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DURATION

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16 SPEAKERS

Del Bigtree

NARRATOR VO

Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Male Speaker

Ron Johnson, (R) United States Senator from Wisconsin

Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Dr. Peter Hotez, Dean for the National School of Tropical Medicine, Baylor College of Medicine

Rear ADM. Anne Schuchat, MD National Center for Immunization & Respiratory Diseases-Director

Dr. Jennifer Caudle, Instructor of Medicine, John Hopkins University School of Medicine

Dr. Aaron Carroll, Professor of Pediatrics, Indiana University of School of Medicine

Male News Correspondent

Paul Offit, MD, Director of the Vaccine Education Center, The Children's Hospital of Philadelphia

Female Speaker

Scott Gottlieb, MD, Former United States Commissioner of Food and Drugs, Member of Pfizer's Board of Directors

Dr. Sanjay Gupta, Chief Medical Correspondence for CNN

Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

START OF TRANSCRIPT

[00:00:05] Del Bigtree

Have you noticed that this show doesn't have any commercials? I'm not selling you diapers or vitamins or smoothies or gasoline. That's because I don't want any corporate sponsors telling me what I can investigate or what I can say. Instead, you are our sponsors. This is a production by our nonprofit, the Informed Consent Action Network. So if you want more investigations, if you want landmark legal wins, if you want hard hitting news, if you want the truth, go to [ICANdecide.org](https://www.ICANdecide.org) and donate now. Alright, everyone, we ready?

[00:00:44] NARRATOR VO

Yeah. Let's do this.

[00:00:46] Del Bigtree

Action. Good morning, good afternoon, good evening, wherever you are out there in the world, it's time for us all to step out onto the Highwire. You know, **this journey has been incredible. It's been really ten years that we have been working on medical freedom, on discussing the issues around vaccines, around vaccine dangers.** Also, if you think about this week, we're looking at 250 years of the United States of America being founded, the idea of freedom. I think the more and more I get into the depths of this discussion about vaccines, the more I realize this is more than just a story about vaccine injury, or about a fraud or lies by government. I believe that ultimately, this vaccine issue is pointing out a future where they want full and total control over our bodies, not just in America, but in every single household, in every nation around the world that's watching this show right now. And I suppose there's a chance they were going to get away with it. Maybe Covid was just the final chapter. Except that a few unlikely individuals had forged a new path, had started a conversation that was never supposed to be had. And maybe the most important of those conversations is the legalities around what was taking place with this vaccine issue in America. And early on in my travels, after I'd spent a year with the film VAXXED going all over the country, we knew we wanted to get into courtrooms. We knew that we had to take this beyond movie theaters, beyond social media and public opinion. We needed to see change. We need to set precedents. We needed to start arguing for freedom, the freedom that was our rights given to us by our founding fathers, which we celebrate profoundly this week.

[00:02:54] Del Bigtree

Well, I was lucky enough in that journey to meet what I think will be maybe one of the most consequential constitutional attorneys in history, Aaron Siri, and the work that we do at ICAN, and that I talk about every week on The HighWire, would not be possible if it weren't for the work of Aaron Siri. I'm not the only one that's recognized this. Robert Kennedy Jr. The HHS secretary has counted on Aaron many times. And of course, our great friend, Senator Ron Johnson, also leans on Aaron, as I do. And today we're going to celebrate a great talk that Aaron was honored to give at the Kennedy Center. And I want to just talk to him a little bit before we jump into that. So it's my honor and pleasure to be joined by Aaron Siri now. Aaron, it's good to see you. You know, I've been as you know, I've been traveling over Europe, around Europe. I've been in Italy, I've been in France, I've been in Poland, and they're all sort of looking at us the same way. Like, if America doesn't solve this, somehow they feel like their rights are gone forever. I've been saying to them, look, you still can vote. You need to step up. You need to find Aaron series in your country. But how important is this? As we sit here, you know, a 250 year celebration of this concept of freedom in America? Where do you think this issue of medical freedom of vaccines, uh, fits in this conversation right now?

[00:04:35] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

I think that America has often taken the lead in terms of Western democracies of where rights go, right? So I think that it is critical, and I think that probably what you're seeing from folks in other Western democracies is if America falls on this issue, that could have a very, very detrimental effect in these other countries for numerous reasons, because of the way the politics interact, because the economics interact, uh, and for other reasons as well. So, uh, in terms of that comment that you got, it is really important that we, you know, um, set a good example, let's put it at least put it that way. And where do I see it going? I see it going in the right direction. I think that, um, you know, uh, we've talked about this a lot. Rights are on a pendulum. You never win them, you always fight for them. And you've got to keep those who want to take it away from you at bay. And in that regard, I feel pretty good. Uh, we are. I think we are moving in the right direction, no doubt about it, in this country. Um, we've just got to keep pushing.

[00:05:39] Del Bigtree

Let me ask you a question. I mean, you're you're deeply entrenched in the, you know, the legal side of this. Does that environment change like if in the next presidential election. We see, you know, this thing bounce back to, you know, a more I hate to say, liberal agenda because I believe that word has really been turned upside down. But if we're to leave the Robert Kennedy Jr. Donald Trump era where we're not censoring doctors, talking about, you know, alternative treatments and things like that, if we were to bounce back to more of a globalist, uh, representative that sees the WHO as valuable, the WEF starts signing on to pandemic treaties. Does that change the environment for you as an attorney in that world, or does that or do they run on different sort of planes?

[00:06:35] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Um, remember that, uh, the, if you're talking about Republican versus Democrat, the Biden administration was in office for the, for, you know, years where most of the restrictions started to come on vis a vis Covid, to try to really take away people's right. Want to fly on a plane? Got to wear a face diaper. Want to walk into, you know, go down the list of ridiculous requirements six feet away, the virus. You know, I mean nonsense, right? Total nonsense. That that just. But, um, what also happened during those same four years, you saw probably the largest number of states passing laws that protect medical liberty that you've ever seen in the history of our country. You saw the largest number of governors pass executive orders protecting medical liberty, and you probably saw the largest number of judicial decisions protecting medical liberty. Then you've probably seen, you know, depending on how you count it. So even though on the one hand, the federal government was looking to take away your rights, how about a majority or about half the states of this country went hard. The other direction, laws that are still on the books today, and most of what the federal government tried to do, then was beat back in the courts and, uh, found to be unconstitutional or struck down for other reasons.

[00:07:54] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

So it didn't work. Um, so, you know, under the current administration, um, uh, I, you know, I've not seen the current administration take a lot of steps to protect medical liberty. Um, you know, unfortunately, in fact, in a recent, uh, in a recent U.S. Supreme Court case, the federal government, the U.S. Department of Justice, justice under Trump chose it didn't have to chose to intervene on the side of New York state, against the health care workers that were improperly fired for refusing a Covid 19 vaccine. So you can't always count it, uh, based on the quote unquote, you know, politics, but, um, certainly not on the federal level. But, um, uh, certainly I would say that a, uh, a white House that was, uh, a Democrat, not Republican, is certainly more likely to revive the W.H.O. partnership with Gavi and do a lot of these steps that are going to be, um, make things more difficult in that regard.

[00:08:58] Del Bigtree

When you look back, as I know I do, when you and I first met and sat down and tried to imagine what this journey would be in courtrooms, uh, laying out strategies on, you know, the first cases, whether it was, you know, against HHS, just simply asking FOIA requests. Can you please provide us with the meeting minutes that took place and your recommendations that were supposed to be happening every two years based on the 86 act and then ultimately the task force and where we started, which just seems to me like a hundred years ago, but it's really only about nine years ago that we started this journey. Do you, you know, in that work, do you feel like we're right on target? We're ahead of schedule. Are you surprised at the things that have happened? What are your thoughts? Just from, you know, being the thick of this battle?

[00:09:53] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Oh, I think we're farther along than we could have hoped. I mean, I, you know, changing culture, cognition across an entire country of 350 million folks is, is quite a task. Um, and then, um, capitalizing on that to get laws changed at the state level, federal level, um, executive orders and judicial decisions is then a whole nother process. So, you know, often that's, that's a very, very long process. Um, I'd say we're way a lot further out than I ever thought we would be. I mean, I'm, um, you know, as, you know, uh, you know, um, from the C4 side, at least we work with legislative reps on the state and federal level now all the time with regards to protecting medical liberty. And we have judges that are really willing to listen and, and, and look carefully at these products and make decisions based on the facts regarding them. So, and I don't know what the stats are, but, uh, I would say that a good and I'm going to guess I'm speculating here, 20 to 30%, at least of the American public really is understands how critical medical liberty is. I feel like that's where we are. I would want good data on that, but certainly about half the country, you could just say vaccine injury and you don't get looked at like that. That never happens. That's that's an impossibility right. When we started this, you know, when we started working on this issue a decade ago, you couldn't even say vaccine injury without somebody looking at you like you had like 16 horns, right? Yeah. Now you could just say, oh, yeah, vaccines can cause injury. That's, that's part of the cultural norm. Now that didn't exist a decade ago.

[00:11:41] Del Bigtree

It's really amazing. Just a few weeks ago, I believe it was the Washington Post wrote an article about your success, about the success of the nonprofits involved in this space, and they almost spoke about a journey to the Supreme Court as inevitable, and that that could change vaccine policy for decades to come. They mentioned several of the cases that that we've brought with you. Uh, you are you know, I imagine it's like talking to an athlete that's been dreaming about the Super Bowl, you know, or, you know, the Final Four or whatever it is when you sit staring at this Supreme Court opportunity, what are your thoughts now? Do you feel good about how the Supreme Court is set up? Do you you know, do you like the cases that are moving there? Uh, because it does seem inevitable that you will be standing with, you know, I know you're bringing in some really great attorneys around you in that situation, but what are your thoughts about going to the Supreme Court now? Are we ready?

[00:12:47] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

We're ready with the right cases. Absolutely. I feel good about the cases that that either I can support or I can't, uh, directly involved in, uh, you know, the, I think what makes them gets, so to speak, those who want to take away our rights or who don't think you should have rights because you can't make your own decision so upset is that in some respects, what we're doing is, is similar to what big industry would do, what I guess the pharma industry or the energy industry or other industries would do. We recognize that, you know, change one giant swing lawsuit rarely happens and then changes the whole landscape. It happens by slowly moving the case law, moving the legal precedent in a direction over time. And you do that by bringing, you know, uh, I'll use an analogy from the legislative branch. You bring a law that just, you know, is an incremental change. Incremental changes are able, you're able more able to get big changes are a lot more difficult. So, you know, first you mandate the one vaccine just for kindergartners, right? Then you mandate maybe a second one for them, and then you mandate it all. One more for elementary school. And each incremental change just doesn't feel. If you imagine if you just went and said, okay, we're going to pass a law that mandates 17 vaccines for, you know, elementary, middle, high school, college nurse nurses, preschool teachers, all if you try to do that all at once, flu shots for you get mass opposition. So in the same way we're what we're doing is we are slowly bringing cases that chip away and that restore our rights bit by bit.

[00:14:27] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

And that just takes time. But what's frustrating to the other side is that every one of those bits is easier to win on because it's, it's a lot easier and clearer to see the violation. And so this is what's gotten the you know, those who want to continue to take our rights upset is that we're kind of using their playbook. And so in many ways, right? The one of big industry, they don't expect it. Um, you know, the actors on our side are not funded in the same way. We don't have the same resources. Um, that, that, you know, big industry does where they're making billions of dollars every year on a particular product, let's say. So they could throw in 100 million of that, you know, or 200 million every year towards that. And it's just a drop in the bucket for them. So, um, I feel really good about the cases that we have, um, that are, that are being presented before the courts because they are narrow and they highlight the real issue. Uh, with the, with taking away people's rights in this area in a way that where you just try to, where you see a lot of other cases out there, just try to take a, you know, just a, a, a, It's, you know, full frontal approach where they're just storming in. Um, it's not going to work.

[00:15:42] Del Bigtree

Well, I've said it all along. That's why we love working with you. Um, there's strategy to every decision that's made. You've been really great at pushing back when I wanted to storm a gate, you're like Dell. They're just going to bounce you off. That's not how we do this. Uh, so it's incredible. It's incredible the work that you've done. I'm so proud to find ourselves in this position. And there's probably nothing that says that the culture has changed around the conversations of vaccines. Uh, nothing says that more than the idea of Aaron Siri standing on the stage at the Kennedy Center talking about vaccines. So tell me how how did this happen? How did this come about?

[00:16:24] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Uh, I don't know. It's a, it's a bucket list item I didn't know I had, I have had a few of those lately. I was like, oh, I got, I got a call. I got a call. Um, somebody, um, pretty high up had read my book, and I think the conversation was read the book and checked the references and thought, okay, this is a conversation that should be had on more of a national stage. And I was invited to talk at the Kennedy Center. So I was like, sure, happy to do it. Um, I thought what a great opportunity because those talks, as I understood and it did, attracts folks from government. I know that in the audience or folks high up in the FDA there, CDC, probably other agencies. Um, there was a bunch of reporters there. And so it was a great opportunity to talk directly to them, um, and tell them exactly what I thought about the work they had done and what I think they needed to do to correct course, including, uh, you know, a lot of them firing themselves. Uh, so it was, it was.

[00:17:29] Del Bigtree

How'd that go over?

[00:17:29] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

It was, it was, It was a it was an interesting opportunity. I mean, you know, it was meant to make a point, which is they've really, really messed up. And, you know, I in the one hour I had, I tried to cover a lot of agencies and I tried to do it efficiency and try to make it entertaining. Um, but yeah, it was, it was an incredible opportunity. And Ron Johnson was gracious enough to do an introduction and said some very, um, blushing words.

[00:18:00] Del Bigtree

Amazing. Where would I mean, honestly, just for, you know, a couple of thoughts on Senator Ron Johnson. He's one of a kind. He has opened so many doors. He's really kept this narrative open inside of government when nobody else would. He I mean, I just keep saying he's a dog with a bone, sort of like we are. Once you get on this topic, you realize you just can't walk away. I know it's why Robert Kennedy Jr finds himself as HHS secretary. He just I mean, he could have stuck with the environment. But once you get looking at this issue, you really can't turn away. But you know, how important is Ron Johnson to the work that we're all doing right now?

[00:18:38] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

It's incredibly important. And he and the rarer, I would say individual like him who no matter what they try to do to get him to stop, no matter how much they attack him, no matter how much they vilify him, no matter how many demeaning things they say, no matter how many pejoratives they use, he just doesn't care. He knows what's right and he's just going to keep pushing what's right. That's rare. Um, you know, a lot of the folks, especially in public office, you attack the reputation that that changes how they act, that conforms their conduct. And the media knows that the PR agencies know that the industry interests know that. And that's why they, you know, attack folks the way they attack you, the way they attack me, the way they attack others. But, you know, in Ron Johnson's situation, it's not moving him. And that's rare. And so, uh, you know, and by him not moving, what's great about that is that other politicians can, can, you know, gravitate around him. He holds those hearings and other senators come in. You've seen they come in and they'll say things. They're like, oh, wow, they agreed to. Now they're not out there, you know, staking it all. Like, you know, Senator Johnson is. But he gives them a space to be able to come and do that, to be able to make this a real conversation shoot, even those who opposed to it have to grapple with that information to some degree.

[00:20:07] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

And you could see that, um, you know, um, so in any event, he's, he's, he's incredible. I'll say this to, to, to echo his words, he might be the most consequential senator of our lifetime. Um, and he really may be. I'm taking on, uh, incredibly, Um, controversial topics that are existential to our country, like the health of the children and adults in this country. We don't reverse what we have going on. We're going to have almost nobody ready to be able to serve in the military. The national debt that that you know, that that is an existential crisis could put our country in a death spiral. He speaks out loudly, and he speaks about it in a way that that that certainly will not, um, make him friends with his colleagues because he keeps calling out their pork and their improper spending, not just on the Democrats, but on the Republican side too. So, um, yeah, he might be very well. He probably is the most consequential senator we will see in our lifetimes ever.

[00:21:11] Del Bigtree

Well, the two of you graced the stage at the Kennedy Center. Any final thoughts on maybe what you hope to achieve or what your vision is? It's certainly now going to sit in a strong place in the public record. Um, final thoughts on, you know, how this how this went. Did you like how it turned out?

[00:21:29] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Yeah, I love the event. I thought it was great. Um, and as you watch it for anybody that does, when I make comments to reporters, know they were sitting right there in the audience. So I was talking directly to them, by the way, as well as making comments to members of the CDC, FDA, they were right there. I could see them. I could see the heads of some of these agencies or, you know, those in the higher ups sitting there in the audience, I recognize them. So, um, it wasn't just me talking into an abstraction. I was talking directly to them. And what I would like to see is, um, folks really integrate this knowledge. The what's in the Kennedy Center presentation, what's also on ICAN website in the get informed section, because the more knowledgeable everybody is out there on this issue, especially those who already understand medical liberty, it's one thing to your, you know, you, you're you're on the page because your child was harmed. You learned about it early and just never participated in the products for one reason or another. It's another thing to be on the page of medical liberty and be knowledgeable such that you know you're lethal, so that when that discussion comes up, you could talk about it, you could persuade others, and you don't need to persuade them about everything, just the point that they raise. Um, and you could do so calmly with, with a base of knowledge that is incredibly important for this conversation. And, you know, my hope is that everybody out there who understands the importance of medical liberty never shies away from speaking about and speaking out. Because if everybody out there did speak out, this thing would be over very quickly.

[00:23:10] Del Bigtree

That's exactly the message I've been bringing around the world as I travel. You just need to use your voice and everything will change. Uh, Erin, you've used that voice better than maybe anyone on this planet. I'm looking forward to watching this Kennedy Center speech. Thank you for all you do. Thank you for your work with ICAN. We really appreciate it.

[00:23:30] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Thank you Del. Thank you for your voice. Appreciate that. Uh, keep moving it around the country and the world.

[00:23:37] Del Bigtree

Alright. Will do. Take care. Well, you know the famous line. Don't fire till you see the whites of their eyes. The speech you're about to watch is well within distance of the whites of their eyes. Speaking to the politicians that maybe have voted against us, the journalists that have written against us, and the health department officials that have made major mistakes. This talk literally is in the belly of the swamp. Enjoy.

[00:24:22] Male Speaker

Ladies and gentlemen, please welcome Senator Ron Johnson.

[00:24:37] Ron Johnson, (R) United States Senator from Wisconsin

Good evening. Good evening. So they told me, now I can say I performed the Kennedy Center. So, uh, appreciate that. Uh, first of all, it's a real honor and privilege to come here and introduce Aaron Siri to you. Um, I wasn't quite sure who would be comprising the audience. I'm hoping your fans as I am of Aaron Siri. Okay, good. So, you know, I come from the private sector, so I'm not a real fan of lawyers. I mean, like, like, no offense. I mean, I paid way too much money for whatever representation I had when I came here. The Senate, though I never really intended to be an investigator. Uh, do a lot of oversight, but that became my role. And now that I've seen how much congressional oversight has atrophied over the years, how I've seen how effective the adversarial process and lawyers can be at extracting information from a government that's much too large. I've gained a new respect for for the legal profession, uh, because it's just true. I mean, as much as I've got the constitutional authority to try and extract information from the agencies, they realize I've got very little enforcement power. The enforcement power lies in the courts, and that's who the legal system. So from my standpoint, the reason I'm so honored to introduce Aaron Siri is I truly believe that he may be the most consequential attorney in my lifetime. Now, that's saying a lot. And there may be a few doctors in the crowd here, too, so you may maybe don't like what I'm going to say next.

[00:26:18] Ron Johnson, (R) United States Senator from Wisconsin

If he had an MD behind his name, he might be the most influential MD in my lifetime. Um. Now, I didn't know Aaron Siri from Adam quite honestly, until Covid hit, and I think Covid opened up an awful lot of our eyes. Um, I, Aaron Siri came to my attention when I was holding hearings when I was holding public events. And my first public event on vaccine injuries occurred in June of 2021 in Milwaukee, where Ken Rucker's, a green Bay Packer line lineman, his wife was vaccine injured. And I just offered, well, can't do much other than I can give you a platform to tell your stories. Uh, a number of months later, in November 2nd, 2021, we took that type of hearing public event to Washington, DC, where we had the vaccine injured together with a lot of medical experts as well. And so I had my expert panel on, we called it vaccine mandates. We should have called it vaccine, should have called it injection injuries. And I got in contact with Aaron Siri because he was representing Doctor Patricia Lee, who was one of the first doctors who came out publicly talking about the injection injured. And what Aaron testified in that event, talked about all the calls he was getting into his practice. Some of those calls came from doctors who were vaccine injured, doctors who were trying to get treatment, and they couldn't get it. The the doctors they sought treatment from said, we don't believe you.

[00:27:59] Ron Johnson, (R) United States Senator from Wisconsin

And of course, Doctor Patricia Lee finally got a meeting with the officials at the CDC, the FDA. One of them was Doctor Peter Marks, who talked about, oh, how wonderful the system was. And we're not seeing any. We're not seeing anything. And so the main point that Aaron made at that public hearing is that until the federal health agencies, until the medical establishment acknowledged that the vaccine, the injection injuries, these people won't get treatment. Now, the very sad fact of the matter is, here we are 4 or 5 years later, they still haven't admitted it, and people are not getting treatment. It's a very sad fact, but again, it was Aaron's advocacy for at that point, doctor, uh, Patricia Lee, that put him on my radar. And then I had him also testify at a, at an event we held on December 7th, 2022 that was titled vaccine Covid 19 vaccines What They are, how They Work and Possible Causes of Injuries. And that was the event where Aaron Siri released the results of the V-safe data system. Um, it took him one and a half years and two lawsuits to extract that information from a system set up to provide the information to the public. And of course, what he revealed is out of 10 million people in that voluntary survey, 7.7% sought medical care, 25% either had their. They were unable to work or have conduct their normal daily activities. Again, that was a groundbreaking revelation. And yet the media just ignored it.

[00:29:48] Ron Johnson, (R) United States Senator from Wisconsin

Fast forward about three years. I had once I became chairman of the subcommittee investigation, one of my primary focuses has been really the corruption of science, the the capture and corruption of our federal health agencies. So of course, I called Aaron Siri to testify. And that was the hearing in which he really laid out the fact that. All of these. The safe and effective is all based on faulty science. We do not have rigorous science backing up the childhood vaccine schedule. We simply don't have it. It doesn't exist. And at that hearing, my ranking member had this Commonwealth Fund study saying there are going to be three 3 million lives saved by the Covid vaccine. And one of the things I love about Aaron is he's an attorney who uses numbers. I'm an accountant, I like numbers. And that claim is so easy to disprove. And I just want you to follow my numbers here. 2019 there were 2.5 million deaths in the US. Remember that 2.85. We'll round up to 2.9 now. Population has increased about one and a half times since then. So you'd expect in 2022 the death rate would have been about 2.9, just a little over 2.9. Right. Here's what actual deaths actually were. So the year before the pandemic, we had 2.9 million deaths in America, the pandemic, 3.4 a half a million people, probably the least healthy. The ones that Covid could really attack. Half a million additional deaths. 3.4 now, you would assume if the vaccine was that effective, we would have gone back down to something closer to 2.9, right? That didn't happen.

[00:31:37] Ron Johnson, (R) United States Senator from Wisconsin

2021, the year the vaccine this effective, the safe and effective injection. We had 3.5 million deaths. 2022 backed down a little bit 3.3. So we never returned after this injection that was going to save us from the pandemic. We never returned to a reasonable level of about 2.9 million deaths. And to assume that the vaccine saved 3 million lives, obviously it didn't, but to assume it did, you'd have to assume that we were going to go from 2.9 million deaths in 2019 to 5 million deaths in 2021 and 2022. It's just it's farcical. And yet that's what people cling to. That's the narrative, right? It's like save 3 million lives. Pardon my French. It's bullshit. And. And in that hearing, you know, this is where Aaron really started laying out the truth of vaccines and how it's the only product that we can't sue the manufacturers for, and that the health agencies are hopelessly convicted. Conflicted. You can't promote vaccines and at the same time assure their safety. So he started laying the groundwork for what I think later became the subject of tonight's talk. Uh, his excellent book, vaccines. I'm in the last hearing. I had him at September 9th, 2025. That title was How the Corruption of science has impacted public perception policies regarding vaccines. By the way, I want to step back. Starting back in November of 2021, there were about 18,000 deaths reported on VAERS.

[00:33:24] Ron Johnson, (R) United States Senator from Wisconsin

In November 2021, 32.5% of those occurring on the day of vaccination within 1 or 2 days. Fast forward to September 9th, 2025. We're up to 38,000 almost 39,000 deaths in 24% of those occurring on either the day of vaccination or within 1 or 2 days. And go back to what the FDA, CDC was telling these doctors like nothing to see here. Vaers is great until all of a sudden Vaers isn't great. All of a sudden they're saying that there's a bunch of cranks, a bunch of anti-vaxxers, loading false information. Um, it's it's a scandal in and of itself. But anyway, during this time period, I finally watched the excellent deposition that Aaron Siri had of Stanley Plotkin. And if you haven't seen it, it's probably worth maybe not the full nine hours I watched the full nine hours. I hope I can. I hope Aaron has put together a highlight reel of that because it just shows. It just shows how craven these individuals are that are pushing safe and effective. And there's just nothing there's no there's no science to back it up whatsoever. Um, in that hearing, he talked about the Institute of Medicine of the they assessed the safety of CDC's childhood vaccine schedule, and they concluded, quote, studies designed to examine the long term effects of the cumulative number of vaccines have not been conducted. They were charged to prove that these things are safe. They haven't conducted the studies, but this is what they were coming out with.

[00:35:00] Ron Johnson, (R) United States Senator from Wisconsin

And by the way, there's a great book by Gavin de Becker that really talks about it goes in depth about this. Institute of Medicine study. But they concluded there is no evidence that the schedule is not safe. That's as good as they could say. Which, of course, means there's no evidence they can say that it is safe. And again, Aaron pointed that out. Um, finally at that hearing is where we where he released. We released the Henry Ford study, a real world study of 18,000 children between 2000 2016. The conclusion of that one is that the vaccinated population. This is the only study where you have vaxxed versus Unvaxxed about 16,000 vaxxed, about 2000 unvaxxed. So you can really tell is there a difference? And there's a difference. The vax population have two and a half times the rate of chronic illness overall, you know, much higher different types of chronic illnesses. So again, that to me was groundbreaking. And of course the study wasn't released. We had to do it in a Senate hearing because it did not match the narrative of the Pro-vaccine crowd. So this event, and I'll conclude on this note, because if you haven't read vaccines. Amen, you should their, their their earlier books, Dissolving illusions, you know, excellent book by Suzanne Humphries, uh, turtles all the way down, you know, Peter McCulloch's his vaccines, myth, mythology, ideology, reality. But if you can only read one book, I would really recommend I've been recommending vaccines on men because it's just a seminal work.

[00:36:37] Ron Johnson, (R) United States Senator from Wisconsin

It kind of combines all, all that information and again, uses charts. And I'll end on this note, there's a chart on page 84, and I think this is just brilliant. On the part of Aaron, he lays out the number of deaths in the year before a vaccine was available for all these childhood illnesses. So if you if you total them all up and again, you've heard, you know, vaccines save millions of lives. Now, I did grok I did perplexity today. What is the real claim on an annual basis? Annual basis. They're claiming about 37,000 deaths per year saved by vaccines in the US. In total, there were 4906 deaths. Of all those childhood diseases the year before the vaccine came on board. Of course, Suzanne Humphries and Dissolving Illusions show shows that the rate of of these diseases, the rate of deaths from these diseases had declined by 95, 96, 99% before any vaccine was ever. Introduced. But again, they credit vaccines with all these live saves. Once again, to use the word, it's bullshit. So again, I'm just so honored to be here to introduce somebody who, again, I think is just the most consequential lawyer in my lifetime because I think his his groundbreaking work, his ability to explain things in just easy to understand terms. The courage of fighting the powerful interests that he's fighting is just unmatched. It's unparalleled. And even better yet. Even better. Better yet, he's winning. He's making a real impact. So, ladies and gentlemen, Mr.. Mr. Aaron Siri.

[00:38:30] NARRATOR VO

Thank you, thank you. Thank you, thank you. Alright.

[00:38:45] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Good evening everybody. Wow. I've got a lot to live up to. That was those were big words. Thank you Senator. Alright. Um, well, I'm going to have to fill the shoes. And the promise that Senator Johnson just made about the work I've done and what I can do to hopefully give you insight into the products that we're going to discuss tonight. Vaccines. I'm going to go through some basics just to set the table, and then we're going to get into some of the some of the evidence and details, because the evidence matters. It's critical. So as Senator Johnson mentioned, vaccines have immunity for liability for the injuries they cause the manufacturers and the administrators do. Vaccines are in fact, the only product in America, the only one where I can't bring a lawsuit to claim. Had you made that product safer, this child would not have a cardiovascular issue, a neurological issue, an immunological issue would not be dead. It's the only one. And that's because of a law called the National Childhood Vaccine Injury Act of 1986. As the law states, quote, no person may bring a civil action against a vaccine administrator or manufacturer for damages arising from a vaccine related injury or death, end quote. And as the U.S. Supreme Court confirmed, when there was an attempt to challenge this basically blanket of immunity, that, quote, we hold that the National Childhood Vaccine Injury Act preempts all design defect claims.

[00:40:23] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Those are claims that you could have made the product safer. For injury or death caused by vaccine side effects. That is the law of the land. How did this law come about? Well, let me tell you how it came about. Leading up to 1986, there were only three routine vaccines MMR, DTP, and OPV. That's it. Three routine childhood vaccines. That's the whole schedule in 1986, right there up on your screen. Actually, that's a 1983 schedule. There wasn't another one created till 89. The amount of harm and injury caused by those three products were so great that every single company making those vaccines went out of business or stopped making them. Now, lots of industries face this crossroad. Lots of industries. Remember when there was asbestos and building materials in the popcorn ceiling? What did they do? Did they leave the asbestos in? Just give them immunity and say, hey, you keep selling that stuff. Buildings are really important. You can keep selling it. No, they forced them to make a better, safer product. How about when gas tanks were exploding to give them immunity? Say, oh, cars are really important. Can't get people to the hospital. We can't. We're just going to give you immunity. No. Make a better gas tank. Go industry by industry. Find me an industry and I'll find your crossroads.

[00:41:59] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

They face at some point in history. Even baby powder. Okay, the thing you all thought were so. Okay. The point is, is that in Congress, in its wisdom, did something different with vaccines. It did not do with any other product. It said to the companies, you know what we're going to do instead of making you sell, excuse me, create a better, safer product. We're just going to make it so nobody can sue you, no matter how many kids you kill or injure. Even if you could have made the product safer. Vaccines are the only product that has that permanent liability. And Congress didn't just give them immunity for OPV, DTP, and MMR, it gave it for any other routine childhood vaccine developed thereafter. Hence, help understand, by the way, why there's so much fight over whether a vaccine is routine or not. On the CDC schedule. But we'll put that aside. Okay. Now, Congress, to its credit, I think, understood that it eliminated the way you assure product safety. It's the economic self-interest of the company. Who here at stock, raise your hand. Who has a retirement account? I don't. Okay. If anybody's raise your hand. All right, everybody pretty much. Okay. Where do you want your stock to go? Up or down. Who wants to go up? Okay, good. Anybody want it to go down? Anybody?

[00:43:40] Male Speaker

Only short salad.

[00:43:42] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. You want it to go up and how does. So what does that do? Who else wants it to go up Wall Street? Does the investors do the CEO does everybody down the chain that a stock options in the company. Everybody has an alignment of interest for the company stock to go up. And that conforms corporate conduct. It drives how they make decisions. It drives how they conduct, for example, clinical trials, how they do post-licensure safety, how they do recalls, you name it. Okay. Now, normally the profit incentive that economic self-interest is a good thing because it drives the company to make a better, safer product and test it before it goes out to market and so forth. Congress recognizing, I hope this is the reason that it eliminated that economic interest, that market incentive. It broke the economic self-interest of pharma companies to assure the safety of its vaccines. Instead, past added a section to that law, the National Childhood Vaccine Injury Act, which I will call the 1986 act okay. Called the mandate for Safer childhood vaccines. That's the entire section of law right there. You see it on your screen. It was codified at 42 U.S.C. 300 8-27. I view this one section of law as basically underpinning all vaccine safety in America, because since the manufacturers don't have an economic self-interest to do it, we got to rely on our federal health authorities to do it.

[00:45:15] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. And this is the provision that mandated that they make the product safer. It has three simple provisions. It basically is what put HHS, the Department of Health and Human Services, in which CDC, FDA, NIH, and so forth are located. It put them in the shoes of the pharmaceutical companies, and it has three simple provisions. The first provision, called the general rule, says the secretary of HHS, currently, Robert F Kennedy, Jr, is is. Responsible for assuring vaccines are safer in every possible domain. You can look at that list another time. It's pretty much anything you can imagine distribution, licensure, you name it, everything. Section B creates a task force for safer childhood vaccines that is supposed to be comprised of the head of NIH, CDC, and FDA, and its sole job is to make recommendations to the Secretary on how to improve vaccine safety. Okay. Simple enough. Right. And the third section is requires that the secretary of HHS, every two years submit a bi annual report to Congress on what HHS has done to make vaccines safer over the prior two years. Again, simple enough. Okay. Let's just quickly go through what it from bottom to top, what's been done in terms of the bi annual reports to Congress. Never been submitted. And that's the easy part, right? Government seems to be great at making reports all the time. I don't know, but this one they've never made.

[00:46:57] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Not once. Federal lawsuits sued them for the reports. They admitted they've never done it. Hopefully that will change under Secretary Kennedy. Then separately, we wanted to see. On behalf of my client ICAN, we wanted to see, well this task force. We want to see all the recommendations. Farm is not going to do it. Hhs should do this. Task force should be making recommendations. Well guess what? After a lawsuit and then more work, legal work, we found out that the task force had submitted only one report ever. To the Secretary of HHS how to improve vaccines. That was in 1998, and then it was disbanded. Apparently, you don't need to make any recommendations there. Safe job was done. Even though most of the vaccines on the schedule, by the way, weren't even there yet. Okay. Um, now, Secretary Kennedy has, as The Hill and others reported, reinstated for the first time since 1998, the Task Force for Safer Childhood Vaccines. And we have provided on behalf of our client ICAN a letter to HHS on all the ways that vaccine safety should be improved. And we've asked this task force to please issue these recommendations to the Secretary to be implemented. And with that backdrop, um and I'm going to give you one more piece of backdrop and then we're going to get into it. What I want to focus today's presentation on is going through some of those recommendations.

[00:48:24] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

We're in DC hoping some folks from the FDA, CDC and so forth might be here. I won't call out. Or maybe there are sounds like there might be. And so I figured what maybe this was an opportunity to go through the recommendations we were making for changes across HHS and all the agencies. I'm going to go through various ones. Of course, you can read the recommendations in detail at the link below. We'll make this presentation public after after the today. Okay. One more piece of backdrop. And then we'll start going agency by agency. And I'm going to give you my recommendations. Take or leave them of how to improve vaccine safety in the United States. But before we do that, I just want to go through the epidemic of childhood disease. The data reflect that in early 1980s, under 10% of kids in America had a chronic health issue. The data reflect that. Currently, we're over 40%. Some data reflect over 50% and often multiple chronic health issues. The Maha report reflects the same data points, and it identifies four areas that it thinks could be responsible for this increase in chronic health issues, food chemicals like PFAs forever chemicals, which fortunately have been declining since the 1980s. Behavior like exercise and overmedicalization. Like maybe, for example, we've gone from that CDC schedule in 1986. That's what a child will receive on or before their first birthday.

[00:50:08] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

To this, what a child would receive following the CDC schedule today on or before their first birthday. That is the difference. And these are just the routine recommended vaccines. There are others that are not. But let me go back one second. The Maha report. What did identify? What are the chronic health issues that have exploded? When you look at the list asthma, ADHD, allergies, atopic issues go down the list. What you will find is virtually every single chronic health issue that has exploded has an etiology in some form of immune system dysregulation. Even things, for example, like ADHD that nobody thinks of as an immune. What's the immune system got to do with the behavioral issue? Well, go look at the actual biological science and you will find that children with ADHD have various immune markers that reflect dysregulation. And that's true basically across the board of almost all the chronic health conditions that have exploded. And our federal health agencies can't tell you why these have exploded. Have they studied this? If you're going to look For what might have caused the chronic health. The immune systems of the children of the United States across all religions, racial groups, demographics, whether they're far up north in Alaska or in Key West. Probably should start with the product you're injecting over and over again from three injections on or before the first year of age in 1986.

[00:52:05] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Cdc schedule to now, as of the court's repeal of the recent changes back to 29 injections on or before the first birthday, including in utero, meaning the mother gets the shot in it. I'm counting a few of those as well. Okay, this just shows you, by the way, this is again, this is 1983. The orange ones are the year on before the first birthday. That's the full schedule. So that includes not only the first year of life, but also up to 18 years of age. And this is what it looks like today. Up to 18 years of age following the CDC schedule. Okay. Um, they tell you they tell you vaccines are a powerful pharma product. They can have systemic effects on your immune system, and we should believe it. And we should also make sure we properly study them. Um, one more piece of backdrop, which is that in 1983, in terms of uptake, just to really give people a sense of, you know, where we were and where we've come in this short period of time. In 1983, the uptake of MMR one dose was 66% in America, 66%. Dtp was 65, OPV was 57. It was basically zero for all the other routine vaccines because they didn't exist. This is the current uptake over 90% now for the MMR, DTP, OPV equivalents and very high for many of the others.

[00:53:39] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. So. There's a lot of material. There's a lot. So just to just encapsulate it. Okay. Before we start getting into, I would say the details, I feel like I've given a lot of detail already, but we've got kind of on the one hand, we have HHS responsible for vaccine safety. That includes all its agencies, because the companies no longer have the financial incentive to do it. Bucket one the other thing we have is an explosion in the vaccine schedule. And then we also have an explosion in chronic health issues that have an etiology in immune system dysregulation and dysfunction. And, and, and, and our federal health authorities still can't explain what's causing it. So with that backdrop. We're going to take a look across the agencies on what they've done to rule out or affirm that vaccines are safe, are not causing this epidemic or chronic health issues. And if they haven't done their jobs, I'm going to suggest ways for them to do their jobs. Okay. I want to start with the impact of eliminating liability. I know I've beaten this point, but now I'm going to put some meat on it, which is that what you see right? There are, according to Money Inc., the four most profitable drugs that Pfizer sells as of 2019 or something like that. It's my it was trying to find a way not to cherry pick drugs trials.

[00:55:27] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

It's the best way I could do it. I found this article that had these, you know, listed these four drugs. Well, you could see this reflects the clinical trial relied upon for each of these four drug products. You could see that the clinical trial that the FDA relied upon to license each of them were multi-year, placebo controlled trials. Why? Well, the reason I will tell you is nothing to do with the FDA has to do with the fact that the pharma company wants to know if the product is safe before it goes to market. Why? Because if it goes to market and causes substantial harm, what would happen? Lose money again? Which way do you want your stock to go? Exactly. So it wants to know. This reflects the clinical trials relied upon to license. These are each vaccines given in the first six months of life three times each. And what you see is the safety review period how long safety was reviewed after injection in each of those clinical trials and what the control was. Who doesn't believe those numbers? Yeah, I, I, I agree, I found it unbelievable. First time I saw it, I said there's no way. Let's go through it. Here's the hep B vaccine. Let's just start with the first one on the list. Okay? This is the package insert for Recombivax HB.

[00:56:53] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

There's only two licensed standalone hep B vaccines Recombivax, HB and Hendrix B. This is the package insert for Recombivax HB, in which federal regulations require it. To summarize, the clinical trial relied upon to license it for the purpose of safety in section 6.1, and it says in three clinical studies. This is the clinical trial relied upon to license this product for children. 434 doses of Recombivax HB five micrograms were administered to 147 healthy infants and children up to ten years of age who were monitored for five days after each dose. First time I read this, I thought, there's no way this can be it. There's no way they licensed this product to be given to millions of babies based on that. No control group, not monitoring safety long enough and not enough kids in it. It's useless. Well, we then foia'd the FDA for the underlying clinical trial reports and use a link right there. Again, you can go look at it and you can look at an underlying clinical trial reports. That's it folks. That is what the FDA relied upon. You could also watch me depose Doctor Stanley Plotkin about this clinical trial. Fun fact when I deposed him, I didn't know he was the principal investigator of this clinical trial. And if you watch the deposition, you see, he, too, was seemed surprised when he looked at it that it was only five days.

[00:58:17] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

This is the product the manufacturer insert for Recombivax HB, correct?

[00:58:22] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[00:58:23] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

When you look at the clinical trials that were done pre-licensure for recombivax HB, how long does it say that safety was monitored after each dose?

[00:58:33] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Uh let's see. Uh. Five days.

[00:58:45] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. Is five days long enough to detect adverse reactions that occur after five days?

[00:58:53] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Uh, no.

[00:58:55] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Is five days long enough to detect an autoimmune issue that arises after five days?

[00:59:00] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Uh, no.

[00:59:00] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Is five days long enough to detect any neurological disorder that arose from the vaccine after five days?

[00:59:07] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

No.

[00:59:07] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

There is no control group. Correct?

[00:59:09] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Uh, it does not mention any control group? No.

[00:59:12] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

No.

[00:59:13] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

To me, that reflects how safety is really an afterthought when it comes to these things. Um, you can also look at the FDA petition that we filed to the FDA and said, look safe and effective. There's probably some gray in that. But no control. Five days of monitoring, 147 kids. Come on. That's got to be in the black. This is not sufficient. Oh, by the way, the only other hep B vaccine, Hendrix B, was licensed based on a clinical trial with four days of safety monitoring in its clinical trial. Let's do one other two other vaccines quickly. And then we're going to wrap up on the FDA and move on to the CDC Prevnar seven. Again, given a two, four, and six months of age to babies was licensed. There was no Prevnar vaccine. There was no pneumococcal vaccine in the US when this was licensed, meaning there should have been a placebo controlled trial. There was no ethical reason not to do one. Instead, the clinical trial relied upon to license Prevnar seven. Pcv7 had as the control an investigational meningococcal Group C conjugate vaccine, meaning. Another experimental vaccine. I couldn't make that up. Even if you asked me to. I'd have never dreamed to say that no matter how come up with the most nefarious thing ever about vaccines, they licensed it based on another. I would never think of that. I would never say five days either. Sounds crazy. But there it is. By the way, if you might want to know what the FDA thinks about it, there's a whole Jama article with like a whole slew of FDA scientists who literally say, prior to licensure, the control group in the main study received another experimental vaccine rather than a placebo, which they go on to lament and say, well, that could mask serious adverse events.

[01:01:04] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

They say it. The article links right there. You can go read it in Jama yourself. Well, here's where it gets worse. Pcv7 was then used as a control to license Pcv13 Prevnar 13. And in that clinical trial where they review safety for six months in babies who are primarily healthy. They found that serious adverse events, which means something very serious like death, hospitalization, permanent disability reported following vaccination in infants and toddlers, occurred in 8.2% among Prevnar 13 recipients and 7.2% among recipients. In my opinion, that should have made heads at the FDA figuratively explode with concern because the baseline. What was the baseline of safety Prevnar seven was that proved to be safe? No. Here you have these really high serious adverse events. But because they were similar for regulatory purposes, it was deemed safe. In the real world, not so much. Then Prevnar 13, which uses the control to license Prevnar 15 and what was found in that clinical trial. Serious adverse events up to six months following vaccination with the four dose series were reported by 9.6% of the Pcv15 Vaxneuvance recipients and by 8.9% of the Pcv13 Prevnar 13 recipients.

[01:02:34] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

But what did the FDA and the manufacturer say? They said there were no notable parents or numerical imbalances between vaccinations group, hence safe for the purposes of licensure. I would argue and submit to you not safe. Not proven safe for the purposes of the real world, because it all comes down to Prevnar seven. It's basically a little pyramid scheme of safety, bottom of which your baseline has never been shown to be safe. Last one Dtap vaccine. There are two standalone Dtap vaccines. They were both licensed in a clinical trial where DTP was used as the control. Dtp was never been licensed based on a placebo controlled trial, and later studies of DTP have found that those who get that product die at multiple times the rate as those who do not. While they may have less deaths from diphtheria, tetanus and pertussis, they have more overall mortality from things never expected from DTP. This, on your screen, is a seminal study done when they introduced DTP vaccine in Guinea-Bissau, and what they found was that children that only got DTP versus those that got no vaccines died at ten times the rate statistically significant. And this is there was another study in 2018 with a similar finding. And there's a series of other studies that all make similar finding. We asked Unicef about this. We said, hey, and by the way, this is the most common vaccine in the world, DTP. We said, how could you distribute a product where the weight of the science shows that you're killing more kids than you're saving? Unicef, uh, sent us back a review from years prior to this study that.

[01:04:24] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Looked at the body of evidence, found most of the studies did show a deleterious effect, but said, yeah, but, you know, you don't have a study that's not randomized where OPV wasn't also given. And that wasn't when there was already the vaccine in play for a long time. Well, it was ironic that the Unicef wrote us back and said that, um, and pointed to that 2014 review with those three arguments, because this 2017 study was designed to address those three limitations. I think I just went very fast, but it was, uh, vaccines were given based on birth days. So naturally randomized, they had a group that didn't get OPV and it was before there was any use of DTP. So not in a post-elimination environment. And in those optimal conditions They found ten times mortality, ten times the rate of death amongst the DTP vaccinated kids. So all available evidence reflects the that DTP is killing more kids than it saved. And because DTP is a licensed product, you can't do a placebo controlled trial to tell you it's unethical. Meaning this is the best study the world will likely ever have ever. On whether DTP vaccine is saving more kids than it kills. But yet DTP was the control for dtap vaccines used here. Okay, I've given a few examples before I make my bold claim, because if I just meant that a bold claim, I'm sure you know how many reporters are here.

[01:05:58] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

They're going to fact check and say, oh, what I'm about to say isn't true, but I assure you, it is categorically true. What I'm about to say, and not because I'm saying it, but because it's what the FDA documents specifically reflect. And if you go to chapter ten of vaccines, Amen, you can pull up the FDA document for every single clinical trial. You ready for it? Okay, here it goes. Not a single routine injected childhood vaccine on the CDC schedule has ever been licensed based on a placebo controlled trial. Yeah. Let me go a step further. And when another vaccine was used as a control, that vaccine was never licensed based on a placebo controlled trial. That is a categorical fact. And for any reporters out there, instead of calling, pull off it when you run out of here. Okay. Why don't you actually go to chapter ten and look at the underlying FDA licensure documents that we spent ten years clawing out of FDA's hands for yourselves. But you're not going to probably do that anyway. Um, I've implored many reporters to do that. Never do it. This chart reflects every single currently licensed, routine injected child vaccine between birth and six months. It shows the control that was used in the clinical trial to license that product. And when another vaccine was used, what was the control to license that vaccine down the chain? At the end of it, no placebo.

[01:07:44] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Remember, we just did Prevnar 13 right there. Then it went to Prevnar seven, remember? And then it went to another investigational vaccine. We just did hep B. Neither had a control in the licensure for children. Dtap went to DTP and so forth. The same is also true of all of the routine injected childhood vaccines given between seven months of age and 18 years of age. Well, I might have to qualify that because with the judge's recent decision reinstating the old vaccine schedule Covid vaccine for 12 to 15 year olds, Pfizer did have a placebo control group. So Washington Post, she got one. Okay. All right. Again, it's all in chapter ten. It's all in the FDA documents. Now, even if these clinical trials had a proper control group, a placebo, meaning something inert. They were still virtually useless for assessing safety because none of them reviewed safety for long enough, typically up to six months. These are all the vaccines given in the first six months of life routine injectable vaccines. And you could see the solicited reaction, how long they gathered solicited reactions and how long they gathered unsolicited reactions in those clinical trials. When you're injecting a baby to know whether they have neurodevelopmental disorders, immunological disorders, dysautonomia, you go down the list of the type of things we normally see vaccine injuries causing at our firm, the tens of thousands of folks who contacted us.

[01:09:27] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

You're not going to know that for a few years after vaccination. These trials are patently insufficient. So again, even if they were properly controlled, they don't review safety long enough. And then on top of that, even if they're properly controlled and review safety long enough, they're almost always underpowered. For example, 147 kids. Even if you viewed safety for five years with a placebo control, if you've only got 147 kids, that's not properly powered to detect virtually anything. It's useless. Okay, I'm going to give you an example of a Nonroutine vaccine where the company had the financial incentive. Oh, boy. Running out of time. Okay. Uh. Dengue vaccine. Dengue vaccine is not routine. You can hold the manufacturer liable. They did a clinical trial in which they had six years, basically for death against a placebo control for 30,000 kids. You know what they found a few years into the trial, years into the trial, that children under six had an increased rate of severe harm and death. So it is not licensed or recommended for children under six and for children over six. What they found is that they never had dengue. They again had an increased rate of death and severe disease. So it is only licensed and recommended for children who have had dengue who are over six years of age. What would have happened if they only reviewed safety for even six months? With no placebo control group? Would they have found this? Come on, let's not speculate.

[01:11:00] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

But no, they wouldn't have. With that said, uh, this is the type of clinical trial that you would want. This is the type of clinical trial I believe happens when there's a financial incentive to know if the product is safe. It's just the way economics work. And I will tell you, by the way, had this product gone through one of these safety reviews, it would probably be on the schedule. It might be a routine injector child vaccine, and you'd be told it's safe and effective because how would you find out? How would you know? You can't do a placebo controlled trial after it's license. They tell you that that's unethical. All right. Speaking of ethics, here's what the British Medical Journal says about these trials. When they're not properly done, it says, quote, in some trials, placebos were omitted on ethical grounds. That is illogical because studies destined to produce unreliable results should themselves be considered unethical. And that is true of every single clinical trial relied upon to license a routine injected childhood vaccine. They're all, by this definition, unethical. So here are the reforms I recommend for the FDA. One. Absent public contrition to remove anyone in FDA's Office of Vaccine Research and review the. Over involved in licensing any routine injected vaccine. After you have unleashed these products on millions of children and you're in this department and you've been part of that.

[01:12:34] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Unless you can publicly admit that you made a mistake, you're going to be too conflicted to properly do your job going forward, respectfully. Two. Notify practitioners the FDA should be sending notice to every single practitioner, pediatrician, family doctor, ob gyn of the details of each trial relied upon to license each routine injected child vaccine. They should know. They should understand. They could just pull up the package insert. But I've deposed endless pediatricians. They don't know. Even after, you know, even after administering, they don't administer it directly, but they have their nurses do it. Thousands of these things and issue minimum standards for licensure of vaccines. And I mean real licensure standards like what the controls should be, how long safety should be reviewed, proper blinding, so on and so forth. That doesn't exist for vaccines, certainly not for child vaccines. There was some guidance put out actually for the EUA of Covid vaccines, but that's about it. And then there's a whole bunch of other recommendations. And the task force letter below. So these would be my recommendations for the FDA, um, CDC reforms. I'm going to go pretty quick at this point because we're pretty much out of time. So you might say, well, after licensure, they're thoroughly and rigorously tested for safety. While the CDC and Hrsa, the agency responsible for administering the Vaccine Injury Compensation program. So if you're injured by a vaccine, you can bring a claim for an injury. You just don't see the manufacturer.

[01:14:10] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

You sue the secretary of HHS. You see the very same people who claim the vaccine is safe. I'm sure that doesn't conflict HHS from doing safety studies that would show vaccines cause harm. In any event, Hrsa and CDC paid the IOM as try as IOM could to please CDC and Hrsa to find that these vaccines do not cause what they said were are the 158 most commonly claimed injuries from vaccines. That is what Hrsa and CDC asked the IOM to review. The IOM said, well, after we surveyed all the existing medical literature, five of them, we can reject that the vaccine is causally related. For 16. The evidence favors a causal relationship, but for 134 of the most commonly claimed Claims serious injuries from vaccines, per the CDC and Hrsa. Sorry folks, you haven't done your job. You didn't do your job. Studies don't exist for us to reach a conclusion. This alone reflects CDC's not doing what it needs to do in terms of vaccine safety. You don't need more than this. This gets even worse when you look at the studies cumulative from 1991 to 2021. I'll skip over that. And then I'm going to use autism. And I don't want to debate autism, but as the litmus test, it is the issue. They say they have most thoroughly and completely studied more than any other vaccine injury. So if they haven't done that well, that probably reflects how well they've studied all the other injuries.

[01:15:38] Dr. Peter Hotez, Dean for the National School of Tropical Medicine, Baylor College of Medicine

Vaccines don't cause autism. The science is clear.

[01:15:42] Rear ADM. Anne Schuchat, MD National Center for Immunization & Respiratory Diseases-Director

Vaccines don't cause autism.

[01:15:44] Dr. Jennifer Caudle, Instructor of Medicine, John Hopkins University School of Medicine

Vaccines do not cause autism.

[01:15:46] Dr. Aaron Carroll, Professor of Pediatrics, Indiana University of School of Medicine

I do not deny in any way that we need to do more about autism, but it has nothing to do with vaccines.

[01:15:51] Male Speaker

We have thoroughly debunked any association between autism and these vaccines.

[01:15:56] Male News Correspondent

It is nearly consensus in the scientific community that there is no link there.

[01:16:00] Paul Offit, MD, Director of the Vaccine Education Center, The Children's Hospital of Philadelphia

To deny a mountain of scientific evidence, which has already taught us that the combination of measles, mumps, rubella or MMR vaccine doesn't cause autism. Thimerosal and ethyl mercury containing preservative that wasn't a number of vaccines doesn't cause autism, and that most recently that too many vaccines given too soon, if you will, doesn't also cause autism. So we know that this schedule is safe.

[01:16:20] Male News Correspondent

Are there peer reviewed scientific reports that that indicate a link between.

[01:16:26] Male Speaker

No.

[01:16:26] Male News Correspondent

Between vaccines and autism?

[01:16:29] Male Speaker

No. And not only is there not peer reviewed work, this is probably the most studied public health issue involving children.

[01:16:36] Male Speaker

Vaccines are really the one thing we have looked at as causing autism.

[01:16:40] Female Speaker

The Institutes of Medicine, the centers for Disease Control have repeatedly investigated this. Vaccines do not cause autism,

[01:16:50] Scott Gottlieb, MD, Former United States Commissioner of Food and Drugs, Member of Pfizer's Board of Directors

We don't need more research. At some point, enough is enough. It's fine to continue to collect data, but at some point you have to take no for an answer.

[01:16:57] Dr. Sanjay Gupta, Chief Medical Correspondence for CNN

If we're not sure the scientific community what causes autism, but we know that vaccines do not.

[01:17:04] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay, so vaccines don't cause autism. And despite telling parents that vaccines cause autism, when surveyed, 40 to 70% of parents with a child who's autistic still point to vaccines as the cause of their child's autism, and what vaccines do they point to? They point to the vaccines given in the first six months of life. These five injected vaccines given three times each, as well as one vaccine given after the first six months of life, no earlier than typically one age the MMR vaccine. So you would assume, since CDC says vaccines don't cause autism, they have the studies to show that these vaccines. Thank you. Don't cause autism. Just just so you understand, the controversy around vaccines started with pertussis vaccine, not MMR vaccine. This is the 1986 act, the National Childhood Vaccine Injury Act, and it asked it directed the secretary of HHS to look at 11 presumably commonly claimed injuries from pertussis vaccine. What's one of the ones that asked HHS to study autism? That's in 1986. So it did that HHS commissioned the IOM and IOM in 1991, said, sorry, I can't tell you whether pertussis vaccine does or doesn't cause autism because you haven't done any studies, zero studies.

[01:18:23] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Fast forward to 2012, when the CDC and Hrsa again commissioned the IOM to again look at the entire body of literature, whether pertussis vaccine causes autism. And what did the IOM conclude? Again, the same thing the IOM said, sorry, we could not find any study zero to show to support that vaccine. Pertussis vaccine doesn't cause autism. They only found one study that related to pertussis vaccine and autism. Geier and Geier and that did find an association. So the only study the IOM could find with regards to pertussis vaccine and autism found an association between pertussis vaccine autism. But what did the IOM do? It threw it out. Why? Because it lacked an unvaccinated comparison population. It's funny how that happens when the when the study shows the vaccine, they want to say it's safe. They never throw it out for that reason. Anyway, as the IOM said, the evidence is inadequate to accept or reject a causal relationship between diphtheria, tetanus, acellular pertussis containing vaccines and autism. This is me deposing Doctor Stanley Plotkin as the world's leading vaccinologist specifically about that finding. This is an excerpt from the IOM report. Right.

[01:19:36] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:19:36] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. And this is where the IOM discusses the evidence with regard to whether Dtap or Tdap cause autism. Correct?

[01:19:47] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Correct.

[01:19:48] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Can you read the causality conclusion with regard to whether Dtap and Tdap cause autism?

[01:19:54] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

The evidence is inadequate to accept or reject a causal relationship between diphtheria toxoid, tetanus toxoid or acellular pertussis containing vaccine and autism.

[01:20:06] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

If you don't know whether dtap or Tdap cause autism. Shouldn't you wait until you do know? Until you have the science to support it? To then say that vaccines do not cause autism?

[01:20:25] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Do I wait? No, I do not wait because I have to take into account the health of the child.

[01:20:34] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. And so for that reason, you're okay with telling the parent that Dtap Tdap does not cause autism even though. The science isn't there yet to support that claim.

[01:20:51] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Absolutely.

[01:20:53] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Safe and effective. Okay. But we didn't stop there. On behalf of ICAN, we actually sent Freedom of Information Act requests to the CDC. We said, alright, maybe the IOM can't find it. Maybe the world's leading Vaccinologist doesn't have them, but maybe the CDC has the studies. After all, it's their claim on their website that the vaccines don't cause autism. And we said CDC give us the studies that reflect that DTaP does not cause autism. Hep B Prevnar Hib. Each of the vaccines given three times each in the first six months of life. They didn't give us a single study. We sued them in federal court. And days before the initial hearing, we got a list of 20 studies from them. Here's the thing about that list of 20 studies. I called the DOJ attorney and I said, hey, um, I wanted to say I can read, but I said, we reviewed your list, and this lawsuit's about the vaccines given in the first six months of life. The 20 studies, it's actually 16 studies and four reviews that you provided. 19 of them have nothing to do with those vaccines. They're all about MMR vaccine or an ingredient that's not in any of these products. And the 20th one is the 2012 IOM report that we just reviewed that looked for all studies relating pertussis, vaccine and autism, and only found one that found an association.

[01:22:16] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

But they threw it out because there was no unvaccinated control group. I said, are you sure you want to settle based on these 20 studies? Doj came back, said, yes, this is a court signed. This is a settlement agreement signed by me on behalf of my client by the DOJ, on behalf of the CDC, entered as an order of a federal court in the Southern District of New York, by the way, not in Texas or anywhere. Southern District of New York. Okay. If that's meaningful for any of the lawyers out there. So there it is. And that is why I call my book Vaccines, Amen. There's what the public health authorities tell you, and then there's what they have to admit when their back's against the wall in a federal lawsuit. What they have to admit when they're in a deposition, quite different than what you hear out of the public health apparatus. This is me deposing in a lawsuit specifically about vaccines and autism. Doctor Kathryn Edwards, one of the four editors of the medical textbook vaccines about Vaccines and autism. And in this clip, she again says she's got no studies for any of those vaccines that support. They do not cause autism.

[01:23:22] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

In the expert disclosures for this case, it asserts that, among other things, you will testify that, quote, the issue of whether vaccines cause autism has been thoroughly researched and rejected, end quote. It's your testimony that MMR vaccine cannot cause autism.

[01:23:39] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

That's correct.

[01:23:40] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

It's your testimony that hep B vaccine cannot cause autism.

[01:23:43] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

That's correct.

[01:23:43] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

It's your testimony that IPOL cannot cause autism.

[01:23:46] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

Yes.

[01:23:47] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

It's your testimony that Hib vaccine cannot cause autism.

[01:23:50] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

Yes.

[01:23:51] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Your testimony that varicella vaccine cannot cause autism.

[01:23:54] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

Yes.

[01:23:54] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

It's your testimony that Prevnar vaccine cannot cause autism.

[01:23:57] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

Yes.

[01:23:58] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

And it's your testimony that Dtap vaccine cannot cause autism?

[01:24:01] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

Yes.

[01:24:02] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

And do you have a study that supports that Dtap doesn't cause autism?

[01:24:06] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

I have I do not have a study that that dtap causes autism. So I don't have either.

[01:24:13] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Do you have any study one way or another of whether Ipol causes autism?

[01:24:22] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

I no, I do not, sir.

[01:24:23] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Do you have any study one way or another of whether Engerix-B causes autism?

[01:24:30] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

I do not have any evidence that it causes autism, nor that it does not.

[01:24:36] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

And what about Hib titers? Vaccine. Any evidence one way or another, of whether it causes autism. And what about Prevnar vaccine? Any evidence one way or another? And how about varicella vaccine? Let me just finish. Are there any studies, one way or another, that support whether it does or doesn't cause autism.

[01:24:57] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

As part of MMR? But but not as varicella by itself. No, sir. No studies that say it does or no studies that say it doesn't.

[01:25:06] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Right. Um, now there have been studies that have found an association between hepatitis B vaccine and autism. Correct.

[01:25:19] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

Um, not studies that I feel are credible.

[01:25:23] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. Which study? Which study do you are you referring to when you say that?

[01:25:28] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

Well, why don't you show me the study and then I'll see whether I agree with it.

[01:25:33] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

According to your profile, you have done most of the trials relied upon to license many of the vaccines. Correct? On the market?

[01:25:40] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

Yes, sir.

[01:25:41] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay, so you're highly experienced in conducting clinical trials, correct?

[01:25:46] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

I'm highly experienced conducting clinical trials.

[01:25:51] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

And you're familiar with many of the clinical trials that relied upon to license many of the vaccines currently on the market. Correct.

[01:25:58] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

I am.

[01:25:59] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. In your opinion, did the clinical trials relied upon to license the vaccines that you received, many of which are still on the market today? Were they designed to rule out that the vaccine. Causes autism?

[01:26:27] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

No. You badgered me into answering the question the way you want me to, but I think that, um, that that I that's probably the answer.

[01:26:36] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Is it? Is that your accurate and truthful testimony?

[01:26:44] Kathryn Edwards, World Leading Vaccinologist, "The Godmother of Vaccines"

Yes.

[01:26:45] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Broadening out from autism. Because again, I wasn't trying to pick on autism per se. I was using it as a litmus test. Autism is the issue. They say they have most thoroughly and completely studied with mountains and mountains of studies. So high, so wide, so vast. There isn't even a number big enough to count them. Remember, pi just went on forever. They don't have those studies. You only got that when their back was against the wall. If that is the state of the science for the issue, they claim to have most thoroughly studies. Can you imagine what the state of the vaccine science is for the over 100 serious injuries that parents claim vaccines cause, often neurological or immune mediated neurological disorders and immune related issues, devastating injuries that we get calls about all the time at our firm and represent families for. Um, I'm just going to speed through the rest of the CDC stuff given time constraints, but these are the four safety systems that the CDC has. They could be useful to assessing safety, but that's not how they're used. Um, none of them really compare against unvaccinated. It's like most of these systems are basically just comparing smokers with smokers, asbestos exposure with asbestos exposure.

[01:28:20] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

They don't want to actually compare exposed to unexposed, which is the way you would do rudimentary science. You can read all about that in chapter 11 of my book. Um, the studies that do exist that compare children that have gotten vaccines with children that have gotten no vaccines, so zero unexposed to one or more vaccines are. Some of them are small. They have constraints. They are not funded by the government. So they have funding limitations and they're almost all retrospective. So they're all subject to confounders, but they're consistent. This is a few of them. There's about a dozen of them. I detail many of them in my book. And what you'll find is that these studies all find that children who have been vaccinated all have multiple rates of the chronic health issues that have exploded in the last 40 years as compared to kids that have gotten no vaccines. So. I would respectfully submit, I don't know, respectfully, but I'll submit that CDC has not done its job when it comes to vaccine safety. And then.

[01:29:30] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Uh. Um, uh, then then there's the other side of the coin. What are the benefits? Because that's what you'll often hear. But the benefits are so vast, they're so incredible that we can ignore these kids that we've injured and killed. They're collateral damage. It's like, almost like they're, you know, they're, uh, you know, uh, I'll leave it at that. This is an MMW report that I have cited back to me in every lawsuit I do about vaccines. And what it claims is that this is the most bold claim. Excuse me. That's made about childhood vaccines in America. Nobody makes as bold of a claim as this. So I'm just going to go to the most extreme claim. And what this report claims is that between 1994 and 2023, routine childhood vaccination will have prevented 508 million cases of illness, 32 million hospitalizations and 1.1 approximately deaths. Whew. That's a lot of life saved. If that's true. And so, you know, we should just ignore the whole safety issue. But is it true? Is it possible that in the same way the CDC exaggerated how much study and work gets done to disprove vaccines cause autism? It similarly has exaggerated these numbers. Let's take a look. First, this review. Ignores all confounders. I'll read you a quote from it. Factors other than immunization such as hygiene, clean water, sanitation, antibiotics, acute care go down the list. Anything you want might have contributed to lower disease risk in recent decades, and reductions resulting from these contributions have not been incorporated into the model.

[01:31:33] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

It's laughable science. You don't ignore all the confounders. You're supposed to do the opposite. You're supposed to try and account for all confounders. Okay. It's incredible. The reason they can do this nonsense is because this doesn't go through peer review. It goes to the CDC's internal clearance process. If anybody from the CDC. If you doubt that, go to your own website or read my book where I quote the process to get something at MW. It has to align with the CDC's policy. And if it doesn't, it doesn't end up in the Mmwr. Talk about selection bias. That's why it has no confidence intervals, because it's junk science and the data is unreliable. Let's go through a few of the diseases. So let's put some meat on the bones of all of those. Diphtheria. This article claims that between 1994 and 2023, 25,000 lives were saved in the United States from diphtheria. That amounts to 750,000 of the 1.1 million lives saved. So virtually all of that claim in diphtheria, something like 70%, right? Here's the problem with that claim. It's nonsense. And here's why. Uh, diphtheria vaccine only started being routinely used. Um, really in 1949. It's the first year that DTP vaccine was licensed. And in 1948, there were 634 deaths of diphtheria in the United States.

[01:33:06] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

By the way, there was also the same number of births around 3.67 million that year. Now, so it's not even like we have different cohorts of children. It's about the same size. But yet this article is claiming that 1948, when acute care, when when we had parts of this country still like a like developing countries, there would actually be 25,000 deaths, not 634 deaths, and diphtheria mortality declined by over 97% between 1900 and 1940. This chart on the right was issued by the United States Public Health Service report. It's on the CDC website in 1960. And what you find is that between 1900 and 1926, when the first diphtheria vaccine ever licensed came out, there was an over 80% decline in mortality. So no question, nothing to do with diphtheria. And then from 1926 to 19 40s, what the studies reflect all cited in my book. You can read them that the parts of the country, because it wasn't widely used that used diphtheria vaccine versus those that didn't had the same reductions in mortality. Hence, vaccine didn't have do with it until you get to late 1940s. So at best, you're starting there. But somehow they are claiming 25000 deaths from diphtheria averted in the US versus a few hundred. You know, it's kind of like diphtheria. It's like a lyophilized bacteria like diphtheria, scarlet fever. And they tried desperately to create a scarlet fever vaccine but never were able to.

[01:34:39] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

I submit to you, I speculate, I'm speculating now that had they developed scarlet fever vaccine, you'd be listening to public relations campaigns telling you that scarlet fever is going to kill everybody in America. Everybody's got to get scarlet fever vaccine. You can't go to school without a scarlet fever vaccine. And why do you want to be a murderer by not taking it? Oh, and 25,000 people a year would die from scarlet fever without the vaccine. Hepatitis B. This article claims there are 3000 lives saved from 1994 to 2023, which amounts to 90,000 to 1.1 million. Even though in 1980, before there was any hep B vaccine in America. Zero. Nada. There were only 294 deaths from hepatitis B. I don't know how they. I don't know how he does that math. And then there's measles, where again, the report is claiming 2800 lives saved a year in the US for measles. Measles vaccine was first introduced in 1963. The mortality from measles had declined by over 98% between 1900 and 1963. There were about 4.2 million births per year in the years leading up to that, there were about 3.8 million births. Today, I have no idea how one could possibly claim 2800 lives saved, when back then, only around 400 lives were lost to measles a year, at a time when parts of this country were still like a developing nation. It ignores epidemiology, statistics, data, fact, reason, logic.

[01:36:09] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

And I go through it in my book in detail. But we're out of time for me to do that here on the stage, so I'm going to keep going. Um, also, I'm not going to review this, but vaccine, uh, eliminating measles and Um mumps, rubella and chickenpox. These furball childhood infections. Um the studies reflect that those that have had measles, mumps, chickenpox, rubella have far less mortality from cardiovascular and cancers. And if that data is true and it's consistent, we are probably well upside down our public health benefit from these products. There might be a reason that unlike other pathogens that have come and gone through the ages, these did not, but at a time. So you'll have to either go to ICAN website or read my book. The benefits are exaggerated. Just. This is a list of each of the vaccines that are routine injected. Almost all of them. And you could see for yourself the number of deaths year before. Every death is a tragedy. But if you really want to know the effect that vaccines have, what you've got to do is look at the mortality trend line before introduction of the vaccine and then after introduction of the vaccine. If it's not accelerating, why are you crediting the vaccine. But not only do they not. Not only do they credit any reduction after introduction, they credit all of the decline from 1900 on as well.

[01:37:28] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

It's incredible. I don't know how vaccines do that. They're magic. Okay, so here are the reforms that I suggest for the CDC. Again, absent public contrition, remove anyone in CDC involved in vaccine safety, misleading reports or promotion of vaccines removed from the schedule. All improperly licensed vaccines make remaining vaccines shared clinical decision making. To be clear, before you report that I want to eliminate vaccines, I said remove them from the schedule. I did not say not license them. Okay? Anybody should be able to still get a vaccine. It's America that's freedom. Should be able to take risks you want, but the government shouldn't be promoting them like a pom pom cheerleader without proper evidence. Bring. Bring bring the Vaccine Safety Datalink back in house and make de-identified data public. That's the. A database of over 10 million Americans health information along with their vaccination records. It used to be housed at the CDC. The CDC didn't like that because people could get access to it and actually do real studies. In 2001, they moved it out of the CDC so that you can't get access to it. That should be reversed. And they should retract every MMW article like the one we just reviewed, where de-identified data is not publicly not made public within 60 days, including if they don't have data like that article. Um, and then there's a whole host of other recommendations.

[01:38:48] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Moving on to Hrsa. Hrsa is the agency that's responsible for vaccine injury compensation program, as well as the Cicp that's for those injured by the Covid vaccine. We have submitted letters to Secretary Kennedy for both of those to amend the vaccine injury table on both to bring them in conformity with federal law for the VICP, the statute says anything associated with the vaccine should be on the vaccine injury table. If it's not on that table. Good luck getting compensation. It's almost impossible. And so getting it on the table is really critical to get even a modicum of compensation for those injured by these products. We hope that the Secretary and HHS will act on these petitions and update those tables. If not. Um, we do intend to bring a lawsuit, certainly on the VCP one in terms of NIH reforms. Pharma has plenty of money. We, the people do not need to be subsidizing the development of products for pharma. Nih should be solely focused. On the billions of dollars of our taxpayer money to only be invested in root causes, non-pharma interventions, and replication of prior studies. Pharma can fund its own research. We don't need to be subsidizing it. They should prohibit involvement in vaccine development. We should need to leave that to industry. For example, NIH should not have patents on the HPV vaccine, Gardasil. That creates incredible conflicts. And you can see the task force recommendation for more recommendations in terms of CMS, which administers Medicare and Medicaid.

[01:40:17] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

My recommendation would be that there should be no funding for or related to vaccines unless each state respects First Amendment. That means religious freedom as well. Requires all hospitals and clinics to automate various reporting. They can track every vaccine. They have systems to track the movement of every vaccine from warehouse, you name it. But the one thing they can't automate is the reporting of vaccine injuries. Come on, it's already been created. They just don't want to implement it and then make public all easily de-identified health data. In terms of, by the way, people are like, why would somebody have a religious objection to vaccines? Well, let me tell you, each dose of MMR and varicella vaccine has literally billions of pieces of human DNA and cellular debris from the cell line of aborted fetus. Again, to all the reporters out there, please look at the links. Okay. Don't call Paul H. Read it. It's right there. The evidence right there. Understand? Viruses need to be grown in a cellular medium. And some of the viruses using vaccines are grown on the cultured cell line of an aborted fetus. And you can't just separate the virus from the cellular medium. That's why it ends up in the vial in your work related to vaccines. How many fetuses have been part of that work?

[01:41:40] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

My own personal work two.

[01:41:42] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

I'm going to hand you what's been marked plaintiff's exhibit 41. Okay. Are you listed as an author on this article?

[01:41:49] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:41:50] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

How many fetuses were used in the study described in this article?

[01:41:55] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Quite a few.

[01:41:56] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

This study involved 74 fetuses, correct?

[01:42:00] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

I don't remember exactly how many.

[01:42:03] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Turn to page 12 of the study.

[01:42:05] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yeah. 76.

[01:42:06] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

76. And these fetuses With all three months or older when aborted, correct?

[01:42:14] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:42:15] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. And these were all normally developed fetuses, correct?

[01:42:18] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:42:19] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Um, some of the pieces of the fetuses were pituitary gland that were that were chopped up into pieces to. Okay. Included the lung of the fetuses.

[01:42:31] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:42:32] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. Included the skin.

[01:42:34] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:42:34] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Kidney.

[01:42:35] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:42:36] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Spleen.

[01:42:37] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:42:37] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Heart.

[01:42:38] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:42:39] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Do you take issue with religious beliefs?

[01:42:41] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:42:42] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. Uh, you said that, quote, vaccination is always under attack by religious zealots who believe that the will of God includes death and disease.

[01:42:50] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:42:51] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

You stand by that statement.

[01:42:52] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

I absolutely do.

[01:42:53] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. Are you an atheist?

[01:42:54] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Yes.

[01:42:55] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. Do you accept that some people hold religious beliefs that are inherently unprovable?

[01:43:01] Stanley Plotkin, M.D. World's Leading Authority on Vaccines

Oh, yes, I'm sure they do.

[01:43:02] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Okay. In terms of HHS wide reforms. One is that I would very much like it that if you want to be a public servant, be a public servant, which means a commitment to never work in a related industry after you leave your job, that avoids. Hhs should be making available to the public all available health data and de-identified form. Of course, we should de-identify protect everybody's privacy, but it should be made available. There's no reason not to do it. That's what transparency is all about. We should retract all studies where such data is not made public because it violates basic scientific method. Require all study protocols to be posted prior to funding. I can't tell you how many times in our FOIA requests and digging down, we find changes in the study protocol as it progresses, but it's all behind closed doors. Design a study, post it, implement it. Publish the results no matter what they show. That's science. Foia should be properly funded and timely produced. Documents and lift the 1986 Act and Prep Act immunity for Prep Act. They're going to kill me for going late for Prep Act. Secretary Kennedy can do that with a stroke of a pen tonight, but I don't think the white House will let him.

[01:44:30] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Um, and then in terms I can say that I'm not in government. Uh, and then, but I'm, I'm speculating. I mean, I know of no other reason. I, you know, I can't I can't imagine Bobby wouldn't do it left to his own accord. And for the 86 act, if it's not a routinely recommended vaccine, you again could remove it from the vaccine injury table, and then the manufacturers could finally be held accountable like every other product. But that too. But as a federal judge said, oh, that's not good and reversed, making them non-routine. The five of the vaccines, as you all know, we need to care about everybody. We should care about kids who are going to be hurt by infectious disease. But we also need to care about children who can be harmed by these products. Every child is worthy of being cared about, and we need to. And let me tell you something else. Thank you. Let me tell you something else. Look, if it's the abandoning, there's a reason that people have an issue with vaccines, not because they just woke up one day and decided they just wanted for fun to take a position that might get them called an anti-vaxxer, a quack, anti-science.

[01:45:46] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Get their kids kicked out of school, get them thrown out of their jobs, have them turn against the social workers, have their kids excluded from playdates. Who does that? I don't know. Maybe a few people, I don't know, but most people don't. Not not not not not the tens of thousands of families have contacted our firm. So normal everyday Americans who did what they were supposed to They got these products. You know who doesn't call a firm about vaccine injuries? The so-called anti-vaxxers. You know why? Who knows why they don't get vaccines anyway? When you abandon those people who trusted the system, that's what breeds distrust. That's what actually forms the core of the heart of a lot of these groups out there that people talk about, you know, these anti-vax groups, they're often just the families of children injured by these products who have been gaslit and abandoned, those who don't vaccinate less. So in some respects, put the safety back on the industry by lifting immunity, depolarized vaccines and depoliticize vaccines. I agree we need to get vaccines out of politics. It should be purely medical, and the only way to do that and mandates by mandating a vaccine, you make it political by using the argument by.

[01:47:08] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

Thank you. By using the argument that a vaccine is safe and effective to take away somebody's civil individual rights. You made the safety and efficacy of that product a legal and a political issue. Everybody out there, you're not going to report that. I know, but that's the truth. That's why statins are not a quote unquote, you know, don't have the political and legal overlays because not mandated, even though, by the way, you know, heart disease kills 800,000 Americans a year. And so, you know, if you're going to stop clogging the medical system, you know, save the hospitals, maybe you should mandate exercise, you should mandate statins, you should it's intuitively destructive to individual liberty intuitively, but somehow you label it a vaccine. Well, let's take the rights away. Get them if you want. That's freedom. But don't take away anybody's right if they don't want them. And chronic disease and most vaccines. I didn't go through it in this presentation. I won't because I don't have time. Don't stop transmission. Chapter nine. And chronic disease. You want to do that? You got to address vaccines. That's the truth. Because if you do, if you look at the weight of the current available data on that basis, and I took the studies that compared kids with that are vaccinated with no vaccines, meaning exposed to unexposed, not not kids who got smoked 12 packs a day with 20 packs a day, kids with no vast cigarettes to one or more cigarettes.

[01:48:36] Aaron Siri, ESQ. Lead Counsel, ICAN Legal Team

And you looked at those differences. The weight of that science reflects, if you want to end the chronic disease epidemic, the weight of that science, okay, until there's better science, maybe it'll show that's wrong, reflects that. You better address vaccines if you're going to truly achieve the objectives that Maha has. I'll end with this because I am a lawyer. And so this is my pin tweet. I show it to you because I believe it is that mandates are the tool of bullies, criminals and dictators. If a patient refuses a medical product after being conveyed its benefits and risks, then that is called informed consent. They were informed and did not consent. Mandating over this objection is a moral and a liberal. Thank you very much.

[01:49:32] Del Bigtree

Wow, is all I can say. What an amazing performance by Aaron there in one of the most iconic venues in the world. So any time you're having a rough day and just feeling like, where are we at? Where are we going? These are the types of things I want you to hold in your mind and say, you know, we are not in Kansas anymore. If you have not purchased Aaron's book, which is probably the reason he had this opportunity. You must do that. Um, when we're celebrating 4th of July, the 250th anniversary of America. This is a huge part of what will have to be achieved. Vaccines, Amen. You can buy it at our bookstore inside of our store. You can get that QR code, all of the proceeds when you purchase the book at our store, go to ICAN. It's a full donation by Aaron Siri. **We really appreciate that. Um, so it's also a great way to get informed, get a book for someone else and also, you know, to, to help us with the work that we're doing.** I also want to say, you know, I know the 250th anniversary is just, you know, days away here. So you won't be able to get yourself an American t shirt or a hat, which is what we've been promoting. But it'd be great to have it and to be wearing around, because this whole year is a celebration of 250 years. So I hope you'll take a journey to our store at the The HighWire dot shop and check that out.

[01:51:00] Del Bigtree

Um, and lastly, I just want to talk about why all this is possible. Aaron Siri is standing at the Kennedy Center, not on his own volition, not because of anything that I've done or the people around him. He's there because of you. He's there because there was a group of people that decided to fund a set of lawsuits that were never going to make any money, something, as he said at the very beginning, no industry expected it. No government agency expected it. Who will ever stand in courtrooms over an issue? You'll get laughed at, ridiculed, attacked to begin with. Who's going to put their name near that and risk their careers? All for something that will never pay out. Knowing that you'll be dragged as slowly through the legal process as is possible to try and take away the enthusiasm. No one expected it would happen. And yet the Highwire. And I can, you know, found you out there. People that were saying, I want to make a difference in this world, and I want Aaron Siri to fight to the bitter end. And that bitter end is winning. It's winning. It's winning over and over again every single day. But it's not possible without you. It's just an idea. Without you, it's just a dream. Without you. It was just a dream. The day I met Aaron. Until we found you. And so for all of you that have been sponsoring this work, you should give yourselves a pat on the back.

[01:52:36] Del Bigtree

We are changing America, which, as I'm seeing as I travel, the world is changing the world. But we really need to put the pedal to the metal, as they say. And so if you can increase the donations you're giving, please do. Or if you've been sitting on the sidelines watching all of these things take place, um, why don't you get involved? Why don't you join this network? Why don't you start being able to celebrate every time we win? And by the way, when that Supreme Court moment happens, don't you want to say I did that? I made that happen. I was a part of changing the nation, of changing the world. Only those involved will be able to say that. So why don't you hop on now? It's like buying a Kentucky Derby winning racehorse that has already beat every other race, won every other race coming up. I'm always amazed when they buy the horse race the day before, and then suddenly it's like, oh, we won the Kentucky Derby. Well, I guess, well, why don't you jump on the winning horse right now? That is ICAN. That is The HighWire. We are taking this all the way to the ticker tape. I want you there. I want you in the winner's circle when that happens. So why don't you become a recurring donor today? Just go to the top of the page, hit donate to ICAN, which is at the top of our Highwire page of our ICAN page.

[01:54:00] Del Bigtree

You can donate. We ask that you become a recurring donor. That would be amazing so that we know how much we're raising. We're saying \$26 a month for 2026, but you can make that any amount you want. We are also tallying up the matching funds. The \$1.5 million match was supposed to close on June 30th, but we reached out and spoke to the sponsors that made it happen and said, we aren't quite sure. We're still waiting for checks to come in. And you know what they said? They said, we don't care. We don't care. Tell everyone, double down now, whatever they match, if they manage to go to 2 million this week, we will do that. Or if we're short, let's make it happen. So they've said it doesn't matter right now. Your dollar is going to be doubled no matter where we're at. It's an amazing opportunity. I hope you'll take them up on it on these incredible sponsors that make this work possible. It's a great opportunity. So if you can give, please do. Thank you for everyone that makes this possible. Um, it's really been incredible. Wasn't it amazing to see Aaron inside the Kennedy Center? I mean, come on. Alright, well, it's the 250 year anniversary of the greatest nation in the world. Probably the only divine document that has ever really governed a people. And in that, I mean, I think our Constitution is divinely guided in its heart. It states not that the government gives us a set of rights.

[01:55:31] Del Bigtree

It doesn't lay out what rights we get from our government. What it says is, this is the only place this is going to limit what the government can do when it comes between you and your inalienable rights that are endowed upon you inside and throughout you by God. Remember that in the texts about God in our Old Testament it said, you are created in the image and likeness of God, and this is a nation that recognizes that in America, this is a constitutional body that is only working for God's people. Don't forget that as you celebrate on the 4th of July and ask yourself, are we being treated like God's people? Are we free? Do we have all the rights that we should have? Would our founding fathers be proud? Are we proud? Will we be proud if this is what we hand to our children? Say, we did it. We stood up for you. Did we think about the courage? Think about our founding fathers signing that Declaration of Independence and saying, you know who I am. You know where I live. Come and take it. That's what puts us here. That's what we're celebrating this week. A handful of individuals. That said, I think if we are loud and proud and we believe we can make a nation believe, and maybe one day we will make the world believe. Be loud. Be proud. Freedom is everything. Happy 4th of July. I'll see you next week on the Highwire.

END OF TRANSCRIPT