



Concerned Doctors
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September 19, 2021

Dear Governor Ivey,

This letter is to respectfully request that prohibition of vaccine mandates be added to the call for the special session of the legislature September 27, 2021, and that prehospital treatments be made readily available to all Alabamians. Our group will provide any necessary information/education to doctors interested in learning protocols that have already saved many. As a leader you know that during a crisis adapting to accurate new data is mandatory in order to be successful. We want to commend you for apologizing for shutting down the state in your WCOV interview. That example of acceptance of errors and corrective actions is essential in a crisis. Thank you for doing so.

The mandates are illegal, unsafe and immoral. An article in the New England Journal of Medicine June 26, 2020 outlines 6 criteria that must be met in order to mandate a vaccine.¹ Two of these criteria have definitely not been met. One criterion that has not been met is that “available evidence about the safety and efficacy of the vaccine must be transparently communicate.” This clearly has not been done. The overarching principle that must be met is informed consent. Other criteria that has definitely not been met is “that the state must create infrastructure to provide compensation to workers who have adverse effects from a required vaccine, and real-time surveillance of vaccine side effects.” There clearly has not been a compensation program set up for injured employees and students and no real-time surveillance of vaccine side effects.

These vaccines are claimed by the manufactures and government agencies to be both safe and effective. They are neither. Our research reveals the following about these vaccines:

1. Herd immunity by these vaccines is unachievable.

As Dr. Scott Harris correctly stated at the beginning of the vaccine rollout, the goal of vaccination is herd immunity. Sir Andrew Pollard, head of the Oxford Vaccine Group, told British lawmakers last month that with the Covid vaccines, the vaccinated are still able to be infected and transmit the virus. He states that vaccination induced herd immunity “is not a possibility”.²

2. The vaccines do not prevent infection.

In a recent interview, the Director of CDC, Dr. Walensky, stated that there have been tens of thousands of break-through cases.³ There are so many that they are now only recording the hospitalized and fatal breakthrough cases. CDC data shows 11,440 hospitalizations and 2675 deaths among the fully vaccinated.⁴

3. The vaccines do not prevent transmission.

The vaccinated are spreading the infection. Infected vaccinated and unvaccinated have same viral load.⁵

4. The vaccines appear to have a short period of benefit.

Pfizer has announced that the antibodies are waning at 6 months.⁶ A recent study from Japan shows that the Pfizer vaccine has already lost its neutralizing activity and infectivity is enhanced. Additional boosters will further enhance infectivity.⁷ This strongly suggest that within a few more months the vaccinated will get sick more often and more seriously than the unvaccinated.

5. The vaccines are injuring and killing a historically large numbers of people.

According to the CDC's Vaccine Adverse Event Reporting System (VAERS), as of 9/3/2021 the vaccines are associated with 443,201 adverse events including 14,508 deaths, 18,439 permanent disabilities, 58,268 hospitalizations and 77,863 Emergency Department visits. Because of the difficulty of the VAERS reporting, it has been well documented that the VAERS system markedly underestimates the actual number and reports are delayed by months.⁸

6. The vaccines reduce the health of all vaccinated populations.

A recent paper from the Trends in Internal Medicine demonstrated that when "all cause morbidity and mortality" is used as the endpoint instead of just COVID-19 mortality," the data from the pivotal clinical trials for US COVID-19 vaccines indicates the vaccines fail to show any health benefit and in fact, all the vaccines cause a decline in health in the immunized groups."⁹

7. The vaccines may be responsible for the new variants.

French virologist and Nobel laureate, Luc Montagnier, MD, in May 2021 said he believes that the mass vaccination programs for Covid may actually be causing SARS-CoV-2 mutations, like the Delta variant, and thus, are prolonging the pandemic.¹⁰

8. Because of novel mRNA technology the long-term effects on autoimmune, neurodegenerative, cancer, and chronic diseases are unknown and may be devastating.

These conditions may take years to develop but is a real concern.¹¹ In an appalling and unheard-of action, the control arm of the pharmaceutical studies have been corrupted by vaccinating the control group. We will never know accurate safety data given this unethical action by the study collaborators.

9. Antibody Dependent Enhancement (ADE) from the vaccine could cause millions of deaths.

In ADE, when animals or humans are given a vaccine and later exposed to that virus, the vaccinated then get sick and die in much larger numbers than the unvaccinated.^{12,13,14} This phenomenon happened in past with attempts to make vaccines against coronavirus, dengue fever virus, RSV and others. If this happens with these vaccines' deaths will increase dramatically among the vaccinated.

10. Liability.

The pharmaceutical companies that manufacture the vaccines as well as the doctors, pharmacies, and hospitals that dispense them are free from all liability by the Prep Act. This in itself is frightening since it relieves them of all responsibility for the damages which are occurring from

these vaccines. Citizens will incur overwhelming expenses from deaths and disabilities caused by these vaccines.

So, if the vaccines cannot produce herd immunity, do not prevent infection, do not prevent transmission, the effects only last a few months, the vaccines are injuring and killing people, and the long-term safety is unknown, of what benefit are they? The only current benefit of the vaccine is that, for a short period of time, the vaccinated are being hospitalized less and dying less than the unvaccinated. That is all you hear in the media lately. This, however, appears to be temporary as the vaccine's effectiveness wanes in 6 to 12 months. An example of this is West Virginia which over the last 8 weeks has seen a 26% increase in new breakthrough cases, a 21% increase in breakthrough cases requiring hospitalization and a 25% increase in breakthrough deaths.¹⁵

Countries that have vaccinated a larger percentage of their population sooner than the US are now experiencing large numbers of hospitalizations and deaths in the fully vaccinated. Data from the UK indicates that the vaccinated have 8 times the hospitalization and death rate of the unvaccinated.¹⁶ Gibraltar and Iceland with over 90% vaccinated are seeing huge spikes in Covid.¹⁷ Gibraltar has seen a 2500% rise in cases despite almost 100% vaccination.¹⁸

The FDA has approved these vaccines in individuals down to 12 years of age. Although the Delta variant infects children more than the original Covid virus, the risk to them of dying is still statistically zero, exponentially less than the flu. In the first 18 months of the pandemic there have only been 439 deaths in the less than 17 age group.¹⁹ The data from Israel indicates that those under age 20 have a 20 times greater chance of dying from the vaccine than from the pandemic.²⁰ My calculations from US data for children under 17 years of age show a 12 times greater risk of dying or being permanently disabled from the vaccine compared to the virus.^{21,22,23,24} The only reason to vaccinate this age group was to prevent them from transmitting it to the "at risk" population. Now that we know that vaccination does not stop transmission, there is no reason to vaccinate the youth. It can only harm them.

Our college-age young adults are also at risk for harm from the vaccines. There have been thousands of cases of pericarditis and myocarditis²⁵ in this age group as well as numerous reports of Guillain-Barre, seizures, and transverse myelitis. If autoimmune, neurodegenerative, and other chronic diseases do occur as feared by prominent virologists, our young adults will be subjected to lifelong ill health. Possible permanent infertility is also a major concern for males and females.²⁶ The 20-25 year age group is definitely low risk for Covid injury and death so vaccination would not be of benefit and could only harm them.

Another untruth that is being propagated by the CDC and NIH is that "natural immunity is insufficient to prevent Covid recovered patients from getting the infection again." The basis for this claim is that there are cases of people who have previously been "diagnosed" with Covid who have gotten sick again with Covid. The truth is they did not have Covid the first time. When the previous diagnoses were made, 40 cycle PCR tests were used to make the diagnosis. However, the data shows that any PCR test that uses more than 35 cycles only grows a virus 3% of the time.²⁷ That means that the previous diagnosis of Covid was wrong 97% of the time. These individuals did not have Covid-19 the first time and therefore they are not reinfections. They simply had another virus, such as influenza.

Natural immunity does work and we know that individuals who had SARS-COV-1 18-20 years ago are still immune today.^{28,29} A Harvard study done on Israeli data shows natural immunity is 27 times better than vaccine immunity at preventing symptomatic infection and 8 times better at preventing hospitalization³⁰ Two studies show that covid recovered patients have less than 1% reinfection rate.³¹ These natural immune individuals are being encouraged to get a vaccination that they don't need which exposes them to twice the risk of an adverse event compared to a Covid naïve individual.³² A study from the Cleveland Clinic (with 52,000 participants) demonstrates no benefit from vaccinating Covid recovered patients.³³

The message from the CDC and Dr. Harris of the ADPH is that we will only defeat this pandemic when sufficient numbers of people are vaccinated. This message is incorrect for two reasons: 1) We have never been successful using a vaccine to end a pandemic which is caused by a virus that can live in animals. The coronavirus can live in cats, ferrets, raccoons, bats, and other animals. It is impossible to vaccinate all these animals. 2) Respiratory viruses mutate faster than vaccines can be produced. We are seeing this happening already and our vaccines are just putting selection pressure on the virus to mutate to more virulent strains.

We have excellent prehospital treatments for Covid-19 including monoclonal antibodies, ivermectin, and other FDA approved drugs, many of which are being suppressed and discouraged. Each of these have been used safely for decades and are suddenly labeled as unsafe. Dr. Peter McCullough estimates that the use of these suppressed and discouraged medications could have reduced deaths by 85%.³⁴ Our group of doctors here in Alabama has treated over 4800 patients with only 25 hospitalizations and 2 deaths. Countries all over the world are using these repurposed drugs and supplements with great success. Their use would allow a more rational vaccination approach. We could vaccinate those who are at highest risk and those who desire vaccination.

In light of the above data that clearly indicates that the vaccines are not safe, only temporarily effective, do not stop transmission, have completely unknown long-term safety, and this information is not transparently communicated, nor is there infrastructure set up for compensation of injured employees and students, with all the energy that we possess we urge you with all the energy we possess to allow this to be address in the special session. No entity should be allowed to mandate a vaccine that is potentially lethal.

Our group will provide any necessary information/education regarding protocols that have already saved many to doctors or any interested officials. We know that saving lives is your utmost concern and stand ready to assist with our proven protocols.

Sincerely,

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1. <https://www.nejm.org/doi/full/10.1056/NEJMp2020926>
2. <https://www.telegraph.co.uk/global-health/science-and-disease/herd-immunity-mythical-goal-will-never-reached-says-oxford-vaccine/>
3. <https://www.zerohedge.com/covid-19/did-cdc-director-just-accidentally-admit-vaccination-passports-are-futile>
4. <https://www.cdc.gov/vaccines/covid-19/health-departments/breakthrough-cases.html>
5. <https://www.medrxiv.org/content/10.1101/2021.07.31.21261387v1>
6. <https://www.medrxiv.org/content/10.1101/2021.07.28.21261159v1.full.pdf>
7. https://www.biorxiv.org/content/10.1101/2021.08.22.457114v1.full.pdf?fbclid=IwAR2uoBh6WnhbdgcdBgxBz0o_fPH4htsYN3SrcPGaBQPV_p2MgqiEy6aXFU4
8. <https://childrenshealthdefense.org/defender/vaers-cdc-data-injuries-deaths-covid-vaccine/>
9. <https://newsrescue.com/wp-content/uploads/2021/08/us-covid19-vaccines-proven-to-cause-more-harm-than-good-based-on-pivotal-clinical-trial-data-analyzed-using-the-proper-scientific-1811.pdf>
10. <https://www.globalresearch.ca/bombshell-nobel-prize-winner-reveals-covid-vaccine-creating-variants/5746003>
11. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7833091/>
12. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3335060/>
13. <https://pubmed.ncbi.nlm.nih.gov/32908214/>
14. <https://academic.oup.com/cid/article-abstract/19/3/500/459343>
15. <https://www.wvpublic.org/government/2021-08-23/w-va-officials-say-breakthrough-covid-cases-on-the-rise>
16. <https://gnews.org/1357351/>
17. <https://nworeport.me/2021/07/30/gibraltar-iceland-see-massive-covid-spike-despite-over-90-of-population-vaccinated/>
18. <https://dreddymd.com/2021/08/09/fully-vaccinated-gibraltar-sees-2500-percent-increase-in-covid-cases-prompting-new-lockdowns/>
19. https://www.cdc.gov/nchs/nvss/vsrr/covid_weekly/index.htm#SexAndAge
20. https://americasfrontlinedoctors.org/wp-content/uploads/2021/06/6097799a8f5a5318e5e6073f_Exp-Herve-Seligmann-Eval38-H-signed.pdf
21. <https://www.statista.com/statistics/457786/number-of-children-in-the-us-by-age/>
22. <https://www.statista.com/statistics/1191568/reported-deaths-from-covid-by-age-us/>
23. <https://childrenshealthdefense.org/defender/vaers-significant-jump-reported-injuries-deaths-after-covid-vaccine/>
24. <https://childrenshealthdefense.org/defender/vaers-vaccine-injuries-climb-pfizer-seeks-full-approval/>
25. <https://www.cdc.gov/vaccines/acip/meetings/slides-2021-06.html>
26. https://2020news.de/wp-content/uploads/2020/12/Wodarg_Yeadon_EMA_Petition_Pfizer_Trial_FINAL_01DEC2020_EN_unsigned_with_Exhibits.pdf
27. <https://academic.oup.com/cid/article/72/11/e921/5912603>
28. <https://pubmed.ncbi.nlm.nih.gov/32668444/>
29. <https://www.science.org/doi/full/10.1126/science.abf4063>
30. <https://www.medrxiv.org/content/10.1101/2021.08.24.21262415v1>
31. <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciab345/6251701>
32. <https://covid.joinzoe.com/post/vaccine-after-effects-more-common-in-those-who-already-had-covid>
33. <https://www.medrxiv.org/content/10.1101/2021.06.01.21258176v2>
34. <https://stuartbramhall.wordpress.com/2021/07/11/early-at-home-treatments-could-save-85-of-covid-deaths/>