

# British MP Vaccine Injured Won't be Taken Seriously for Previous Outlandish Comments —Accidental?



265 12 comments



daniel\_oconnor



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Feb. 12, 2023, 11:30 p.m.



*A British MP, a conservative who suffered from a vaccine injury himself, shares a startling statement from a British MP in the Labor Party conveying that there was a lack of political support to pursue the truth behind the COVID-19 vaccine-induced injuries. The Labor MP noted the conservative's "admirable campaign to seek the truth about the Covid jab may prove to be right in 20 years." A scandal on the level such as [Thalidomide](#) could be a reality in a decade. Perhaps the Conservative Party's Andrew Bridgen is spot on—he could be, given we are aware that data is actively being suppressed showing that many people are injured as a result of the COVID-19 vaccination program. But we also note that all credible data points to a reality that the COVID-19 vaccines were developed (albeit in a rush) to help induce antibodies and hence immune response, part of an urgent quest to reduce severity and mortality associated with SARS-CoV-2, the virus behind COVID-19. It's likely that if SARS-CoV-2's origin is a lab leak (and this could be the case), this would compound the rush to get a vaccine out into the market as quickly as possible. After all, that's why the Cuban government, not known for their coin-operated capitalistic bio-focused companies, [developed multiple vaccines](#) against SARS-CoV-2. They were scared by something, and their program wasn't usurped by the profit-making motive. As with any pharmaceutical product, if vaccines or therapies are administered in mass to enough people in parallel, side effects and injuries, albeit on rare occasions, are likely in considerable numbers. For example, in the United States, about 230 million people have received at least the primary series vaccination, and we at TrialSite estimate that a relatively small percentage of the total immunized experienced adverse side effects leading to some form of injury. This estimation ranges from 0.002 to 0.0008 of the total vaccinated population, which means up to nearly 2 million people across America could suffer from ongoing health issues associated with the vaccines. This doesn't mean that the COVID-19 vaccines didn't save lives, and in fact it, much data suggests the benefits of the immunization program still outweighed the risks, as may be the case in any comparable worldwide pandemic and associated response. Problematically not enough investment was made in countering this inevitable situation, that there would be adverse reactions associated with such a massive*

*immunization program. But the government has gone on the offense, denying any injuries even though a thorough reading of the vaccine package inserts suggests not only issues, albeit rare, involving myocarditis and other possible impacts but also lots of unknown risks, such as when considering populations not exposed to randomized controlled trials, such as pregnant or lactating persons.*

British politician and businessperson [Andrew Bridgen](#) went on the record about his COVID-19 vaccine injury recently at an event titled “TCW Defending Freedom: A Celebration of Dissent with London Premier of Safe and Effective: A Second Opinion.” He discussed his point of view while attending the premier of [this documentary](#) directed by Phillip Wiseman that purports to shine a light on COVID-19 vaccine injuries and bereavements, as well as suggesting the systemic failure that likely enabled them.

During this talk, MP Bridgen told the audience that an influential member of the Labor Party informed the conservative that he was, in fact, correct with his assessment. But due to mass political and financial interests, the truth may never get out, or at least not for quite some time.

## **Well-Intentioned?**

Bridgen has served as a Member of Parliament (MP) for North West Leicestershire since 2010. A member of the Conservative Party, his House of Commons tenure associates with an independent position. Bridgen has been under fire for statements he has made, declarations which are all too unfortunate in association with COVID-19 response, and vaccine critics.

For example, the conservative MP likened the COVID-19 countermeasure campaign against SARS-CoV-2 to the Holocaust, according to an entry from the [BBC](#). Of course, any material coming from this, or any other independent or mainstream media, must be vetted for accuracy and veracity.

A “Brexit” supporter, his critique of the COVID-19 vaccines has aligned nicely with mainstream proponent efforts to categorize and label such criticism as the work of only anti-vax-inspired, right-

wing extremists, conspiracy theorists, loons of various sorts, or even vicious proponents of antisemitism.

This is why it's really blasphemous in any forum to compare the COVID-19 emergency countermeasure response (whether we like them or not) as part of some organized bioweapons program associated with a depopulation campaign and other reckless speculative allegations.

These kinds of claims are more than just reckless. They serve to quickly delegitimize any counter movement to critically vet the COVID-19 programs. In fact, some critics of the COVID-19 campaign that, in some cases, have some potentially legitimate, insightful points of view become instantly discredited and delegitimized by civil society once they put forward unproven hypothesis such as the bioweapons or depopulation argument.

For example, this extreme cohort of interest generally argue that just because the Department of Defense was mobilized as part of the COVID-19 countermeasure response and that DoD contracting vehicles were used that that's prima facie evidence that COVID-19 is, in fact, a military response, accompanied by "weaponized" countermeasures, part of a larger, more nefarious agenda.

They make these declarations with no real proof other than broadly cursory, frankly, reckless claims that because DoD is involved that it must be a military action. Much of the material for this particular outrageous hypothesis derives from the work from a paralegal in Pennsylvania that declares her theory correct because her complex analysis of the various contracts associated with the COVID-19 response proves her point. Frankly, it's no different than Dr. Anthony Fauci declaring he is correct because "he is science."

Of course, the Executive Branch of the government becomes ever more powerful, and there is most certainly a military industry complex ([Eisenhower warned](#) us of this decade ago), but the true evidence backing such extreme, radical claims is beyond limited indeed. Yet all sorts of doctors and activists seeking to extend their 15 minutes of fame as part of the "medical freedom" movement continue to push ever more outlandish claims as part of their over-zealous quest for ego gratification and monetization. This group is

no better than Big Pharma exploiting the pandemic—at least the latter hires hundreds of thousands of people, in fact.

Outlandish conspiratorial claims only delegitimize any serious criticism of the current pandemic response program, with all of its problems, including:

- Vast transfer of wealth --\$5.5 trillion and counting with no real accountability
- Systemic bias in the academic/government/industry medical complex against low-cost repurposed medicine, favoring high-priced novel therapeutics and vaccines
- Questionable positioning and mandating of novel mRNA-based vaccines as the sole response to control the pandemic when the science was already clear that RNA viruses such as SARS-CoV-2 are almost impossible to control (this latter point has been acknowledged recently by Fauci indirectly). See the following opinion editorial from [this same author](#).
- Shutdowns with no science backing them that devastated small business, the largest employer generator in the economy, as well as student performance
- Suppression of any critical information about the vaccines, such as the fact that there are injuries, due to the fear that it will lead to vaccine hesitancy
- Outrageous contracting practices by companies such as Pfizer (see *TrialSite* on [ICAM protocol](#)) inhibiting health systems from taking creative actions early on to save lives, not to mention adhesion-like contracts that served to trump national constitutions in some cases. See [Pfizer's Power](#).

So, individuals that have real critical concerns about how governments, industry, health systems, and academia have collaborated in a top-down manner as part of the COVID-19 countermeasure response are silenced by the deafening claims of conspiracy theorists and radicals arguing that COVID-19 is part of some nefarious, global cabal plotting a modern form of slavery and even death for all of us majority in the plebian class.

Because of the outspoken few, yet outspoken online, now fully empowered via an open-again Twitter and Substack accounts,

garbage theories are peddled for ego response and monetization or, in some cases, for serious provocation, as this author believes that in some cases agitators associated with intelligence agencies are at work in controlled opposition campaigns, whether from the West or Russian and Chinese. Why? The goal is to quell any real legitimate constructive criticism of all that has unfolded in favor of convenient, radical narratives that serves to divide and conquer more reasonable voices, making governments and industry ever more in control. Adversaries to the West use such controlled opposition to sow the seeds of discontent and division in places like America.

So, it's a good idea to not walk away but run away, as fast and far away as you can, from anyone making the claim that the COVID-19 response is part of some orchestrated military-first action with nefarious motives (such as depopulation). And for that matter, keep clear of any twisted individuals purporting to be intelligent and critical but who outright compare the COVID-19 emergency countermeasure response of western governments to the worst genocide in modern history. This is not only beyond reckless but also anti-semitic in effect. Because *BBC* alleges that MP Bridgen made such a comparison, his potentially legitimate criticism will likely get discarded into the dustbin of history.

[COVID-19](#) [Vaccines](#) [Vaccine Injury](#) [Claims](#)

## Comments (12)

What do you think?

0/3000

[Publish](#)

R

**rogerknights**

Feb. 13, 2023, 6:59 p.m.

I agree.

[Reply](#)

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J julieritchie52  
Feb. 14, 2023, 3:21 a.m.

Where did the BBC make the assertion ' worst genocide in history' and do they have proof he said it?

[Reply](#)

R robin\_whittle  
Feb. 14, 2023, 7:33 a.m. (Edited)

Thanks very much for TSN in general and for publishing my four comments here, which are highly critical of the editorial above. An illustrated and somewhat elaborated version of these four comments is now at: <https://nutritionmatters.substack.com/p/the-covid-19-pandemic-response-killed>

(1 of 2) ". . . the benefits of the immunization program still outweighed the risks, . . .". This is not the case for those who were seriously injured or killed, and who were very unlikely to have suffered such harm if they had contracted COVID-19 without being subjected to the mRNA and adenovirus vector quasi-vaccines.

In broad population terms the above claim is often made and accepted as true. However, this particular quasi-vaccine campaign was not the only option - especially with these experimental gene therapies being unreasonably promoted to and/or forced upon people against their will, including many who were not elderly and so were at low risk of harm from COVID-19.

The proper response was always to ensure that the innate and adaptive immune responses of individuals and of whole populations (in part to reduce transmission) was maximised by proper nutrition. Average, normal (without proper vitamin D supplementation) 25-hydroxyvitamin D levels of 5 to 25 ng/mL are a fraction of the 50 ng/mL needed to achieve this. The most pertinent research on this and on vitamin D2 supplemental intakes as ratios of bodyweight are at: <https://vitaminstopsCovid.info/00-evi/> .

The second graph at <https://vitaminstopsCovid.info/00-evi/#4.2> shows clearly how in the summer of 2020, in the UK, R0 for the original (or very early) Wuhan strain of SARS-CoV-2 was well below the 1.0 value required for pandemic transmission, in the absence of lockdowns, extensive masking or social distancing, and quasi-vaccines. All that had happened was that some of the most vulnerable in the population (primarily those with the lowest 25-hydroxyvitamin D levels) contracted the disease AND the terribly low average 25-hydroxyvitamin D levels of winter rose significantly to their summer peak. Even though this was still only half of the 50 ng/mL needed for full innate and adaptive immune responses, this was enough to reduce transmission to the point where only 795 COVID-19 patients were in hospital in late August - 4% of the 19,617 of 4.5 months before.

Increased indoor and in-vehicle air temperatures and reduced humidity in the winter months probably plays some role in the seasonality of COVID-19, influenza etc. but most of the well-known seasonality is due to 25-hydroxyvitamin D levels: <https://nutritionmatters.substack.com/p/covid-19-seasonality-is-primarily>. Proper supplementation takes the level well above the normal seasonal range of unsupplemented individuals, and so suppresses both transmission and severity (and probably the chance of being infected for any given viral insult) far more strongly than the 25-hydroxyvitamin D boost from summer sunshine.

Reply

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R robin\_whittle  
Feb. 14, 2023, 7:34 a.m.

(2 of 2) Not only should proper vitamin D3 supplementation have been encouraged and supported, starting with the aged, healthcare workers, pregnant women and those who are incarcerated, but a growing number of early treatments should have been made available to everyone upon diagnosis.

This combined vitamin D (and ideally other nutrients) supplementation and early treatment pandemic response is what the actual quasi-vaccine-centric response should be compared to. For almost all people in a population properly nourished and treated in this way, the benefits regarding serious harm and death of quasi-vaccination would be insignificant, but the enormous costs and level of harm would have been the same.

Multiple whole professions approved and pushed this pandemic response, deliberately or at least egregiously ignoring and denying the benefits of nutrition and early treatment with inexpensive drugs (not least melatonin, which is a natural hormone: <https://c19early.com>), because they were collectively agreed that these would distract from their common goal of tackling the pandemic solely with experimental quasi-vaccines (and later overly-narrow, expensive, monoclonal antibodies and not very safe or effective, expensive, patented drugs).

Doctors, nurses, immunologists, virologists, vaccinologists, public health administrators, legislators and government official - and the mainstream press. In the West, the consensus position of all these professions was egregiously mistaken. The profession with the clearest responsibility to patients and the public to do better was doctors. A handful objected and were ignored, derided and/or deregistered. The mainstream body of doctors could easily have put a stop to this disastrous government response by insisting on proper nutrition for immune system health and full access to safe, effective, early treatments.

That they did not is an extraordinary betrayal and collective professional failing. Government attempts to corral doctors to follow the vaccinocentric mainstream narrative would not have lasted more than a few days if doctors collectively rejected it.

Stating "... the benefits of the immunization program still outweighed the risks, ...". as if it was a fact is just supporting this collective professional failing at a time when it needs to be fully exposed and discussed.

Reply

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A avis  
Feb. 14, 2023, 9:07 a.m.

Russia may want us to believe that vaccines are safe.

Reply

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R robin\_whittle  
Feb. 14, 2023, 2:31 p.m.

(1 of 2 more) In his now deleted tweet, "As one consultant cardiologist said to me, this is the biggest crime against humanity since the Holocaust", Andrew Bridgen MP was not arguing the two crimes are identical, or even similar. He was stating that this (I guess the quasi-vaccines themselves, or more likely the totality of their use including the suppression of nutritional and low-cost early treatment approaches) has had a greater impact - suffering, harm and death - than any other crime against humanity since the Holocaust.

Deliberately and forcibly using state and corporate capabilities, including propaganda, to incarcerate, torture and kill millions of people of particular ethnicities, sexual orientations or disabilities is a different crime than what I described in my previous two comments.

There is no legally binding definition of "crime against humanity", but the UN page <https://www.un.org/en/genocideprevention/crimes-against-humanity.shtml> states that "it is not necessary to prove that there is an overall specific intent."

The internal cogitations of the perpetrators matter little when their actions cause suffering, harm and death on the massive, personally indiscriminate, scale the UN document describes.

The professional groups I mentioned above were all paid by the public, individually and collectively, to protect them and to be truthful. Instead they lied and avoided and disparaged the truth about the likely ineffectiveness and safety of the quasi-vaccines. That would be bad enough, considering their actions lead to hundreds of millions of people accepting these injections due to threats of loss of jobs, or of the ability to mix in society, and due to unrealistic fears and promises which were generated by the cooperating groups of professionals.

However, it was more than that - it was the systemic suppression of nutritional and early treatment approaches to tackling the virus which lead to its very high transmission rate and to the great majority of deaths which occurred.

[Reply](#)

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R robin\_whittle  
Feb. 14, 2023, 2:33 p.m.

(2 of 2 more) This was a cluster of egregious professional failings, each one of which had such devastating consequences that it fully meets the UN criteria for "crime against humanity". Properly handled, this pandemic could have been suppressed with proper vitamin D supplementation, starting with the most at risk, and multiple early treatments as knowledge of these developed. The death toll would have been a small fraction of the current total.

One account of the Holocaust's death toll:  
<https://encyclopedia.ushmm.org/content/en/article/documenting-numbers-of-victims-of-the-holocaust-and-nazi-persecution> does not give a total, but lists 6 million Jews and (in the larger figures of other categories of death) at least 11.3 million non-Jews.

Worldometer reports 6.78 million deaths from COVID-19, which involves over-estimates (those who died "with" COVID-19) and an underestimate - such as uncounted deaths in India.

This exceeds the death toll of any one war since the Holocaust, according to:

[https://en.wikipedia.org/wiki/List\\_of\\_wars\\_by\\_death\\_toll](https://en.wikipedia.org/wiki/List_of_wars_by_death_toll) and of any one genocide since those which were part of the Holocaust listed at: [https://en.wikipedia.org/wiki/List\\_of\\_genocides](https://en.wikipedia.org/wiki/List_of_genocides) .

Because I consider the pandemic response is the sole or primary cause of the great majority of deaths, I support what Andrew Bridgen wrote. I do not see this as any insult to the victims of the Holocaust - who were killed very deliberately. I attribute the impetus behind the coalition of professionals who enacted the COVID-19 pandemic response cluster of crimes against humanity as a massively complex and distressing series of mistaken conceptions and motivations, which for convenience I refer to as "corrupted, groupthink ineptitude".

[Reply](#)

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**D** davidklassen  
Feb. 14, 2023, 10:38 p.m.

Re: "much data suggests the benefits of the immunization program still outweighed the risks." Except that the shots did not immunize! And now comparison of the risk -- a 1 in 800 chance of a serious adverse event due to vaccination (Fraiman et al peer-reviewed paper analyzing Moderna and Pfizer trial data) -- far outweighs the benefit based on Number Needed to Vaccinate to prevent hospitalization in recent UK government data. See commentary of Dr. John Campbell with links to primary sources: [https://www.youtube.com/watch?v=fbFayD\\_S\\_54](https://www.youtube.com/watch?v=fbFayD_S_54). Age 20 to 29, not in a risk group, with the latest booster, would need to vaccinate 168,000 to prevent hospitalization, or 706,000 to prevent severe hospitalization.

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1131409/apj-1-of-jcvi-statement-on-2023-covid-19-vaccination-programme-8-november-2022.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1131409/apj-1-of-jcvi-statement-on-2023-covid-19-vaccination-programme-8-november-2022.pdf)

[Reply](#)

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**J** jimn  
Feb. 15, 2023, 5:48 p.m.

Well, TSN and DOC, I'm disappointed to say the least. This editorial is 'over the top' in the wrong direction. (imo). On one hand you (correctly) cite at least six major reasons why the global pandemic response was problematic. On the other you sweep aside a few examples of what you describe as over-the-top extremism and fall into the same trap of labelling Bridgen and maybe others as "anti-semitic." Isn't citing that extremism itself? What is your role here, TSN? Surely it's to examine all arguments across the spectrum to try to determine truth and accuracy... (which is why many of us are here). Or would you rather kow-tow to big-money-powered big tech who will patronizingly dictate the dimensions of the Overton window, and similarly maintain the pre-Musk Twitter approach to stifle free speech ... in the name of claiming to protect it?

I remain convinced there's a lot more to the 'covid story' than has yet been revealed. Fraud and misrepresentation have been rampant. Is it worse than that? I think so. It's your job to find out and

report without pre-labelling. Dispassionately.

Ok, maybe with passion.

Here's another source: Dr. Andrew Huff... "The Truth About Wuhan." He is convinced there's evidence of fraud. What do you say?

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R roccol  
Feb. 19, 2023, 10:17 a.m.

I have to agree. At this stage in the fight we now need to focus on evidence that's strong enough to change policy, human stores that are strong enough to sway public opinion, not allegations that can be used to discredit the effort.

At the very least the usual PR firms used by big pharma and the political parties, are likely active in this effort to discredit the movement. This is their track record.

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