Disease Control. Annual summary 1980: reported morbidity and mortality in the United States. Morbidity Mortality Weekly Rep 1981: 291(54). <https://stacks.cdc.gov/view/cdc/14844>. 1980 - 1989: Centers for Disease Control. Summary of notifiable diseases. United States, 1991. Morbidity and Mortality Weekly Report 1991: 40(53). <https://stacks.cdc.gov/view/cdc/36010>. 5. 1989 - 1998: Centers for Disease Control and Prevention. Summary of notifiable diseases. United States, 2000. MMWR 2000: 49(Nos. 53):1-90. <https://stacks.cdc.gov/view/cdc/56266>. 6. 1996 - 2001: Centers for Disease Control and Prevention. Summary of notifiable diseases. United States, 2003. Published April 22, 2005. for MMWR 2003: 52(Nos. 54):1-78. <https://stacks.cdc.gov/view/cdc/55607>. 2002 - 2003: Centers for Disease Control and Prevention. Summary of notifiable diseases. 2010. MMWR 2007: 56:182. <https://stacks.cdc.gov/view/cdc/212668>. 2004 - 2010: Centers for Disease Control and Prevention. Summary of Notifiable Diseases. 2012. Published September 19, 2014. for MMWR 2014: 61(Nos. 53):1-12. <https://stacks.cdc.gov/view/cdc/252899>. 2008 - 2014. Adams DA, Thomas KR, Jajosek R, et al. Summary of Notifiable Infectious Diseases and Conditions—United States, 2014. MMWR Morb Mortal Wkly Rep 2016; 65:1-152 DOI: <http://dx.doi.org/10.15585/mmwr.mm65a4externalicon>. 10. Centers for Disease Control and Prevention. Epidemiology and Prevention of Vaccine-Preventable Diseases. Appendix E. Vaccine Coverage Levels. United States: 1962-2016. Hamborsky J, Kroger A, Wolfe S, eds. 13th ed. Washington D.C. Public Health Foundation, 2018.

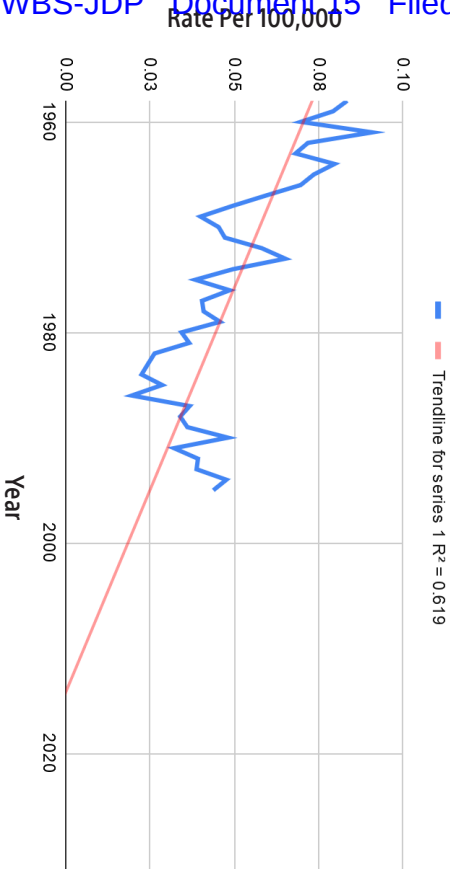


20TH CENTURY DISEASE MORTALITY

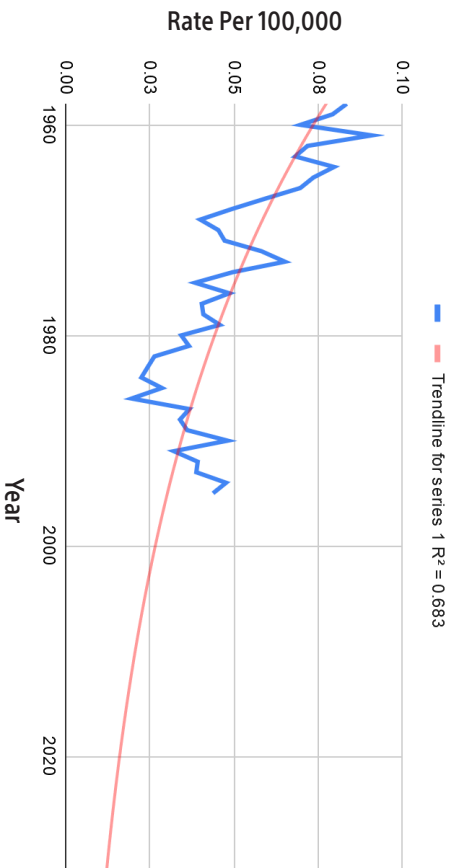
Reductions Caused By Improved Living Conditions Prior To Vaccines

Exhibit 473

Varicella (Chicken Pox) Disease Mortality with Trendline (Linear)¹⁻¹⁰



Varicella (Chicken Pox) Disease Mortality with Trendline (Exponential)¹⁻¹⁰



Parameter	Best-fit values	95% Confidence Intervals	Is slope significantly non-zero?	Data
Slope	0.001291 ± 0.0001738	-0.001644 to -0.0009384	F: 55.16	Number of XY pairs: 38
Y-intercept	2.601 ± 0.3436	1.904 to 3.299	D/Fn, D/Fd: 1.36	Equation: Y = -0.001291*X + 2.601
X-intercept	2015	2006 to 2030	P Value: < 0.0001	
1/Slope	-774.5		Deviation from horizontal?: Significant	

Goodness of Fit: R square 0.6051, S/yx 0.01175

Refer to "x-intercept" below

SOURCES:

1. 1959 - 1968: Centers for Disease Control. Annual summary 1969: reported morbidity and mortality in the United States. Morbidity Weekly Rep 1970: 181(54). <https://stacks.cdc.gov/view/cdc/18292>.

2. 1969 - 1978: Centers for Disease Control. Annual summary 1978: reported morbidity and mortality in the United States. Morbidity Weekly Rep 1979: 199(19). <https://stacks.cdc.gov/view/cdc/15773>.

3. 1979 - 1989: Centers for Disease Control. Summary of notifiable diseases. United States, 1991. Morbidity and Mortality Weekly Report 1991: 40(53). <https://stacks.cdc.gov/view/cdc/756010>.

4. 1989 - 1998: Centers for Disease Control and Prevention. Summary of notifiable diseases. United States, 2000. MMWR 2000: 49(No. 53):1901. <https://stacks.cdc.gov/view/cdc/56266>.

5. 1999 - 2001: Centers for Disease Control and Prevention. Summary of notifiable diseases—United States, 2003. Published April 22, 2005. for MMWR 2003: 52(No. 54):1781. <https://stacks.cdc.gov/view/cdc/55607>.

6. 2002 - 2003: Centers for Disease Control and Prevention. Summary of notifiable diseases. 2010. MMWR 2007: 56:1821. <https://stacks.cdc.gov/view/cdc/212668>.

7. 2004 - 2010: Centers for Disease Control and Prevention. Summary of Notifiable Diseases. 2012. Published September 19, 2014. for MMWR 2014: 63(10):1721. <https://stacks.cdc.gov/view/cdc/252899>.

8. 2008 - 2014: Adams DA, Thomas KR, Jajosek R, et al. Summary of Notifiable Infectious Diseases and Conditions—United States, 2014. MMWR Morb Mortal Wkly Rep 2016; 65:1-152 DOI: <http://dx.doi.org/10.15585/mmwr.mm65a4external>.

9. 2010. Centers for Disease Control and Prevention. Epidemiology and Prevention of Vaccine-Preventable Diseases. Appendix E. Vaccine Coverage Levels. United States, 1962-2016. Hamborsky J, Kroger A, Wolfe S, eds. 13th ed. Washington D.C: Public Health Foundation, 2018.





20TH CENTURY DISEASE MORTALITY

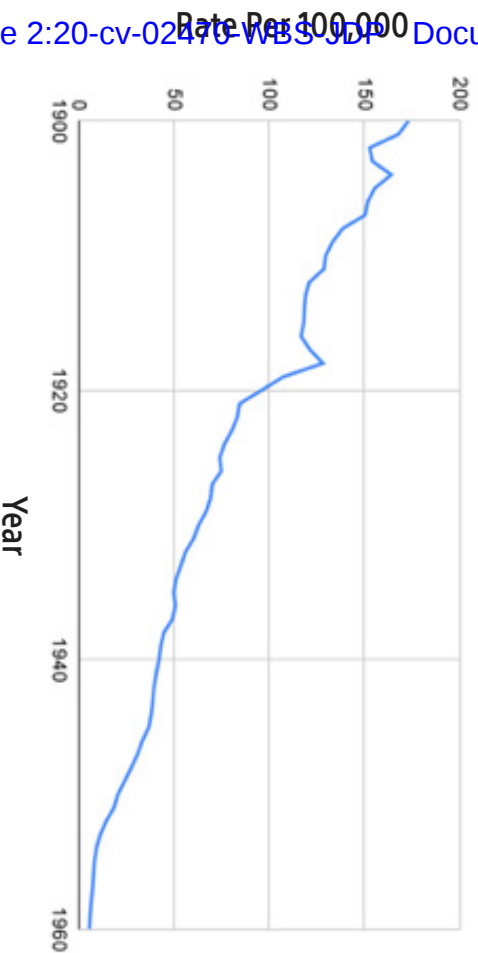
Reductions Caused By Improved Living Conditions Prior To Vaccines

Exhibit 473

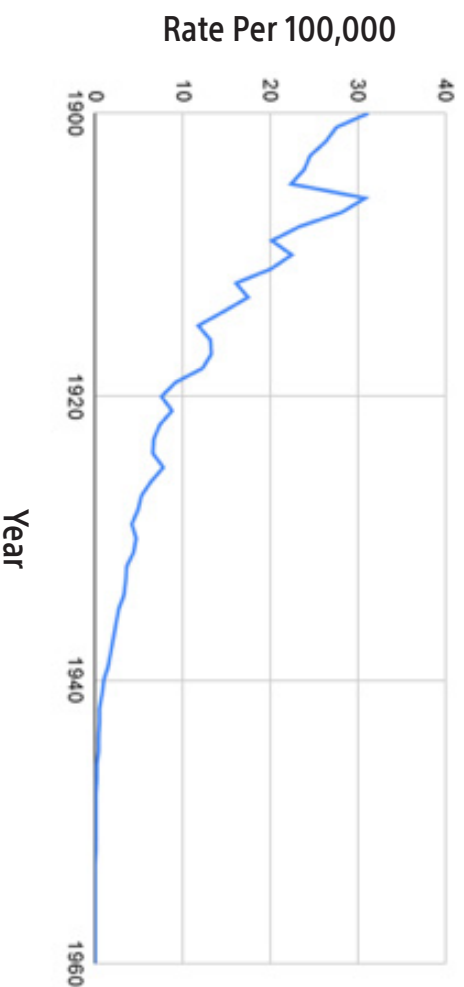
Disease Mortality, United States, 1900-1960¹

No Vaccine in General Usage

Tuberculosis (Respiratory)



Typhoid Fever



7

SOURCES:

1. Grove, R., D., Hertzler, A., M., (1968). Vital statistics rates in the United States, 1940-1960, pp 559 - 603, Washington, D. C.: U.S. Department of Health, Education, and Welfare, Public Health Service, National Center for Health Statistics, 1968.

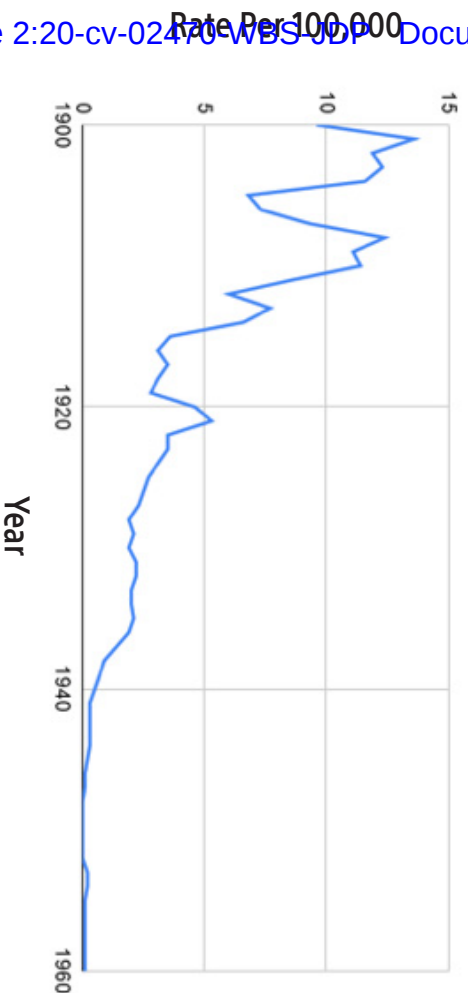


20TH CENTURY DISEASE MORTALITY
**Reductions Caused By Improved
Living Conditions Prior To Vaccines**

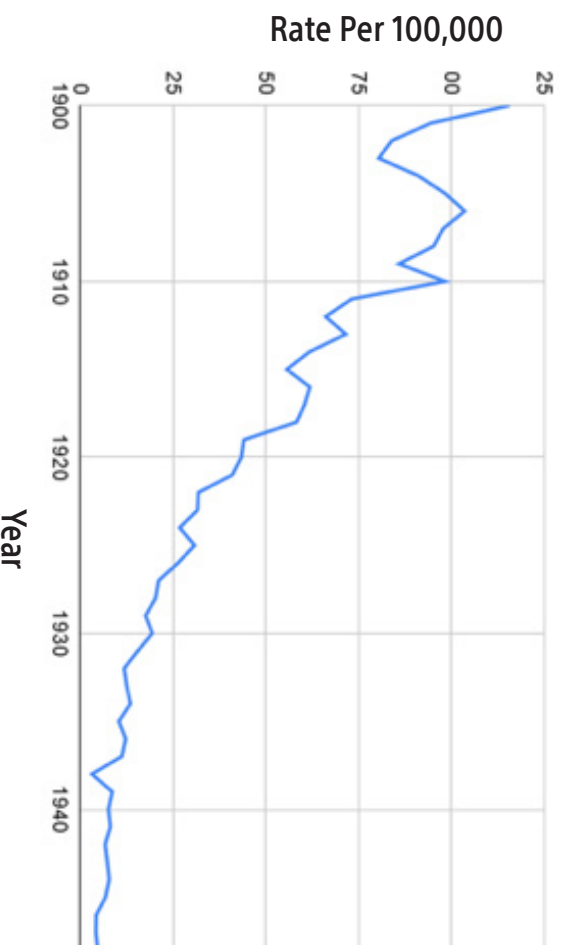
Exhibit 473

Disease Mortality, United States, 1900-1960¹
No Vaccine in General Usage

Scarlet Fever



Diarrhea and Enteritis (under 2 years)



8

SOURCES:
1. Grove, R., D., Hetzel, A., M., (1968). Vital statistics rates in the United States, 1940-1960, pp 559 - 603. Washington, D.C.: U.S. Department of Health, Education, and Welfare, Public Health Service, National Center for Health Statistics, 1968.

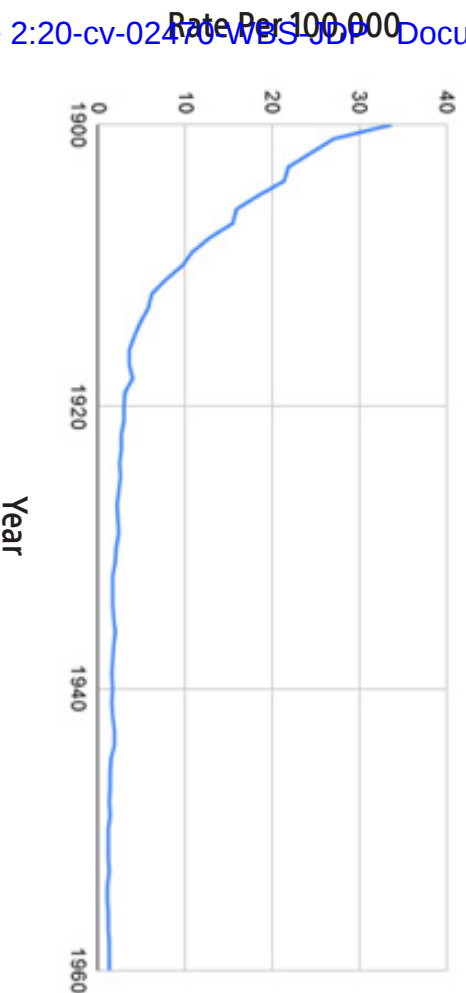


20TH CENTURY DISEASE MORTALITY
**Reductions Caused By Improved
Living Conditions Prior To Vaccines**

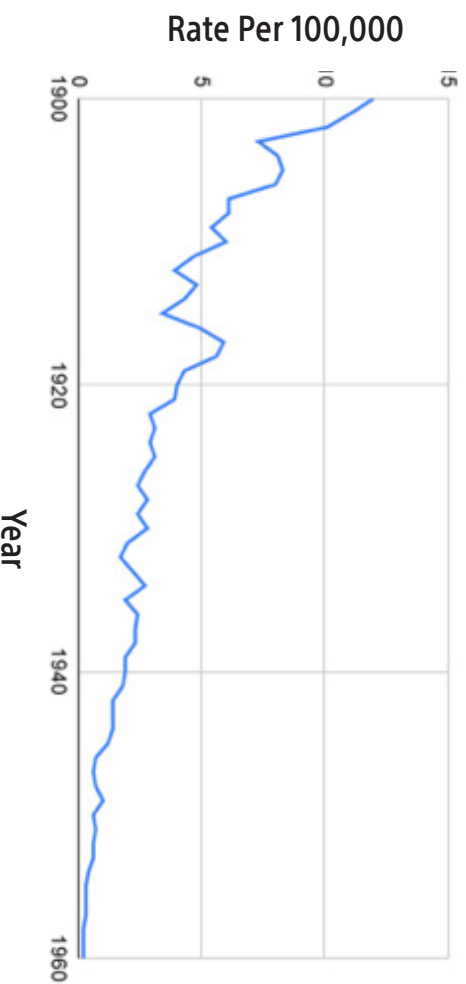
Exhibit 473

Disease Mortality, United States, 1900-1960¹
No Vaccine in General Usage

Meningitis (Simple)



Dysentery Disease



SOURCES:
1. Groer, R., D., Hetzel, A., M., (1968). Vital statistics rates in the United States, 1940-1960, pp 559 - 603. Washington, D.C.: U.S. Department of Health, Education, and Welfare, Public Health Service, National Center for Health Statistics, 1968.

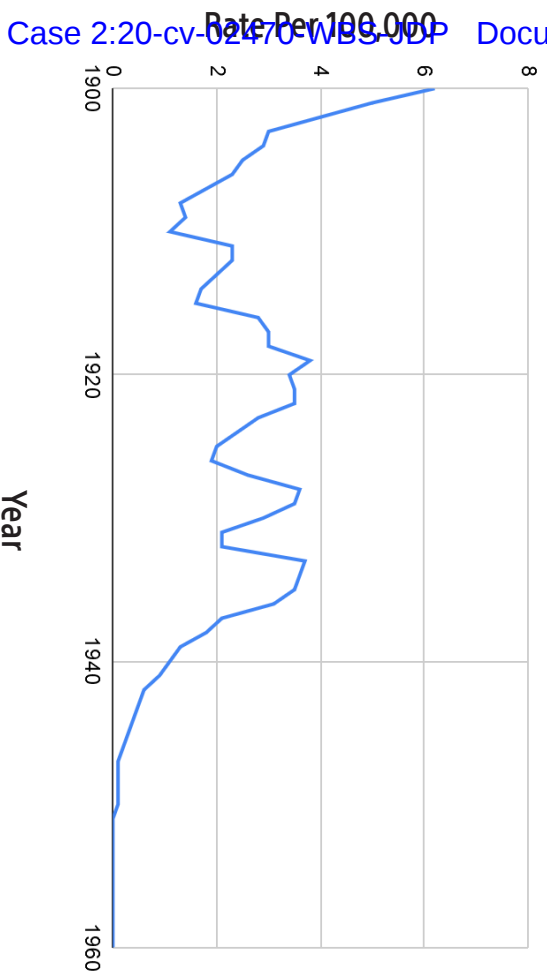


20TH CENTURY DISEASE MORTALITY
**Reductions Caused By Improved
Living Conditions Prior To Vaccines**

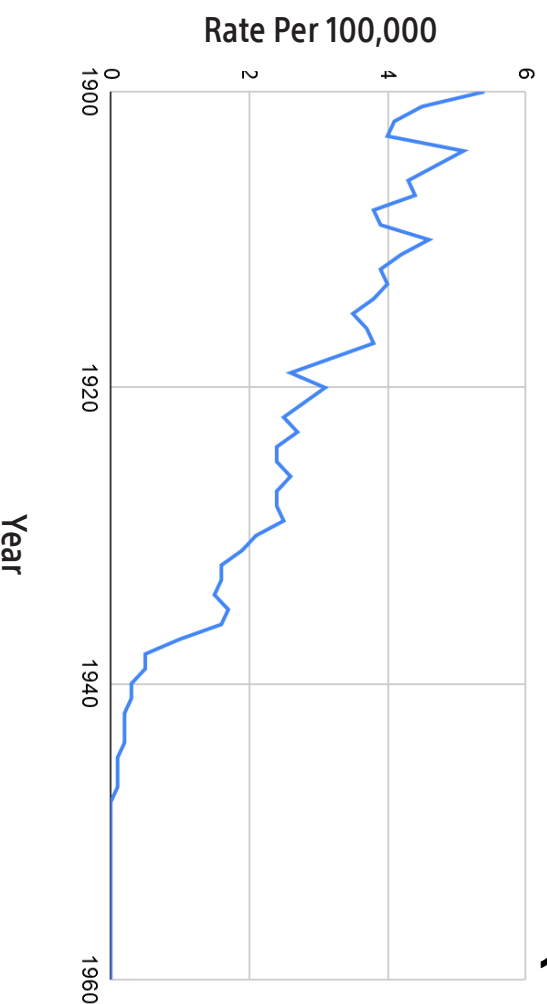
Exhibit 473

Disease Mortality, United States, 1900-1960¹
No Vaccine in General Usage

Malaria



Erysepilias



SOURCES:
1. Groer, R., D., Hertz, A., M., (1968). Vital statistics rates in the United States, 1940-1960, pp 559 - 603. Washington, D.C.: U.S. Department of Health, Education, and Welfare, Public Health Service, National Center for Health Statistics, 1968.

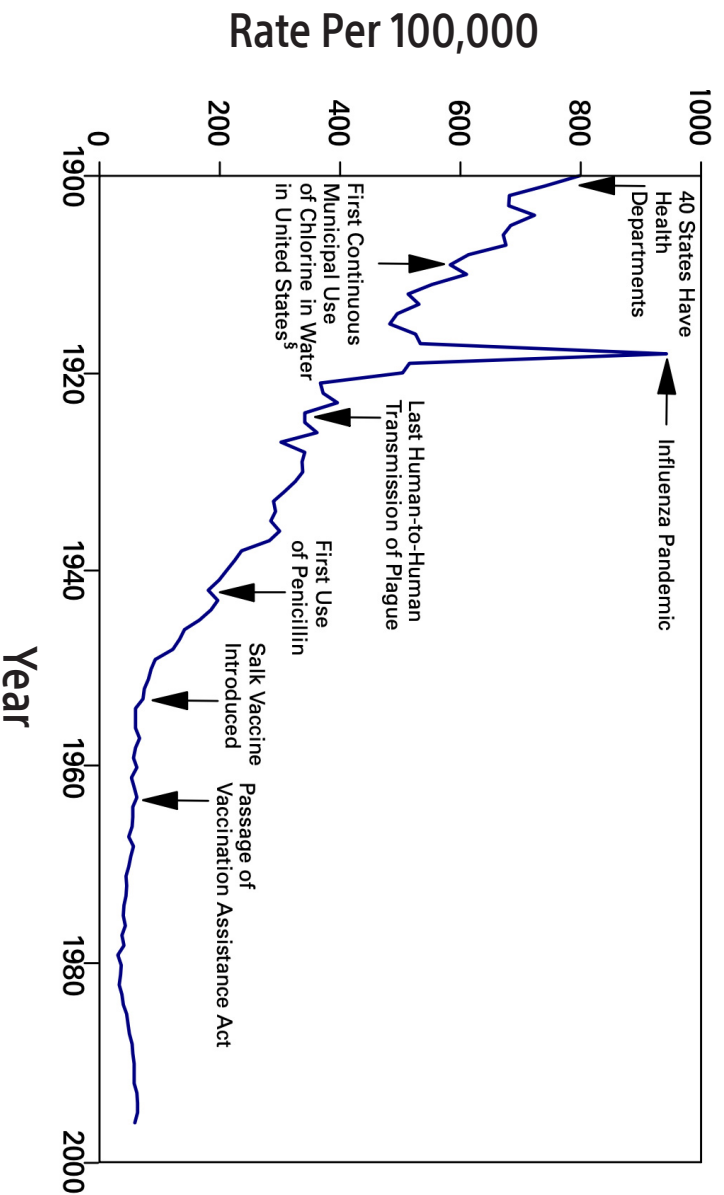


20TH CENTURY DISEASE MORTALITY

Reductions Caused By Improved Living Conditions Prior To Vaccines

Exhibit 473

Crude Death Rate* for Infectious Diseases United States, 1900-1996[†]



*Per 100,000 population per year.
[†]Adapted from Armstrong GL, Conn LA, Pinner RW. Trends in infectious disease mortality in the United States during the 20th century. JAMA 1999;281:61-6.
[§]American Water Works Association. Water chlorination principles and practices: AMWA manual M20. Denver, Colorado: American Water Works Association, 1973.

SOURCES:

Centers for Disease Control (U.S.), & Centers for Disease Control and Prevention (U.S.). (1999). Morbidity and mortality weekly report: MMWR 1999; 48; 29: [621-629]. Atlanta, Ga.: U.S. Dept. of Health, Education, and Welfare, Public Health Service, Center for Disease Control. <https://www.cdc.gov/mmWR/PDF/wk/mm4829.pdf>

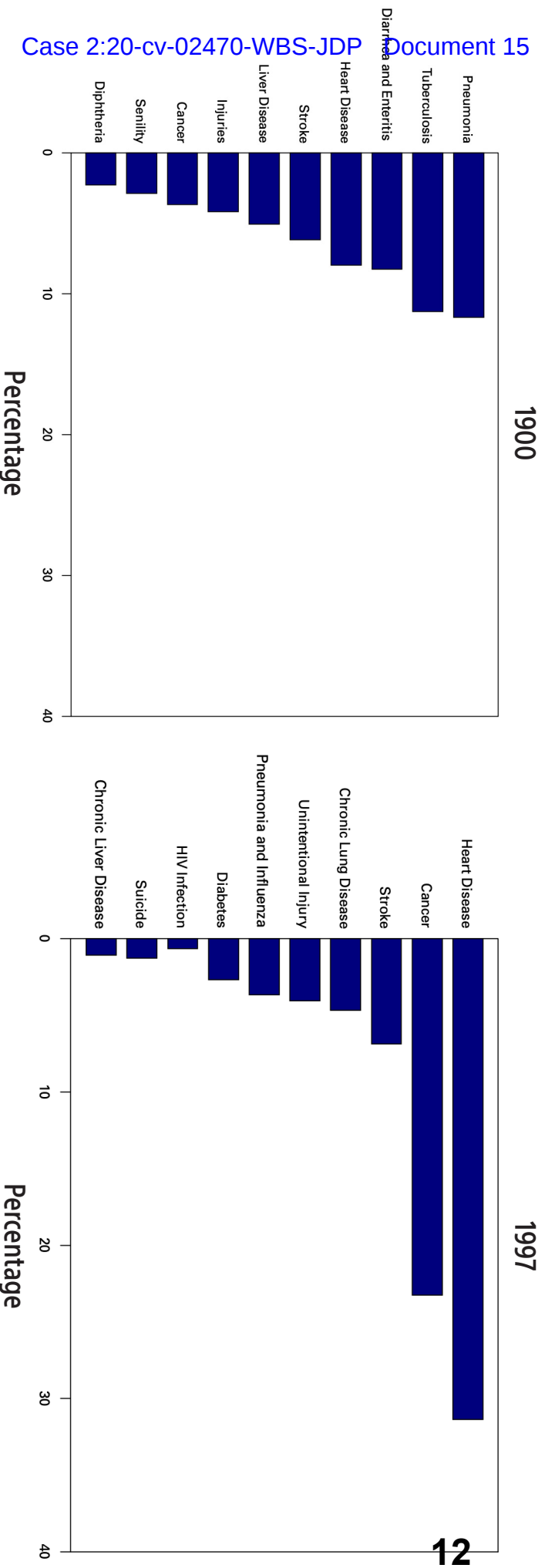




20TH CENTURY DISEASE MORTALITY
**Reductions Caused By Improved
 Living Conditions Prior To Vaccines**

Exhibit 473

**The 10 leading causes of death as a percentage of all deaths
 United States, 1900¹ and 1997²**



SOURCES:
 1. Centers for Disease Control (U.S.) & Centers for Disease Control and Prevention (U.S.). (1999). Morbidity and mortality weekly report: MMWR 1999; 48: 29; [621-629]. Atlanta, Ga.: U.S. Dept. of Health, Education, and Welfare, Public Health Service, Center for Disease Control. <https://www.cdc.gov/mmWR/PDF/wk/mm4829.pdf>
 2. Centers for Disease Control (U.S.) & Centers for Disease Control and Prevention (U.S.). (1999). Morbidity and mortality weekly report: MMWR 1999; 48: 29; [621-629]. Atlanta, Ga.: U.S. Dept. of Health, Education, and Welfare, Public Health Service, Center for Disease Control. <https://www.cdc.gov/mmWR/PDF/wk/mm4829.pdf>

EXHIBIT 474



VACCINES ARE DANGEROUS

Unavoidably Unsafe

Vaccines are currently classified by American tort law as **“unavoidably unsafe”** due to the injuries and deaths resulting from their unavoidable side effects. See, United States Supreme Court ruling in *Bruesewitz v. Wyeth LLC*, 562 U.S. 223, 254-55, 131 S. Ct. 1068, 1089 (2011):

“The 1986 Report expressly adopts comment k of § 402A of the Restatement of Torts (Second) (1963-1964) (hereinafter Restatement), which provides that “unavoidably unsafe” products--i.e., those that ‘in the present state of human knowledge, are quite incapable of being made safe for their intended and ordinary use’--are not defective. As ‘[a]n outstanding example’ of an ‘[u]navoidably unsafe’ product, comment k cites ‘the vaccine for the Pasteur treatment of rabies, which not uncommonly leads to very serious and damaging consequences when it is injected’; ‘[s]ince the disease itself invariably leads to a dreadful death, both the marketing and the use of the vaccine are fully justified, notwithstanding the unavoidable high degree of risk which they involve.’ *Id.*, at 353. Comment k thus provides that ‘seller[s]’ of ‘[u]navoidably unsafe’ products are ‘not to be held to strict liability’ provided that such products ‘are properly prepared and marketed, and proper warning is given.’”

The correct synonym for **“unsafe”** is **“dangerous”**.

Merriam Webster Dictionary (2020). <https://www.merriam-webster.com/dictionary/unsafe> (“Synonyms for unsafe: dangerous, grave, grievous, hazardous, jeopardizing, menacing, parlous, perilous, risky, serious, threatening, unhealthy, venturesome”).

“Dangerous: 1: involving possible injury, pain, harm, or loss : characterized by danger, 2: able or likely to inflict injury or harm”

Merriam Webster Dictionary (2020). <https://www.merriam-webster.com/dictionary/dangerous>

Dangerous vaccines are kept on the market and shielded from liability because in 1986, Congress passed special interest legislation favoring the international pharmaceutical industry.

Merriam Webster Dictionary (2020). <https://www.merriam-webster.com/dictionary/dangerous>



VACCINES ARE DANGEROUS

Vaccines Contain Neurotoxins

Vaccines include legally classified neurotoxins in amounts that have never been proven safe. Vaccines are experimental because they have never followed the scientific method for testing with true placebos or a control group of entirely unvaccinated individuals.

FDA (2018). Common Ingredients in U.S. Licensed Vaccines.

<https://www.fda.gov/vaccines-blood-biologics/safety-availability-biologics/common-ingredients-us-licensed-vaccines>

ATSDR (2011). Substances A-Z. Toxic substances portal. <https://www.atsdr.cdc.gov/substances/indexAZ.asp>



VACCINES ARE DANGEROUS

All Vaccines Are Experimental

Vaccine regulatory approvals are supported by:

- | **Fake placebos** (so-called “placebos” that contain neurotoxins),
- | **Fake controls** (so-called “controls” of people who are also vaccinated),
- | **Short-term testing windows** (so-called “tests” with monitoring periods as short as 3-days), and
- | **Long-term passive surveillance** of vaccine injuries (so-called “surveillance” with an unknown to approximately 99% failure rate of reporting).

In this manner, vaccine science has not even evolved enough to recognize the basic dictionary definition of words, let alone become advanced enough to reach the status of “settled science”.

FDA (2018). Common Ingredients in U.S. Licensed Vaccines. <https://www.fda.gov/vaccines-blood-biologics/safety-availability-biologics/common-ingredients-us-licensed-vaccines>

ATSDR (2011). Substances A-Z. Toxic substances portal. <https://www.atsdr.cdc.gov/substances/indexAZ.asp>

FDA (2020). Vaccines Licensed For Use In the United States. <https://www.fda.gov/vaccines-blood-biologics/>

CDC (2017). Chapter 21: Surveillance for Adverse Events Following Immunization Using the Vaccine Adverse Event Reporting System. CDC: Manual for the Surveillance of Vaccine-Preventable Diseases. <https://www.cdc.gov/vaccines/pubs/surv-manual/chpt21-surv-adverse-events.html>

Lazarus, R., et al. (2007). Grant Final Report: Electronic Support for Public Health-Vaccine Adverse Event Reporting System (ESP:VAERS). The Agency for Healthcare Research and Quality (AHRQ) U.S. Department of Health and Human Services. <https://healthit.ahrq.gov/sites/default/files/docs/publication/r18hs017045-lazarus-nal-report-2011.pdf>

FDA (2006). Guidance Document: Adverse Reactions Section of Labeling for Human Prescription Drug and Biological Products – Content and Format. <https://www.fda.gov/media/72139/download>



THE CONTROL GROUP
LITIGATION



VACCINES ARE DANGEROUS

Educated Parents Are Less Likely To Vaccinate

“[F]urther studies are needed to discover why, for example, parents with more education are less likely to agree to vaccination than parents with less education.”

Ogilvie G, Anderson M, et al. (2010). A population-based evaluation of a publicly funded, school-based HPV vaccine program in British Columbia, Canada: parental factors associated with HPV vaccine receipt. *PLoS Med* 7(5): e1000270. <https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1000270>

“Mothers who had less than a high school degree... were more likely to be favorable about their daughter being vaccinated.”

Rosenthal SL, Rupp R, et al. (2008). Uptake of HPV vaccine: demographics, sexual history and values, parenting style, and vaccine attitudes. *J Adolesc Health* 43(3): 239-45. [https://www.jahonline.org/article/S1054-139X\(08\)00264-4/fulltext](https://www.jahonline.org/article/S1054-139X(08)00264-4/fulltext)

“Low maternal educational levels and low socioeconomic status were associated with high 4:3:1:3 series completion rates.”

Kim SS, Frimpong JA, et al. (2007). Effects of maternal and provider characteristics on up-to-date immunization status of children aged 19 to 35 months. *Am J Public Health* 97(2): 259-66. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1781415/>



VACCINES ARE DANGEROUS

Doctors and Healthcare Workers Rejecting Vaccination

“[A]cceptance of the influenza vaccination by medical personnel is low.”

Wicker S, Rabenau HF, et al. (2009). Influenza vaccination compliance among health care workers in a German university hospital. *Infection* 37(3); 197-202. <https://pubmed.ncbi.nlm.nih.gov/19139807/>

“Despite almost a decade of efforts, the vaccination coverage rates registered at our hospital steadily remain unsatisfactory and very distant by the minimum objective of 75% defined by the Italian Ministry of Health. During the last influenza season (2013/14), vaccination coverage rates by occupation type resulted 30% among physicians, 11% among nurses and 9% among other clinical personnel.”

Alicino C, Iudici R, et al. (2015). Influenza vaccination among healthcare workers in Italy: the experience of a large tertiary acute-care teaching hospital. *Hum Vaccin Immunother* 11(1): 95-100. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4514208/>

VACCINES ARE DANGEROUS

The CDC Recommended Vaccine Schedule Is Experimental

"[S]tudies designed to examine the long-term effects of the cumulative number of vaccines or other aspects of the immunization schedule have not been conducted."

"[The IOM] found a paucity of information, scientific or otherwise, that addressed the risk of adverse events in association with the complete recommended immunization schedule..."

The National Academy of Sciences (2013). The Childhood Immunization Schedule and Safety: Stakeholder Concerns, Scientific Evidence, and Future Studies. Washington, DC: The National Academies Press. doi: 10.17226/13563.

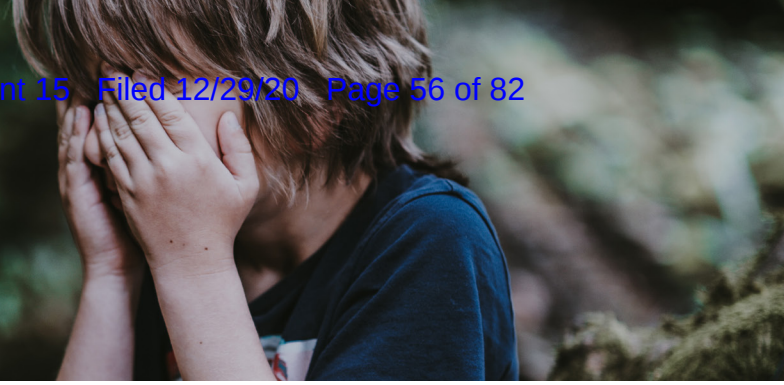
VACCINES ARE DANGEROUS

All Vaccines Are Experimental

Vaccine package inserts applicable to the CDC Schedules of recommended vaccines (both for adults and children) evidence that each vaccine has never been clinically evaluated in humans for its long-term potential to cause cancer, impair fertility, and mutate genes.

FDA (2020). Vaccines Licensed for Use in the United States. Vaccines, Blood & Biologics. <https://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states>

CDC (2020). Immunization Schedules. <https://www.cdc.gov/vaccines/schedules/index.html>



VACCINES ARE DANGEROUS

Vaccine Side Effects Are Common

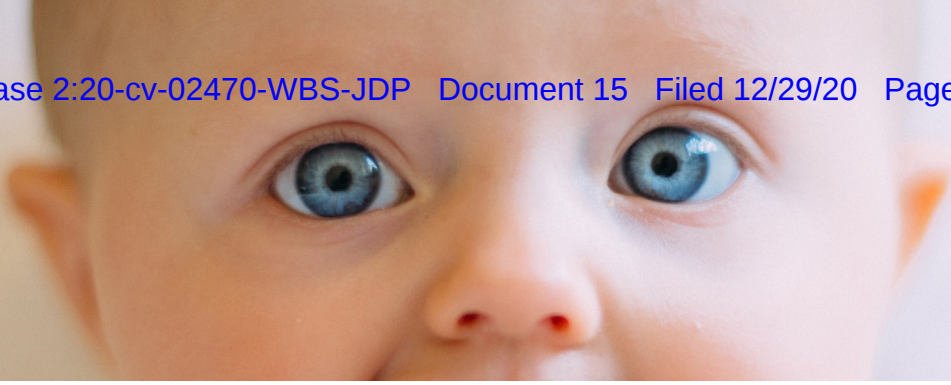
The most accurate and lawful way to describe vaccination is that it is an experimental procedure that has been falsely labeled as “safe and effective”. Vaccine side effects have been falsely labeled as “rare”.

The Council for International Organizations of Medical Sciences Working Group III sets forth the following definitions for drug adverse events:

- | Very common $\geq 1/10$ ($\geq 10\%$)
- | Common $\geq 1/100$ and $< 1/10$ ($\geq 1\%$ and $< 10\%$)
- | Uncommon $\geq 1/1000$ and $< 1/100$ ($\geq 0.1\%$ and $< 1\%$)
- | Rare $\geq 1/10,000$ and $< 1/1000$ ($\geq 0.01\%$ and $< 0.1\%$)
- | Very rare $< 1/10,000$ ($< 0.01\%$)

Council for International Organizations of Medical Sciences (1995). “Guidelines for Preparing Core Clinical-Safety Information on Drugs”. Report of CIOMS Working Group III.

https://cioms.ch/wp-content/uploads/2018/03/WG3_Guidelines-for-Preparing-Core-Clinical-Safety-Information-on-Drugs.pdf



VACCINES ARE DANGEROUS

The Unvaccinated Control Group Is An Endangered Population

The number of individuals who remain entirely unvaccinated in America is small, estimated at approximately 1% or less of the American population.

Gowda C, Dempsey A (2013). The rise (and fall?) of parental vaccine hesitancy. *Hum Vaccin Immunother* 9(8): 1755-1762.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3906278/>



VACCINES ARE DANGEROUS

The International Pharmaceutical Industry Is Corrupt and Untrustworthy

The international pharmaceutical industry that produces vaccines has a long-history of scientific corruption and conflicts of interest. It is a trillion dollar industry that uses aborted babies to manufacture certain vaccines, adds known neurotoxins such as aluminum and mercury to vaccines, specifically engineers newer vaccines to manipulate human DNA, and then summarily labels every single one of their finished products “safe”, without any mathematical proof that would comply with the scientific method.

FDA (2020). Vaccines Licensed For Use In the United States. <https://www.fda.gov/vaccines-blood-biologics/>

NY Times (March 15, 2015). Protection Without a Vaccine. <https://www.nytimes.com/2015/03/10/health/protection-without-a-vaccine.html>

Matheson vs. Schmitt: Deposition of Stanley A. Plotkin, M.D. Case #2015-831539-DM, January 11, 2018. County of Oakland Circuit Court, Family Division, Michigan.

Rashmirekha P, et al (2018). Nanoparticle Vaccines Against Infectious Diseases. *Front Immunol* 9: 2224. PMID: PMC6180194
PMID: 30337923. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6180194/>



The International Pharmaceutical Industry Is Corrupt and Untrustworthy (cont'd)

“For a pharmaceutical company, delaying or minimizing knowledge of a side effect of a medication has cash value. Similarly, not publishing negative studies may shift the balance of subsequent meta-analysis.”

Fava GA (2009). Preserving intellectual freedom in clinical medicine. *Psychother Psychosom* 78: 1-5.
<https://pubmed.ncbi.nlm.nih.gov/18852496/>

“Journals have devolved into information laundering operations for the pharmaceutical industry”.

Smith R (2005). Medical journals are an extension of the marketing arm of pharmaceutical companies. *PLoS Med* 2(5): e138.
<https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.0020138>

Drug companies donated millions to California lawmakers before a mandatory vaccine debate in order to promote mandatory vaccination.

Matej M (August 9, 2019). Global vaccine market revenues 2014-2020. Statista.

“The global vaccine market is showing some escalating growth and it is expected that it will reach total revenues of nearly 60 billion U.S. dollars by 2020. That would be almost double the size the market had back in 2014. Driver of the growth is the increase of various infectious diseases like influenza, swine flu, hepatitis, tuberculosis, diphtheria, Ebola, and meningococcal and pneumococcal diseases.... At this moment, Pfizer’s Prevnar 13 is the world’s leading vaccine product, generating around 5.7 billion U.S. dollars of revenue.... The United States are the world’s largest national market for vaccines...”

Matej M (August 9, 2019). Global vaccine market revenues 2014-2020. Statista.
<https://www.statista.com/statistics/265102/revenues-in-the-global-vaccine-market/>



VACCINES ARE DANGEROUS

Medical Error is the 3rd Leading Cause of Death in the United States

Johns Hopkins University (May 3, 2016). Study Suggests Medical Errors Now Third Leading Cause of Death in the U.S.
Johns Hopkins Medicine Press Release. https://www.hopkinsmedicine.org/news/media/releases/study_suggests_medical_errors_now_third_leading_cause_of_death_in_the_us

VACCINES ARE DANGEROUS

These People Are Sick

“Scientists have told Congress again and again that fetal tissue is the gold standard for vaccine research.”

Office of Congressman Jerry Nadler (March 19, 2020). Rep. Nadler Statement Condemning Trump Administration for Refusing to Lift Fetal Tissue Ban for COVID-19 Vaccine Research. Press Release.
<https://nadler.house.gov/news/documentsingle.aspx?DocumentID=394222> (accessed June 21, 2020).



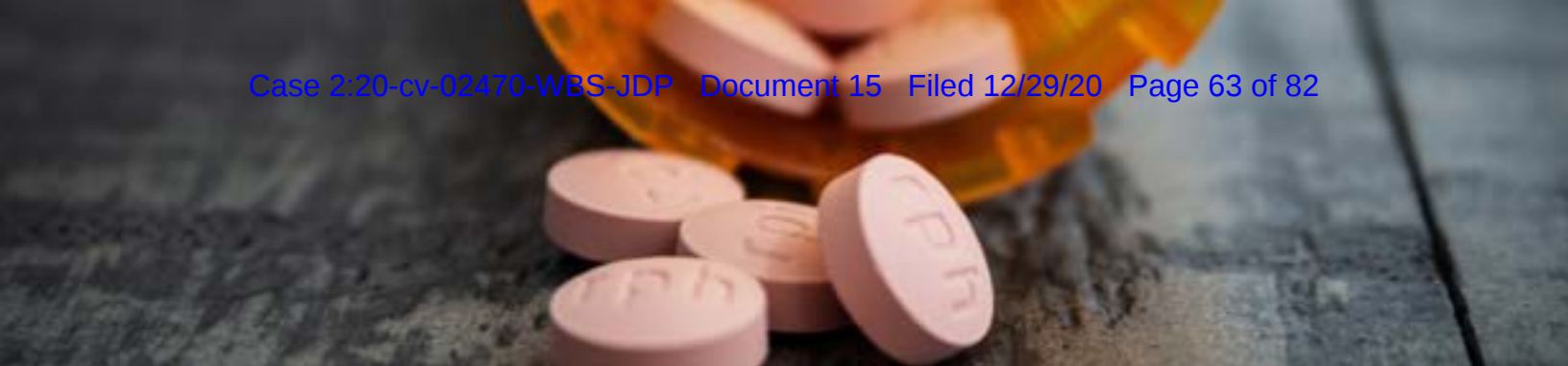
HEALTH CRISIS IN AMERICA

High Infant Mortality

Notwithstanding that the United States spends more on healthcare than any country in the world, American children have poorer outcomes and are less likely to survive their first year of life than children born in many other high-income nations.

On their first day of birth, American infants have the highest mortality rate of any industrialized nation in the world. Even when premature births are excluded, more apparently healthy American babies die in infancy of sudden and unexplained causes than infants in other wealthy countries.

MacDorman et al. (2014). International comparisons of infant mortality and related factors: United States and Europe, 2010. National Vital Statistics Reports 63(5):1-6. https://www.cdc.gov/nchs/data/nvsr/nvsr63/nvsr63_05.pdf



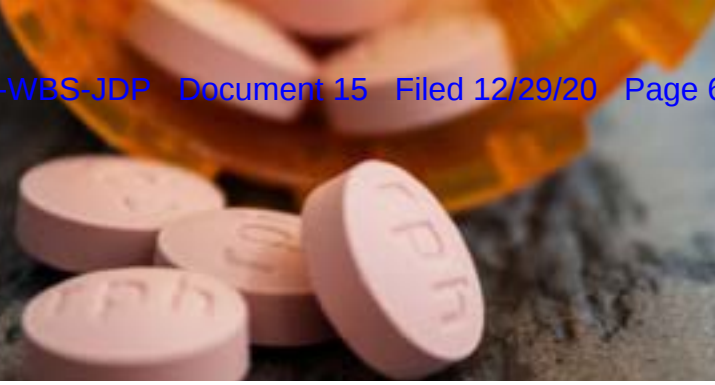
HEALTH CRISIS IN AMERICA

Pandemic of Chronic Diseases

In recent decades, American children have experienced a decline in once common childhood infections, such as measles, whooping cough and chickenpox. At the same time, a growing number of children have begun suffering from a wide range of non-communicable, serious and often incurable illnesses, including neurodevelopmental disorders such as autism and learning disabilities, mental illnesses such as anxiety and obsessive compulsive disorder, and an array of immune-mediated diseases such as asthma and autoimmune diseases. These once rare pediatric anomalies now afflict American children in pandemic proportions.

A 2011 Health Affairs assessment estimated that 43 percent (32 million) of American children currently suffer from at least one of twenty chronic health conditions, which increases to more than half (54.1 percent) when overweight, obesity or being at risk for developmental delays are included. Nearly one-fifth (14.2 million) of children have conditions resulting in a special health care need.

Bethell et al. (2011). A national and state profile of leading health problems and health care quality for US children: key insurance disparities and across-state variations. *Academic Pediatrics* 11(3 Suppl):S22-S33.
<https://doi.org/10.1016/j.acap.2010.08.011>



Pandemic of Chronic Diseases (cont'd)

The Centers for Disease Control and Prevention (CDC) estimates that more than a quarter (27 percent) of American children have a chronic condition and one in fifteen are burdened with multiple chronic conditions.

Centers for Disease Control and Prevention, Multiple Chronic Conditions Among Outpatient Pediatric Patients, Southeastern Michigan, 2008–2013. BRIEF, Vol. 12, 2015. https://www.cdc.gov/pcd/issues/2015/14_0397.htm

It was reported in *The Journal of the American Medical Association* (JAMA) that chronic illnesses in children doubled from 12.8 to 26.6 percent between 1994 and 2006, with low-income, racial and ethnic minority children being disproportionately affected in an epidemic that has continued to grow.

Van Cleave et al. (2010). Dynamics of Obesity and Chronic Health Conditions among Children and Youth. JAMA 303(7):623–630. <https://doi.org/10.1001/jama.2010.104>.

Compared to children two generations ago (in the 1960s), as reported in Health Affairs, American children are now more than four times more likely to be burdened with a health condition so severe that it affects their usual daily activities.

Perrin et al. (2014). The rise in chronic conditions among infants, children, and youth can be met with continued health system innovations. Health Affairs 33(12):2099-2105. <https://doi.org/10.1377/hltha.2014.0832>

A 2018 Pediatrics study reported that one-fifth of American children and adolescents regularly use prescription medication and 12% of boys aged six to 12 years are prescribed more than one drug.

Dima et al. (2018). Prescription Medication Use Among Children and Adolescents in the United States. Pediatrics 142(3):e20181042. <https://doi.org/10.1542/peds.2018-1042>

Much of this disease burden has come from neurodevelopmental disorders, mental illness, and immune-mediated conditions.



THE CONTROL GROUP
LITIGATION

Exhibit 474

HEALTH CRISIS IN AMERICA

Neurodevelopmental Disorders

The profound neurodevelopmental disorder called Autism Spectrum Disorder, virtually non-existent less than a century ago, has increased to one in 54 in children aged 8 years in 2016.

Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report, March 27, 2020. Prevalence of Autism Spectrum Disorder Among Children Aged 8 Years – Autism and Developmental Disabilities Monitoring Network, 11 Sites, United States, 2016. https://www.cdc.gov/mmwr/volumes/69/ss/ss6904a1.htm?s_cid=ss6904a1_w

In addition, the CDC reports that today more than seven million American children have been diagnosed with attention-deficit/hyperactivity disorder (ADHD), including 388,000 children aged just two to five years old.

Centers for Disease Control and Prevention, Data and Statistics about ADHD. <https://www.cdc.gov/ncbddd/adhd/data.html>

The number of ADHD diagnoses swelled by 42 percent between 2003 and 2011 and continues to increase an average of five percent per year.

Centers for Disease Control and Prevention, Trends in the Parent-Report of Health Care Provider-Diagnosis and Medication Treatment for ADHD: United States, 2003–2011. <https://www.cdc.gov/ncbddd/adhd/features/key-findings-adhd72013.html>

Neurodevelopmental Disorders (cont'd)

“The estimate for learning disabilities in 2011–2012 was 8.0 percent for children of ages 3–17 (NSCH, 2012a).”

Boat TF, Wu JT, eds. Washington (DC): National Academies Press (US); 2015. Mental Disorders and Disabilities Among Low-Income Children. <https://www.ncbi.nlm.nih.gov/books/NBK332880/>

“The root causes of the present global pandemic of neurodevelopmental disorders are only partly understood,” according to a review in *Lancet Neurology*, which points to a significant role for environmental toxins in its causation. “Although genetic factors have a role, they cannot explain recent increases in reported prevalence, and none of the genes discovered so far seem to be responsible for more than a small proportion of cases.”

Grandjean & Landrigan (2014). Neurobehavioural effects of developmental toxicity. *Lancet Neurology* 13(3):330–338. [https://doi.org/10.1016/S1474-4422\(13\)70278-3](https://doi.org/10.1016/S1474-4422(13)70278-3)

ASD is projected to continue on its ascending trajectory into the future as its causes are unidentified and unaddressed.



HEALTH CRISIS IN AMERICA

Mental Illness

According to the Child Mind Institute, 17.1 million American children have had or have a diagnosable mental illness.

Child Mind Institute, 2016 Child Mind Institute Children's Mental Health Report.
<https://childmind.org/downloads/2016%20Childrens%20Mental%20Health%20Report.pdf>

The CDC reports that one in five children "experience a mental disorder in a given year," and that the Nation spends an estimated \$247 billion each year treating and managing childhood mental disorders.

United States Centers for Disease Control and Prevention, Improving Children's Behavioral Health.
<https://www.cdc.gov/childrensmentalhealth/features/child-mental-health.html>

The CDC reports that 7.1 percent (4.4 million) of American children aged three to 17 are diagnosed with anxiety disorders that have been increasing in recent years. Another 1.9 million children have been diagnosed with depression.

Centers for Disease Control and Prevention, Anxiety and depression in children: Get the facts.
<https://www.cdc.gov/childrensmentalhealth/features/anxiety-depression-children.html>



Mental Illness (cont'd)

According to the National Institute of Mental Health, “an estimated 49.5% of adolescents [aged 13-18] had any mental disorder. Of adolescents with any mental disorder, an estimated 22.2% had severe impairment.”

National Institute of Mental Health, Mental Illness. <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml>

Self-harm-related emergency department visits by youth have skyrocketed, with 18.8% annual increase among females aged 10 to 14 years starting in 2009, from 109.8 (95% CI, 69.9-149.7) in 2009 to 317.7 (95% CI, 230.3-405.1) per 100 000 population in 2015.

Mercado et al. (2017). Trends in Emergency Department Visits for Nonfatal Self-inflicted Injuries Among Youth Aged 10 to 24 Years in the United States, 2001-2015. *JAMA* 318(19):1931-1933. <https://doi.org/10.1001/jama.2017.13317>

In 2016, suicide became the second leading cause of death for those aged 10 - 34 years, with the greatest increases among those 10 to 24 years old.

Centers for Disease Control and Prevention, National Center for Health Statistics Data Brief No. 330, November, 2108. Suicide Mortality in the United States, 1999-2017, <https://www.cdc.gov/nchs/products/databriefs/db330.htm>



HEALTH CRISIS IN AMERICA

Immune-Mediated Disorders

Immune-mediated disorders — those involving immune activation — have soared among American children in recent decades; allergies, asthma and autoimmune diseases are all inexplicably on a sharp upward trajectory.

Asthma is the most common chronic disease of childhood and, in the latter part of the 20th century, has reached epidemic proportions and continues to increase. According to the CDC, asthma affects 25 million people, including six million children under 18 and is a “significant health and economic burden to patients, their families, and society.”

Centers for Disease Control and Prevention, Most Recent National Asthma Data. https://www.cdc.gov/asthma/most_recent_national_asthma_data.htm

According to the Asthma and Allergy Foundation of America, more than 50 million Americans are affected by allergies.

Asthma and Allergy Foundation of America, Allergy Facts and Figures. <https://www.aafa.org/allergy-facts/>

This includes millions of American children with reported allergic rhinitis (5.2 million), respiratory allergies (7.1 million), food allergies (4.8 million) and skin allergies (9.2 million), in 2018.

Centers for Disease Control and Prevention, Allergies and Hay Fever. <https://www.cdc.gov/nchs/fastats/allergies.htm>



Immune-Mediated Disorders (cont'd)

A growing number of young Americans die from a life-threatening form of allergy called anaphylaxis, as its occurrence is increasing across all ages in the United States, with highest risk of mortality in teenagers and young adults.

Dinakar (2012). Anaphylaxis in children: current understanding and key issues in diagnosis and treatment. *Current Allergy and Asthma Reports* 12(6):641-649. <https://doi.org/10.1007/s11882-012-0284-1>

Autoimmune diseases, of which there are at least 80 distinct conditions, occur as a result of the immune system attacking the body's own tissues and organs. Some of the more common autoimmune conditions include type 1 diabetes, rheumatoid arthritis, systemic lupus erythematosus and inflammatory bowel disease. Taken together, these conditions, once so rare they were virtually unheard of, have increased from year to year for mostly unknown reasons and are now, "as a group afflict 5%–9% of the U.S. population," according to a report in *International Journal of Molecular Sciences*.

Parks et al. (2014). Expert panel workshop consensus statement on the role of the environment in the development of autoimmune disease. *International Journal of Molecular Sciences* 15(8):14269-14297. <https://doi.org/10.3390/ijms150814269>

HEALTH CRISIS IN AMERICA

Pediatric Cancer

According to American Cancer Society, childhood cancer rates have been rising for the past few decades.

American Cancer Society, Key Statistics for Childhood Cancers.
<https://www.cancer.org/cancer/cancer-in-children/key-statistics.htm>

It has been reported in the Journal of the National Cancer Institute that children born in the 1990s have double the risk of colon cancer and quadruple the risk of rectal cancer compared to people born in the 1950s.

Siegel et al. (2017). Colorectal Cancer Incidence Patterns in the United States, 1974–2013. Journal of the National Cancer Institute 109(8):djw322. <https://doi.org/10.1093/jnci/djw322>



HEALTH CRISIS IN AMERICA

National Crisis

The People of the United States of America, and particularly the Nation's children, are suffering from an unprecedented pandemic of chronic diseases. More American children are sick today than in any previous generation. They are suffering from a wide range of conditions: from asthma and autoimmune diseases to neurodevelopmental and mental health disorders that are increasingly known to be associated with an underlying dysregulated immune activation. The fallout from this health emergency is an economic, healthcare and national security crisis for the Nation.

The epidemic of childhood illness is straining the Nation, imposing an enormous and growing burden on individuals, families and society. Chronically ill children become chronically ill adults.

According to the CDC, chronic disease and mental illness account for most American deaths, consume 90% of the Nation's \$3.5 trillion in annual health care expenditures and are projected to account for more than \$42 trillion in spending by 2030.

National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention, Health and Economic Costs of Chronic Diseases. <https://www.cdc.gov/chronicdisease/about/costs/index.htm#ref1>



National Crisis (cont'd)

The burden of illness is straining America's school system as well, which is struggling to accommodate the demands of the growing population of students with special needs.

The health crisis of America's youth is a national security crisis as well; nearly a third (32 percent) of all young people have health problems – other than their weight – that prevent them from military service.

Mission: Readiness, Washington, DC, 2009. Ready, willing, and unable to serve.
<http://cdn.missionreadiness.org/MR-Ready-Willing-Unable.pdf>



MADE IN CHINA

VACCINES ARE MADE IN COMMUNIST CHINA

Communist Chinese Vaccines Infiltrate the United States

“The Chinese vaccine industry is developing rapidly due to an emerging and large market for current and new vaccines, a large potential for local vaccine manufacturing both in the public and private domain...”

Human Vaccines, China’s Emerging Vaccine Industry, July 2010, Vol. 6, Issue 7, <https://pubmed.ncbi.nlm.nih.gov/20523120/>

“China ranks second among countries that export drugs and biologics to the United States.”

United States Food and Drug Administration, Global Operations - China Office, January 28, 2020, <https://www.fda.gov/about-fda/office-global-operations/china-office>

“Chinese companies now account for more than 50% of the global active pharmaceutical ingredient (API) market. It has more than 500 companies registered to sell in the U.S. and 10 times that many serving its own market. But many of those continue to struggle to meet international standards.”

Fierce Pharma, China’s Drug Exports to the U.S. Rise but Companies Struggle With Quality, August 30, 2016, <https://www.fiercepharma.com/manufacturing/china-drug-exports-to-u-s-rise-but-companies-struggle-quality>



MADE IN CHINA

Communist Chinese Vaccines Infiltrate the United States (cont'd)

Since the inception of the 1986 National Vaccine Injury Compensation Program, the pharmaceutical industry started to offshore the manufacturing of vaccines. It did so to meet the growing demand in producing hundreds of millions of doses each year for the United States vaccination schedule that had quadrupled in size and scope. First, the vaccine makers harvested active pharmaceutical ingredients from Asia (primarily Communist China); then outsourced research and development. Over the past decade, the world's top five vaccine manufacturers built plants in Communist China.

United States Food and Drug Administration, Exploring the Growing U.S. Reliance on China's Biotech and Pharmaceutical Products, July 31, 2019,

<https://www.fda.gov/news-events/congressional-testimony/exploring-growing-us-reliance-chinas-biotech-and-pharmaceutical-products-07312019>

Office of the United States (U.S.) Trade Representative, "Notice of Determination and Request for Public Comment Concerning Proposed Determination of Action Pursuant to Section 301: China's Acts, Policies, and Practices," (Docket No. USTR-2018-0005) (2018). <https://ustr.gov/sites/default/files/files/Press/Releases/301FRN.pdf>

United States Food and Drug Administration, Vaccines Licensed for Use In the United States, April 24, 2020,

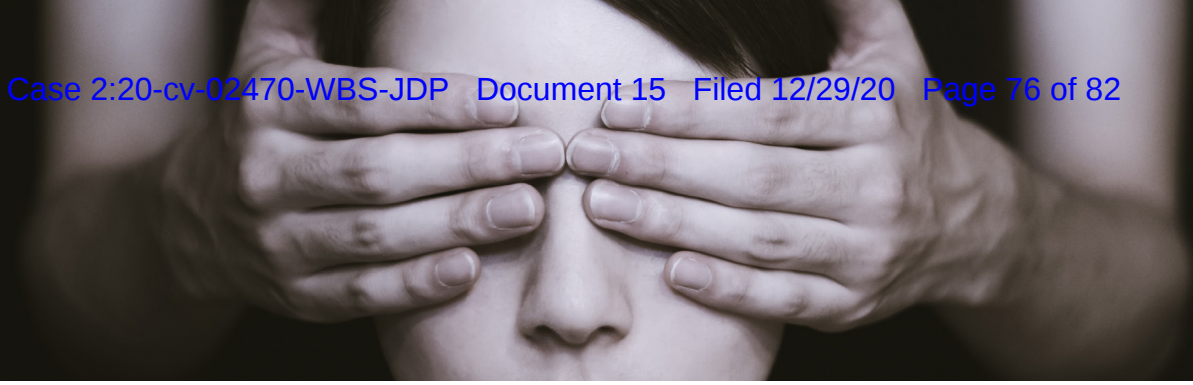
<https://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states>

United States Food and Drug Administration, Importing CBER-Regulated Products Into the United States,

<https://www.fda.gov/vaccines-blood-biologics/exporting-cber-regulated-products/importing-cber-regulated-products-united-states>

United States Food and Drug Administration, FDA Product Codes For Importing CBER-Regulated Products, October 10, 2018,

<https://www.fda.gov/vaccines-blood-biologics/exporting-cber-regulated-products/importing-cber-regulated-products-united-states>



VACCINES ARE MADE IN COMMUNIST CHINA

Vaccine Manufacturers Conceal Their Communist Chinese Operations

“The intricacies of the supply chains for individual medicines—which companies keep under wraps for competitive reasons—remain hidden from the public.”

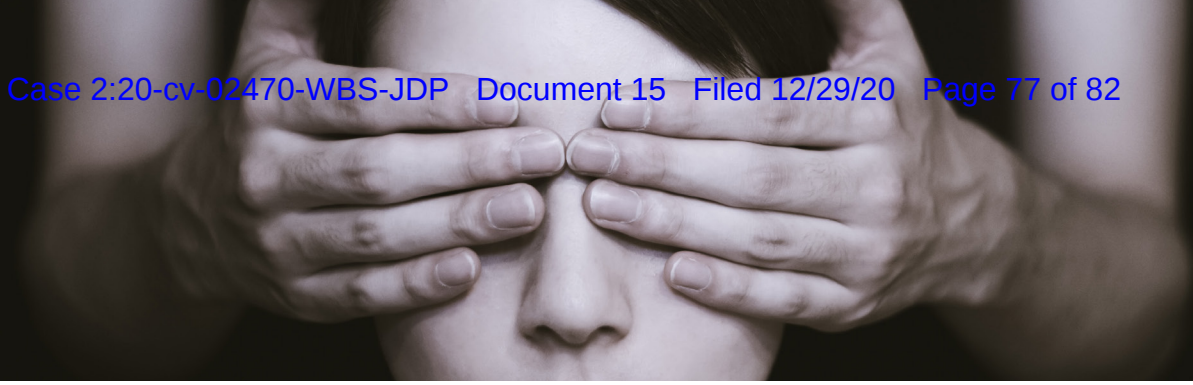
Wall Street Journal, FDA Cites Shortage of One Drug, Exposing Supply-Line Worry, February 28, 2020, <https://www.wsj.com/articles/coronavirus-slows-drug-production-in-china-the-worlds-pharmacy-11582900885>

“[United States lawmakers] expressed alarm, and sometimes disbelief, at the lack of oversight the FDA demonstrates over these foreign suppliers—despite the fact that U.S. drug firms are continuously outsourcing their manufacturing needs.”

Newsweek, Congress, Grappling With Tainted Chinese Drugs, is Baffled by Lack of FDA Oversight in U.S. Pharmaceutical Supply Chain, October 30, 2019, <https://www.newsweek.com/congress-spooked-tainted-chinese-drugs-eyeing-pharmaceutical-supply-chain-1468753>

“FDA quality control programs suffer gaps, from inventory and source material ingredients, to inability to inspect plants unannounced or has complete visibility over a Chinese plant’s total supply chain.”

United States Food and Drug Administration, Exploring the Growing U.S. Reliance on China’s Biotech and Pharmaceutical Products, July 31, 2019, <https://www.fda.gov/news-events/congressional-testimony/exploring-growing-us-reliance-chinas-biotech-and-pharmaceutical-products-07312019>



Vaccine Manufacturers Conceal Their Communist Chinese Operations (cont'd)

COVID-19 has further disrupted any surveillance or inspections of vaccine manufacturing plants in China.

Drug, Chemical & Associated Technologies Association (DCAT), FDA Updates Plan for Manufacturing Inspections in China in Wake of Coronavirus Outbreak, February 27, 2020,
<https://dcatvci.org/pharma-news/6373-fda-updates-plan-for-mfg-inspections-in-china-in-wake-of-coronavirus-outbreak>

Medtech Pharma Intelligence, Coronavirus: All FDA Inspections Of Chinese Manufacturing Facilities Come To Screeching Halt, February 14, 2020,
<https://medtech.pharmaintelligence.informa.com/MT126258/Coronavirus-All-FDA-Inspections-Of-Chinese-Manufacturing-Facilities-Come-To-Screeching-Halt>

VACCINES ARE MADE IN COMMUNIST CHINA

Communist Chinese Vaccine Scandals Are Commonplace

“Health authorities in China are investigating one of the nation’s biggest vaccine makers after eight infants died in the past two months following injections that were meant to immunize them against hepatitis B...”

“Six of the deaths have been linked to vaccines produced by Shenzhen Kangtai; the two other infant deaths occurred recently after the use of a hepatitis B vaccine produced by another drug maker, Beijing Tiantan Biological Products...”

“Merck gave the company the biological technology to produce a hepatitis B vaccine royalty free as part of an unusual joint venture aimed at improving health standards in China.”

New York Times, China Investigates Vaccine Maker After Deaths of Infants, December 25, 2013, <https://www.nytimes.com/2013/12/26/world/asia/china-investigates-vaccine-maker-after-infant-deaths.html>

Communist Chinese Vaccine Scandals Are Commonplace (cont'd)

“The Chinese Government should address the shattered public confidence made worse by the vaccine scandal. The health management system should be improved to ensure that vaccines are properly stored and transported, and transparency of supervision should also be enhanced.”

The Lancet, Vaccine Scandal and Crisis in Public Confidence in China, June 11, 2016, Vol. 387, Issue 10036, p2382, [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(16\)30737-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)30737-1/fulltext)

“Investigators in China have begun recalling defective vaccines produced by a Chinese drugmaker from domestic and overseas markets, health authorities said.”

Insurance Journal, China Recalls Defective Vaccines Recalled from Overseas Markets, August 9, 2018, <https://www.insurancejournal.com/news/international/2018/08/09/497593.htm>

VACCINES ARE MADE IN COMMUNIST CHINA

Coincidences? Globalists Orchestrate and Infiltrate US Response To Covid-19

COINCIDENCE?

In the offshore entity Global Preparedness Monitoring Board ("GPMB"), Drs. Anthony Fauci and Victor Dzau convene to make policy, recommendations, share potential intelligence and intellectual property with not only the Chinese CDC, but also unelected officials at global health foundations. In that boardroom, the head of the Chinese Communist Party's director-general of China's CDC sits across the planning table from the director of the U.S. National Institute of Allergy and Infectious Disease.

The WHO's Global Preparedness Monitoring Board, 2018-2020, <https://apps.who.int/gpmb/board.html>

COINCIDENCE?

In the months before Covid-19 infected the United States, the participants in The Event 201 engaged in strategic planning for a coronavirus pandemic.

Research Gate, The Event 201, Domina Petric at the University Hospital Centre in Split, Croatia, https://www.researchgate.net/publication/340236453_The_Event_201

John Hopkins University's Center for Security Health press release, The Event 201 Model, October 11, 2019, <https://www.centerforhealthsecurity.org/event201/event201-resources/event201-model-desc.pdf>

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Coincidences? Globalists Orchestrate and Infiltrate US Response To Covid-19 (cont'd)

COINCIDENCE?

Event 201 participants endeavored to predetermine that Event 201's benefactors, such as Bill Gates, would be reliable for spreading truthful information during a pandemic.

John Hopkins University's Center for Security Health, Event 201: Communication in a Pandemic, October 14, 2019, <https://www.centerforhealthsecurity.org/event201/event201-resources/comms-fact-sheet-191014.pdf>

COINCIDENCE?

In the months before Covid-19 infected the United States the GPMB engaged in strategic planning for a fast-moving, high impact airborne pathogen outbreak such as for influenza, or an accidental or deliberate release.

The WHO's Global Preparedness Monitoring Board, Summary: GPMB Board Meeting, April 1-2, 2019, IFRC, Geneva, Switzerland, https://apps.who.int/gpmb/assets/pdf/GPMB_Board_Meeting_1-2_April_2019_Summary.pdf

COINCIDENCE?

The GPMB planned for the United Nations by September 2020 to conduct at least two systemwide training and simulation exercises, including one for covering the deliberate release of a lethal respiratory pathogen.

The WHO's Global Preparedness Monitoring Board, A World at Risk Report, September 22, 2019, https://apps.who.int/gpmb/assets/annual_report/GPMB_annualreport_2019.pdf

BILL & MELINDA
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Coincidences? Globalists Orchestrate and Infiltrate US Response To Covid-19 (cont'd)

COINCIDENCE?

The GPMB is utilizing the Covid-19 pandemic to implement its plans to increase the power and financial resources of the UN, China, the GPMB, and the GPMB's benefactors.

The WHO's Global Preparedness Monitoring Board, Statement Calls for a Scaled-Up Global Response to COVID-19: Estimated Costs and Funding Sources, March 10, 2020, https://apps.who.int/gpmb/assets/pdf/GPMB_6March2020statement.pdf

The WHO's Global Preparedness Monitoring Board, Statement on the COVID-19 Pandemic and the Extraordinary G20 Leaders' Summit on COVID-19, April 1, 2020, <https://apps.who.int/gpmb/assets/pdf/Statement%20on%20the%20COVID-19%20pandemic%20and%20the%20Extraordinary%20G20%20Leaders'%20Summit%20Apr2020.pdf>

The Newsteader, Statement from the Global Preparedness Monitoring Board on the Outbreak of 2019-novel Coronavirus (2019-nCoV), January 30, 2020, <https://thenewsteader.com/2020/01/30/statement-from-the-global-preparedness-monitoring-board-on-the-outbreak-of-2019-novel-coronavirus-2019-ncov/>

The WHO's Global Preparedness Monitoring Board, Statement on the launch of the Access to COVID-19 Tools (ACT) Accelerator, April 24, 2020, https://apps.who.int/gpmb/assets/pdf/GPMB_Statement_Accelerator_24_April.pdf