

Experimental, Never before Tested Novel Genetic Therapy Pushed in Pregnancy. The Most Egregious Violation of Ethics in the History of Medicine

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This IS the greatest disaster in the history of obstetrics and all of medicine. I testify that this unwarranted experimental gene therapy was NEVER indicated in pregnancy and was perpetrated unlawfully and with falsified data. Res ipsi loquitur. Facts speak for themselves. It was known by Schadlich et al as early as 2012 that the lipid nanoparticles (LNP) concentrate in the ovaries of mice and Wistar rats. The FOIA request of the Japanese Pfizer biodistribution studies absolutely confirmed that within 48 hours the “vaccine” was immediately absorbed into the blood stream and concentrate in the ovaries 118-fold by 48 hours and the trajectory would have risen even higher had the animals not been sacrificed at 48 hours. This experimental therapy may have permanent damaging effects on the human genome for multiple generations or per perpetuity and makes diethylstilbestrol pale in comparison. It was incumbent upon the stakeholders to have excluded this prior to rolling it out. This is the unforgivable sin.

A preborn baby by near term has only one million ova (gametes or germ cells) for her entire lifetime, this compared men’s gametes (sperm) are continuously produce throughout life with nearly a million sperm per hour. As argued in 2020 COVID-19 vaccines were NEVER necessary in pregnancy because there were ample data suggesting that alternate therapies were available, but these were suppressed, buried, and villainized by the medical industrial complex for the sole purpose of paving the way for a lucrative experimental gene therapy masqueraded as a vaccine. Not only does the biodistribution studies document the disastrous concentration of the LNP in the ovaries adjacent to the precious and limited ova – the life of all our future generations - but it also concentrates in the thymus gland in fetal life potentially rendering permanent harm to the “seed of the immune function for life”.

Alexandra Latypova a pharmaceutical whistleblower testifies that the industry knowingly and purposely falsified and hid damaging data from the public in their reproductive toxicology studies. She provides internal documents of birth defects of severe rib abnormalities in the animals, a condition in humans that is equivalent to lethal skeletal dysplasia. “They accepted fraudulent test designs, substitutions of test articles, glaring omissions and whitewashing of serious signs of health damage by the product, then lied to the public on behalf of the manufacturers” states Latypova. The damning Pfizer 5.3.6 post marketing research documented unparalleled deaths after the “vaccine” in 1,223 patients (page 7) in less than 90 days and by all other historical standards should have been immediately removed from the market in December 2020. Pfizer attempted to block this release for 75 years but failed.

The Swine Flu vaccine was immediately removed from the market in 1976 after only 26 deaths and a few cases of Guillain Bare Syndrome. If the above Pfizer 5.3.6 data is not disturbing enough go to page 12 where the pregnancy loss, miscarriage, fetal death and neonatal deaths are documented in pregnant women given the vaccine: of the 270

pregnant women given the vaccine, 124/270 had complications after post-vaccination (page 12). There is extensive documentation of potential fraud, collusion and RICO violations documented by numerous experts. There were 1,366 peer reviewed publications in just 15 months documenting severe complications and death after the vaccine. Let that sink in: the peer-reviewed publication of C19 vax adverse events in just 18 months is massive and makes those published from ALL OTHER vaccines, ALL OVER the world in ALL OF THE PAST CENTURY.

The NEJM Shimabukuro article pushing the safety of the vaccine in June of 2021 is flagrantly false and manipulated to bury an 82% miscarriage rate, a rate that rivals that of the abortion pill RU486 also known as mifepristone. Mifepristone carries a black box warning by the FDA and yet the stakeholders are pushing this experimental therapy in pregnancy women. The unprecedented false villanization of extremely safe and effective drugs is well established by completely falsified publications in the LANCET by Mandeep Mehra, by Shimabukuro NEJM and many others falsifying manipulated data to take out extremely cheap, safe and effective repurposed drugs including hydroxychloroquine and ivermectin. *COVID-19 and the Unraveling or Experimental Medicine* has destroyed the false narratives of the globalists who have killed for profit and is published in a three part series, Part I, Part II, and Part III.

The British Government advocates against the use of the “vaccine” in pregnancy and breastfeeding mothers and has remained steadfast in this stance. Unfortunately for the world, they underhandedly “buried” this recommendation deep at the end of pages of useless information. Brilliant strategy since their UK.gov website will provide plausible deniability of liability: *“In the context of supply under Regulation 174, it is considered that sufficient reassurance of safe use of the vaccine in pregnant women cannot be provided at the present time: however, use in women of childbearing potential could be supported provided healthcare professionals are advised to rule out known or suspected pregnancy prior to vaccination”* (verified 11.3.2022).

Multiple independent experts have published on the severe adverse effects of the “vaccine” in pregnancy and in the VAERS report (here, here, here, here). Our recent publication documents unequivocal danger signals from the VAERS report using the Influenza vaccines over the past 284 months as a control group compared to that of the COVID-19 “vaccines” in just 18 months. Proportional reporting ratios (PRR) far exceed the CDC FDA danger signal of 2 in this study as follows:

- 1) increase in menstrual abnormalities increased by 1192-fold
- 2) abnormal menstruation by 1192-fold
- 3) miscarriage by 75-fold
- 4) fetal malformation by 20-fold
- 5) fetal cardiac disease by 16-fold
- 6) fetal growth restriction by 25-fold
- 7) oligohydramnios by 16-fold
- 8) preeclampsia by 24-fold
- 9) fetal death by 38-fold.

I can produce over 30 other completely independent worldwide sources that are consistent with this data and actually worse including that of the UK [Yellow Card](#), the European Medicines Agency [EudraVigilance](#), the World Health Organization [VigiAcces](#), the [World Council for Health](#) and many others.

The [CDC](#) admitted that they have NOT been transparent with the data which is obvious since they have still not acknowledged the presence of the [Pfizer 5.3.6](#) document as discussed above. They have hidden this data from worldwide citizens thus responsible for killing and injuring tens of millions. The most accurate medical database in the world, the [military DMED database](#) showed disastrous effects of the “vaccine” in pregnancy as reviewed by Senator Ron Johnson. CDC tried to hide their v-safe (smart phone) data that could be easily manipulated as used in the [Shimabukuro NEJM](#). Instead CDC is now hiding v-safe data because the data was damning; [7.7% of the participants](#) required a visit to the hospital or medical provider for complications after receiving their “vaccine”.

There are now two recently published articles documenting intact pseudo-uridinated mRNA (pumRNA) from the “vaccine” in human breast milk that has extraordinarily concerning implications, [Jia Ming Low et al](#), and [Alisa Kachikis et al](#). This is a disaster of unparalleled proportions. I have reviewed the frightening drop in birthrates in countries all over the world since the rollout of the “vaccine”. [COVID-19 and Disaster Capitalism – Part I](#) outlines the playbook of the medical industrial complex to game the system thus producing [a new pandemic billionaire on a daily basis](#) since the onset of the pandemic (500+).

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