



# World-renowned Covid-19 Expert Testimony Against WHO - Must-See Speech by Dr. McCullough



Dr. McCullough is a doctor who was on the frontlines of the battle against Covid. What he has to say at this special conference in the European Parliament is one of the most important witness reports for an international criminal court and seeks urgent international attention.

On September 13, a high-level conference on the new WHO pandemic treaty was held at the EU Parliament in Strasbourg. The practicing physician, epidemiologist and cardiologist Dr. Peter McCullough shared his experience with the WHO-led pandemic response in this touching and very important speech:

Introduction: It's an honor and privilege to have Dr. Peter McCullough from Texas in the United States of America with us today. Thank you. He is an internist, cardiologist, epidemiologist, holding degrees from Baylor University, University of Texas Southwestern Medical School, University of Michigan and Southwestern Methodist University. He manages common infectious diseases as well as the cardiovascular complications of both the viral infection and the injuries developing after the Covid-19 injections in Dallas, Texas, USA. Dr. Peter McCullough has broadly published on a range of topics in medicine with over a thousand publications and 685 citations in the National Library of Medicine. Dr. McCullough testified multiple times in the U.S. Senate and many state houses on aspects of the pandemic response. Dr. McCullough has had years of dedicated academic and clinical efforts in combating the SARS-CoV-2 virus and in doing so has reviewed thousands of reports, participated in scientific congresses, group discussions, press releases and has been considered among the world's experts on Covid-19. Thank you.

Dr. Peter McCullough: Thank you for that introduction and thanks for all the warm greetings today. Thanks to Miss Anderson, members of Parliament and ladies and gentlemen. As introduced, I'm Dr. Peter McCullough. I'm a practicing internist, a cardiologist, an epidemiologist, and I've been completely dedicated since the onset of the pandemic to doing everything I can to help each and every patient. These are my observations and this is my analysis. There have been two waves of injury to the world. The first has been the SARS-CoV-2 infection, which preyed upon the frail and the elderly. And then the second wave of injury now has been the Covid-19 vaccines. The role of the WHO appears to be adverse in both of these. The role of the WHO appears to be operating within a biopharmaceutical complex, a syndicate, a complicated syndicate that has formed over time. It includes the WHO, the United Nations, the World Economic Forum, the Gates Foundation, Rockefeller Foundation, the Wellcome Trust, Gavi, CEPI, the Coalition for Epidemic Preparedness and Innovation that Gates Foundation and the WEF formed largely. The Department of State in the United States, the National Institutes of Health, the CDC, the FDA, the MHRA in the UK, TGA in Australia, SAFRA in South Africa, the EMA here in Europe. This grouping of nongovernmental organizations with governmental public health agencies is operating as a unit. They're carefully coordinated. And the impact has been adverse. At the outset of the



pandemic, there was an investigation by the WHO on the origins of SARS-CoV-2. That's when the beginning of the cover-up began. Rear Admiral Brett Giroir in the United States nominated three independent scientists to go to Wuhan and figure out what was going on. We knew at that time, and this has all come out in congressional hearings, that Anthony Fauci, Francis Collins, Jeremy Farrar, who was at the Wellcome Trust, who's now the chief scientist at the WHO, Christian Andersen at Scripps, Edwin Holmes in Sydney, Peter Daszak at the EcoHealth Alliance. They all conspired in January of 2020 to cover up what they knew, that the virus was engineered in a joint U.S.-Chinese collaboration in the lab in Wuhan, China. And they deceived the world with 12 subsequent fraudulent papers in the peerreviewed literature. These were quarterbacked by Jeremy Farrar, who is the chief scientist at the WHO. This is all in the series of reports in the House Select Committee in the United States by the U.S. Congress, led by Representative Brad Wenstrup. The WHO has played an adverse role from the very beginning, deceiving the world on the origins of SARS-CoV-2. Doctors like us in clinical practice got behind on this because our governments and agencies like the WHO weren't honest with us. And instead of helping us, or at least getting out of the way in terms of treating patients and saving lives, they got in the way, and they impeded our ability to treat patients. They effectively created an entire environment of therapeutic nihilism. There are only two things that prevented hospitalization and death. One was early treatment, early on, and then the second was to acquire natural immunity with the first episode of the infection. Nothing else worked. There were only two bad outcomes, hospitalization and death. To this day, the WHO does not support, embrace, or promulgate early treatment protocols for patients with acute COVID-19. That should tell you something. That should be a wake-up call. We're going on three years of this. Three years of this. And still nothing to reduce human suffering from the WHO. Nothing. In fact, efforts that enhance human suffering. Because the first wave was the illness. And I've testified in the U.S. Senate multiple times. The majority of hospitalizations and deaths were completely avoidable in the highestrisk patients with early interventions, starting with virucidal nasal sprays and gargles, and then intravenous and oral drugs administered at home to get people through the illness. Now enter the vaccines. Since 2021, the vaccines have ravaged the population in the world. Worldwide, two-thirds of people took a vaccine. The United States COVID Community State Study shows 75% of Americans took a vaccine. Thankfully, 25% didn't. I was the only public health and public figure in the United States in writing to question the vaccines before they came out. And I did it as loudly as I could. The COVID-19 vaccines in the United States, 94% of Americans took a messenger RNA vaccine. It is the genetic code for the potentially lethal spike protein part of the virus. It was the worst idea ever to install the genetic code by injection and allow unbridled production of a potentially lethal protein in the human body for an uncontrolled duration of time. Everything we've learned about the vaccine since they've come out is horrifying. There's not a single study showing that the messenger RNA is broken down because it's pseudouridinated. It's made synthetically. It cannot be broken down. There's not a study showing it leaves the body. We now have papers by Castriotta who demonstrates that messenger RNA is circulating for a month. That's as long as they've looked. We have the spike protein, the lethal protein from the vaccines, found in the human body after vaccination circulating at least for six months, if not longer. And if people take an injection another six months, there's another installation in more circulating potentially lethal protein. The spike protein is proven in 3,400 peer-reviewed manuscripts to cause four major domains of disease. One is cardiovascular disease, heart inflammation, or myocarditis. Every regulatory agency agrees the vaccines cause myocarditis.

I'm a cardiologist. Before COVID, for years, we've had guidelines in cardiology. When there is myocarditis, whether it's symptomatic or not, people cannot exert themselves in athletics. It



will cause a cardiac arrest. And yet across Europe and across the United States, sports leagues were injecting young people who had no medical necessity, no clinical indication with these vaccines, and we have seen a montage of cardiac arrests in young individuals. I'm telling you as an expert cardiologist, these cardiac arrests are due to the COVID-19 vaccine until proven otherwise. They are. Other cardiovascular diseases caused by the vaccine, proven: acceleration of atherosclerotic cardiovascular disease and heart attacks or cardiovascular arrest. Postural Orthostatic Tachycardia Syndrome (POTS), or people passing out due to low blood pressure. You have seen montages of people in the media, one after another, passing out like you've never seen before. It is the vaccine until proven otherwise. Aortic dissection, atrial fibrillation, other arrhythmias, cardiac arrest in the absence of myocarditis has been described with the COVID-19 vaccines. The cardiovascular domain of damage in the human body from the vaccine is substantial. More than anything we've ever seen with cholesterol, high blood pressure, or diabetes. The second major domain is neurologic disease, stroke, both ischemic and hemorrhagic. Guillain-Barre syndrome, ascending paralysis that can lead to death, which it has led to death with messenger RNA vaccines, agreed to by all of our regulatory agencies. Small fiber neuropathy, numbness and tingling, ringing in the ears, headaches. These are common. Third major domain, blood clots. Blood clots like we've never seen before. The spike protein is the most thrombogenic protein we've ever seen in human medicine. It's found in the blood clots. The spike protein causes blood clots. Blood clots larger and more resistant to blood thinners than we've ever experienced in human medicine. I have patients with blood clots now going on two years, and they are not dissolving with conventional blood thinners due to these vaccines. We can't get these out of the body. We can't get the messenger RNA or the spike protein out of the body, as it's continually produced. Fourth and last domain, immunologic abnormalities. Vaccine-induced thrombotic thrombocytopenia and multisystem inflammatory disorder are early acute syndromes, well-described, published. They have their own acronyms, all agreed to by the regulatory agencies. So all of you in the room and all of you listening online are asking, is it me? Is it my family member? Is it my loved one? Who is going to be the next person to drop after a vaccine? We've seen cardiac arrests now two years after these shots. Two years. I'm the senior author on the largest autopsy study ever assembled of death after COVID-19 vaccination worldwide. We searched the literature, 600 papers, all the clinical findings. We reviewed them with contemporary knowledge, experts in pathology and clinical medicine. Our conclusion, 73.9% of the deaths after vaccination are due to the vaccine. They are due to the vaccine. When it's suspected myocarditis, in a second paper, of which I'm the senior author, it's 100% of the time. It's due to the vaccine. Not COVID, respiratory illness, the vaccine. We are seeing now a third false narrative. The first false narrative was the virus is unassailable, we have to stay in lockdown and be fearful. The second false narrative is take a vaccine, it's safe and effective. The third false narrative now is it's not the vaccine causing these problems, it's COVID. It's COVID that we saw back in 2020 causing all these problems in 2023. Don't fall for the false narrative. The medical literature at this point in time is compelling. The Bradford Hill criteria for causality have been fulfilled. The vaccines are causing this enormous wave of illness. Now, could it be you and your family member? A few important papers to finish. One is by Schmeling and colleagues from Denmark. Demonstrating that about 30% of people who have taken a vaccine have zero side effects. Nothing, not even a sore arm. Not even a sensation that anything happened with the injection. Those people appear to be fine forever. As if they didn't take a shot. And the data are the same in the United States in our VAERS system. The second batch group is about 70% of individuals. And they have some moderate side effects, some trouble, but they don't seem to really have serious events. And then there's that small third batch group. 4.2% in the

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Schmeling data. It's through the roof. Myocarditis, cardiac arrest, blood clots, hemorrhagic stroke, disabilities. Sudden death at home in bed. And the data are the same in the United States. 4.2% of people in Europe right now are in trouble. Because they were unlucky enough to get a high-risk batch. In the United States, our CDC v-safe data, which is selfreported data, 10 million Americans, the number is 7.7% got so sick with a shot they had to go to the hospital and be treated and or be hospitalized. A Zogby survey done about a year ago, a big representative sample in the United States, found 15% of those who took a vaccine have some medical problem that they're dealing with right now. So again, 4.2%, 7.7%, 15%. That's the penumbra. That is the Venn diagram that you're all going to be involved in the calculus. What's the path forward? The path forward is clearly for no one to take another shot. No one. Now, the World Council for Health, which is a multinational evidence-based physician and health care provider organization, on June 11, 2022, issued a pharmacovigilance report looking at 39 safety databases, including the WHO v-safe and the EMA databases in the U.S. databases. And their conclusion was to remove all the COVID-19 vaccines off the market for excess risk of death. Excess risk of death. Okay. On the floor of the U.S. Senate, December 7th of 2022, I co-moderated a session, and our expert panel by assent in the U.S. Senate concluded all the COVID-19 vaccines should be removed from the market. All of them. No new boosters. And then in March 23rd of 2023, the Association of American Physicians and Surgeons, a factual, fact-based, evidence-based, consensusdriven organization, just like the two others, also concluded to remove the vaccines from the market. So I submit to you the COVID-19 vaccines and all of their progeny and future boosters are not safe for human use. I implore you as a governing body, European Medicine Agency, to apply all pressure and due urgency to remove the COVID-19 vaccines from market. In the United States, it's going jurisdiction by jurisdiction. Probably state by state will remove them off the market if the federal government doesn't do so. It's going to happen. It's going to happen all over the world. The WHO is standing behind these vaccines. They are far more of a problem than a help to the European Union. And it's my belief that the European Union, the United States, and all major stakeholders should actually completely pull out of the WHO and leave the WHO to its own endeavors, not to have any jurisprudence, any dominion over what we do in healthcare. WHO will never have dominion over what I do as a practitioner with patients in my practice. I'm Dr. Peter McCullough. Thank you so much for having me.

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