



NATIONAL CITIZENS INQUIRY

Ottawa, ON

Day 1

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EVIDENCE

Witness 12: Louise MacDonald

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[00:00:00]

Shawn Buckley

Our next witness is attending virtually, Louise MacDonald. Louise, can you hear me? So Louise, if you can turn your camera and your mic on, that would be great. There you go. I can see you. Can you speak so I can see if I can hear you? Okay, so can you speak again?

Louise MacDonald

I can hear you now.

Shawn Buckley

Okay and I can hear you. I'd like to start by asking you to state your full name for the record, spelling your first and last name.

Louise MacDonald

Louise MacDonald, L-O-U-I-S-E M-A-C-D-O-N-A-L-D.

Shawn Buckley

Louise, do you promise to tell the truth, the whole truth, and nothing but the truth, so help you God?

Louise MacDonald

Yes, I do.

Shawn Buckley

Now, you're here to actually share with us your analysis of government data. But I want to give a bit of your background, so just to introduce you. You were a manager at Sobeys for 25 years.

Louise MacDonald

Yes.

Shawn Buckley

And you managed the deli department, which did, yearly, a million dollars in sales.

Louise MacDonald

Approximately, yeah.

Shawn Buckley

Yeah. And you had to reconcile the accounts.

Louise MacDonald

Yes.

Shawn Buckley

So basically, you had to track all the money going in and out, to reconcile them.

Louise MacDonald

Yeah.

Shawn Buckley

Through that experience for a quarter century, you developed very strong analytical skills.

Louise MacDonald

I had to.

Shawn Buckley

Right, and you smile.

Louise MacDonald

Yeah.

Shawn Buckley

Okay. Also you had the misfortune, in 2015, to have acute kidney failure caused by a medication, and—

Louise MacDonald

Yes.

Shawn Buckley

That then set you on the path to researching medications because you had to be extremely careful.

Louise MacDonald

Correct.

Shawn Buckley

Okay. So you became familiar with researching medications. When the vaccine came along, you noticed that it contained polyethylene glycol, and that's something you need to avoid.

Louise MacDonald

Yes, it was in the medication that caused my acute kidney failure.

Shawn Buckley

So because of your background in analyzing things and your interest in the medications, you started collecting and collating government data on adverse reactions.

Louise MacDonald

Yes.

Shawn Buckley

You prepared a little presentation for us. I'm wondering if you can just launch into that and share your findings and your thoughts.

Louise MacDonald

Okay, so when I was doing the research, I came across Canada's website. What better place to find out the ingredients of the vaccines and as much information as possible. All the screenshots I'm going to share today are from the Canadian government website. They are from the case by vaccination status report, the vaccine adverse event reports, and a lot of screenshots are from NACI [National Advisory Committee on Immunization] statements.

I'm just trying to find where everything is. I know we're short for time, so I'm going to start not where I'd originally planned. Actually, no I will. Just bear with me.

Shawn Buckley

You're just looking for the screen share, I presume. And while you do that . . .

Louise MacDonald

Sorry, yeah.

Shawn Buckley

I'll just indicate that Louise had shared with me that she took an entire year documenting what she's synthesized for us as a presentation today [Exhibits OT-7 to OT-7l. Slide names are included in square brackets throughout this transcript as a guide to the exhibits].

Louise MacDonald

Sorry, I'm not very good with Zoom and technical stuff.

Shawn Buckley

Now, there you go. We've got screen sharing.

Louise MacDonald

Yeah.

Shawn Buckley

And we've got a slide that says "Since Dec. 14, 2020."

Louise MacDonald

[Government of Canada (GoC), Health InfoBase, Case by vaccination status report, as of December 25, 2021]

This is the case by vaccination status report and it's the report for December 25th 2021, at the top.

Now this is how the government reports the case by vaccination status, and they used data collected since December 14th, 2020. Now that immediately raised a bell because in December 14th, 2020, next to no Canadians were fully vaccinated. Down at the bottom where there's the yellow #2— I just want to make a point that there's only one fully vaccinated category. And then,

[00:05:00]

when I saw #3, the gray columns—those are the number of unvaccinated cases, hospitalizations, and deaths compared to the fully vaccinated, not yet protected, and partially vaccinated. That almost had me second guessing whether I should get the vaccine.

[GoC, Health InfoBase, archived page, Percent of people vaccinated, as of May 29, 2021]

So I did a little bit more research. And up until May 27th, 95 to 100 per cent Canadians weren't vaccinated. So it overinflated the unvaccinated numbers.

[GoC, Health InfoBase, Case by vaccination status report, 12 months of data, up to December 25, 2021]

This is how the Government of Canada reports it. So the top one is 12 months of data. If you look at the graph down below, the unvaccinated cases were counted for the full 12 months. Fully vaccinated was only counted for about five, five-and-a-half months. So it made me think "Well, it's not really the same playing field that you're comparing 12 months to 6 months."

[GoC, Health InfoBase, Case by vaccination status report, for Dec 18 to Dec. 25, 2021]
So this screenshot is the same report. So the week of December 18th to December 25th, 2021. Now this chart shows only one week of data, which is highlighted in the [vertical] red line below.

[GoC, Health InfoBase, Case by vaccination status reports, comparing charts of 12-month data with 1-week data]

Now when you look at the charts together and compare them together, it's totally different. So the top graphs [#1] show the unvaccinated cases to appear to be so much higher than the fully vaccinated. But when you just show one week of data [#2] where 75 per cent of Canadians were fully vaccinated and 25 per cent weren't, that week 97 per cent of cases were in fully vaccinated Canadians.

[GoC, Health InfoBase, Case by vaccination status report, Figure 5, as of January 30, 2022]
So because the fully vaccinated were getting really high, they divided the fully vaccinated into two categories on January 30th [2022].

[GoC, Health InfoBase, Vaccination Coverage, Figure 2. Cumulative number of people who have received COVID-19 vaccine, as of May 22, 2022]

And then, they started comparing unvaccinated to fully vaccinated and boosted. So again, they're comparing 17 months of unvaccinated cases to only five months worth of data for fully vaccinated and boosted because they were only just fully vaccinated and boosted for five months.

[GoC, Health InfoBase, Case by vaccination status report, Figure 5, as of June 5, 2022]
And then again on June 5th 2022, they split the fully vaccinated categories into three again. This also divides the numbers, divides the percentages, and grossly overinflates the unvaccinated numbers.

Shawn Buckley

Just so we're clear. The unvaccinated would include people that are not fully vaccinated. So they could have had one shot. Or they could have had two shots but not cleared the 14 or 21 days or whatever after the second shot.

Louise MacDonald

Oh, sorry. I'm just going back.

[GoC, Health InfoBase, Case by vaccination status report, Figure 5, as of January 30, 2022]
In January [2022], they reported cases not yet protected and partially. If you look down at the bottom left corner.

Shawn Buckley

Okay, so it is broken up at that point.

Louise MacDonald

It is broken up at that point.

[GoC, Health InfoBase, Case by vaccination status report, Figure 5, as of June 5, 2022]

But when they split it into three [fully vaccinated], they stopped reporting the cases not yet protected and the partially vaccinated. But they still counted the numbers. So from here on in, any of my numbers are excluding the partially vaccinated and the not yet protected.

[GoC, Health InfoBase, Vaccination Coverage, Figure 2. Cumulative percent of people who have received a COVID-19 vaccine, as of September 11, 2022]

When they did this, they started comparing the unvaccinated, which is 21 months worth of data, to people that had the primary series completed and one booster, in the red—only six months worth of data. And when they were compared against people that had the primary series completed plus two additional doses, that's only four months worth of data.

[GoC, Health InfoBase, Case by vaccination status reports, Comparing 20 months of data with 4 weeks of data, as of September 25, 2022]

This is the last updated case by vaccination status report on the government website. The top one shows how the government reports it since December 14th, 2020. They're using 20 months worth of data,

[00:10:00]

and it makes the unvaccinated look like a big problem. Now in the middle graphs, this is just four weeks of data. From August 28th to September 25th, this is how it looks and this is with the three primary-series-completed categories separate. Now when you go down to the bottom graphs, this is the same four weeks, August 28, 2022, to September 25th, 2022. This is the unvaccinated compared to the three primary-series-completed all together. It's quite a different picture from the top one.

Shawn Buckley

Now can I ask you a question? I appreciate that the government . . . [connection lost] thousand or anything like that so that we could compare between the categories for a specific population size.

Louise MacDonald

No, not on any of the reports that I've seen.

Shawn Buckley

Okay.

Louise MacDonald

[GoC, Health InfoBase, Case by vaccination status report, Figure 1, as of September 25, 2022]

When they did divide it into the primary-series-completed categories and they stopped reporting the part-vaxxed and the not yet protected, they still counted those numbers. So just to give you an idea: of the cases, 6.2 per cent of the cases were not yet protected or partially vaccinated; 7.7 per cent of the hospitalizations were not yet protected or partially vaccinated; and in the deaths, 8.1 per cent. Just to give you an idea of the amount of cases that are missing. I could only do percentages because they didn't give the numbers.

Okay, so I'm going to go back to the next presentation. It's going to be on the safe and effective vaccines. I've got to go back. Sorry about this. I'm really not good with . . .

Shawn Buckley

Actually, we understand and appreciate that. When you were showing us the COVID cases, did they change how they were classifying COVID cases? Because some witnesses have told us that early on, if you had a list of symptoms, you would be classed as a COVID case; then later, when PCR tests became available, you would be a case. Some have suggested that they would run more cycles on an unvaccinated person than a vaccinated person, which would change the numbers again. I'm just wondering if you ran across any information there or did they not clarify things like that?

Louise MacDonald

Over the two-and-a-half years that I dabbled in this, I heard a lot of other people saying that the cycles are that and all these other things. But I only ever concentrated on case by vaccination status and the serious adverse events. Any of the data that I'm going to show you and the numbers are regarding serious adverse events only.

[GoC, Health Canada, COVID-19 Vaccines: Authorized vaccines, AstraZeneca]

So this is the little presentation on safe and effective. So AstraZeneca Vaxzevria COVID vaccine was, I believe, approved around September 2021. They say, "All COVID-19 vaccines . . . are proven safe, effective and of high quality."

[GoC, Health Canada Statement, March 24, 2021]

Again, on March 24th, 2021, Health Canada issued a label change and guidance on the AstraZeneca COVID vaccine. They state, "Health Canada reassures . . . that the AstraZeneca COVID-19 vaccine continues to be safe and effective . . ."

[GoC, Health InfoBase, Vaccine Safety Report, March 3, 2022]

This is the vaccine safety report from March 3rd, 2023. It's the last one they updated. On the bottom [connection lost] . . . and that equals one serious adverse event

[00:15:00]

in every—on average—every 2,923 doses administered [AstraZeneca]. Now I don't know what's classed safe and effective, but I don't think I would be wanting to put that into my body.

Now in the middle there, where it says 841 and 1,782, the original report has "Not applicable."

[GoC, Health InfoBase, Table 1. Cumulative number of COVID-19 vaccines doses administered by vaccine product and dose number, as of March 2023]

Now, they did have those numbers and where I got the 1,782 is on this report on a different page on the Canadian government website. This is where I got the number of doses administered.

[GoC, Health InfoBase, Vaccine Safety Report, March 3, 2022]

So I calculated it, and on dose three, there was one serious adverse event in every 118 doses administered. There were only 1,782 third doses administered. I still think that's 1,782 too many. Thank God, there was only 28 fourth and fifth doses because they were

one serious adverse event in 14. So for the 28 doses administered, there was two serious adverse events.

[GoC, Health Canada, COVID-19 Vaccines: Authorized vaccines, Moderna]

So this is the Moderna Spikevax COVID vaccine. And again, approved by Health Canada: “All COVID-19 vaccines . . . are proven safe, effective, and of high quality.” Now this includes, on the right-hand side, the Spikevax Bivalent, the original/Omicron BA1 and the original/Omicron BA4(5). So these are proven safe and effective and of high quality.

[GoC, archived page, Public Health Agency of Canada, NACI Statement]

This is the NACI statement. NACI is the National Advisory Committee on Immunization, and they advise the Public Health Agency of Canada (PHAC) on everything to do with COVID. This was released at the same time, and it states, “There are currently no data on the efficacy, immunogenicity or safety of the Moderna Spikevax Bivalent . . . COVID-19 vaccine . . .” Then they go on to say that the benefit “may outweigh any potential risks that are unknown . . .” If you don’t know the efficacy or immunogenicity, then how do you know the benefit? And how can you determine that the benefit outweighs the risk if the risk is unknown?

[GoC, Health InfoBase, Vaccine Safety Report, March 3, 2023]

This is the vaccine safety report, and this one gives the serious reporting rates for vaccine, dose numbers, and for the Moderna Bivalent. The serious reporting rate is 32.96 serious adverse events for every 100,000 doses administered. That equals one serious adverse event for every 3,033 doses administered.

[GoC, Health Canada, COVID-19 Vaccines: Authorized vaccines, Janssen Johnson & Johnson COVID-19 vaccine]

The Janssen Johnson & Johnson COVID-19 vaccine. Now this one, “All COVID-19 vaccines . . . are proven safe, effective and of high quality.” Approved for Health Canada.

[GoC, Health InfoBase, Vaccine Safety Report, March 3, 2023]

Now this one, again, is at the top, March 3rd, 2023. All this data is still on the internet. For all Johnson & Johnson’s Janssen COVID vaccine, the serious reporting rate was 148.05 per 100,000 doses administered. That equals one serious adverse event in every 675 doses administered. I don’t see how that could be proven safe.

[GoC, Health Canada Statement, September 1, 2022]

And again, so “Health Canada authorizes first bivalent COVID-19 booster” dose, September 1st, “safe and effective.”

[GoC, Health Canada, News Release, October 7, 2022]

Again, October 7th, COVID vaccine booster with the bivalent vaccine, Omicron vaccine, “safe and effective.”

[GoC, PHAC, Summary of NCAI’s Updates, November 3, 2022]

On November 3rd, 2022,

[00:20:00]

the update says, “Vaccine effectiveness has not yet been established for the bivalent booster products.”

[GoC, PHAC, NACI Statement, Safety and Ethics, November 2022]

Now the next few screenshots are all on the NACI statements. So this one is “The risk of myocarditis and . . . pericarditis associated with additional doses is currently unknown.”

[GoC, PHAC, NACI Statement, Efficacy]

“Currently, there are no estimates of vaccine efficacy available for the Pfizer-BioNTech Comirnaty . . . Bivalent [vaccine].”

[GoC, PHAC, NACI statement, Summary of evidence on Pfizer-BioNTech Comirnaty]

“There [is] currently no clinical evidence on the safety, immunogenicity or efficacy of the Pfizer-BioNTech Comirnaty . . . Bivalent . . . vaccine in children 5 to 11 years . . .” And these kids were recommended to get the dose.

[GoC, PHAC, NACI Statement, Fertility, Pregnant Women]

Now, this one is on the Vaxzevria, which is AstraZeneca’s. It states, “It is unknown whether VAXZEVRIA may impact fertility in humans. No data are available in humans.” Below that, “The safety and efficacy of VAXZEVRIA in pregnant women have not yet been established.” They were advised to get vaccinated.

[GoC, PHAC, NACI Statement, Additional Considerations and Rationale]

“There are currently no data available on the efficacy, immunogenicity or safety of [the] bivalent Omicron-containing mRNA . . . vaccines in adolescents 12 to 17 years of age.”

I have thousands of screenshots like this.

[GoC, PHAC, NACI Statement, Currently authorized vaccine: Pfizer, December 12, 2020]

“There[’s] currently insufficient evidence on the duration of protection and on the efficacy of [the] vaccine in preventing death, hospitalization, infection and reducing transmission . . . although studies are ongoing.”

[GoC, PHAC, NACI archived page]

“Summary of evidence [of] an additional dose of COVID-19 vaccine following a 2-dose [primary] series.” “There[’s] currently no data on the efficacy [or] effectiveness . . .”

[GoC, PHAC, NACI, The risk of myocarditis]

“Currently, the risk of myocarditis/pericarditis in children following immunization with the . . . Pfizer . . . vaccine is unknown.”

[GoC, Health InfoBase, Approved vaccines]

These vaccines [AstraZeneca, Janssen, Moderna] are still approved for use in Canada, and these vaccines are still being mandated to government workers.

The last little presentation I have, I will cut some of them out because I know we are very behind.

Shawn Buckley

Before you jump to the next presentation.

Louise MacDonald

Yeah.

Shawn Buckley

You're giving us the numbers that are reported as serious adverse reactions. Do you know how robust that data is? So for example, in the United States, there have been estimates done of how inadequate the VAERS [Vaccine Adverse Event Reporting] system is, in that hardly any get reported out of the total number of deaths and serious adverse reactions.

Do you have any idea in Canada how many adverse reactions or what percentage of adverse reactions actually make it into that database?

Louise MacDonald

Well, I'm not an expert. I don't know that answer. I've heard lots of stories. I've heard doctors say less than 2 per cent. But I'm not an expert. I don't know the answer to that.

Shawn Buckley

Okay.

Louise MacDonald

These numbers that I'm giving you are the numbers that have been reported. So they're at least this high. Again, I said all the numbers that I'm giving are for only the serious adverse events.

[GoC, Health InfoBase, Vaccine Safety, Definitions, February 11, 2022]

Now on the Canada Health InfoBase website, "An event is considered serious if it results in death; is life-threatening, an event or reaction in which the patient was at real, rather than hypothetical, risk of death at the time of the event or reaction; or requires in-patient hospitalization or prolongation of an existing hospitalization; it [could result] in persistent or significant disability . . ." [connection lost]

[GoC, Health InfoBase, Vaccines for COVID-19, Reported side effects following COVID-19 vaccination, up to and including March 3, 2023]

This is the report that I stumbled on when I was researching what were in the vaccines. This is the beginning of the webpage. When you go down further,

[00:25:00]

you get a summary of the data for that report. I just want to make a little note. It says there was a signal of ischemic stroke in people 65 years of age and over. And it says—and I'm make a note of this—"The signal has not been found in other vaccine safety monitoring systems in the [U.S.], nor in other countries, including Canada." That'll come in handy later.

[GoC, Health InfoBase, Vaccines for COVID-19, Figure 1. Number of COVID-19 adverse events reports received and total doses administered in a 4-week reporting period, up to and including March 3, 2023]

So down further, this shows all the historical reports. So each column represents a report. Then down below that, it says, "Figure 1: Text Description."

[GoC, Health InfoBase, Vaccines for COVID-19, Figure 1. Text Description]

When you click on that, it takes you to this report. This is basically all the historical reports. So each line here represents a column in this chart here [previous slide].

Now, I went over this data every day for two years. And every time they update the new report, they say that these numbers can change to reflect any delays in reporting serious adverse events. This might be a little bit hard to explain. So the middle column that's highlighted in red is for cumulative serious adverse events only.

So every week or every month this report comes out, I noticed that these changed. I started having a really hard time tracking because I could say, "Well, if I remember correctly, it wasn't that the week before." And I would go back the week before and sure enough, I was correct. It wasn't that. So this was updated every report.

So the column in the middle here highlighted in red, I put it in a spreadsheet.

[Louise's spreadsheet, Monthly serious adverse event reports]

March 3rd, 2023. In the black highlighted one, those are all the numbers. So here in this one [previous slide, Figure 1] is January, February, March, April, and May down—and the numbers. The box in red [Figure 1] is this box in black [spreadsheet]. So every column in this spreadsheet represents an updated report.

[Louise's spreadsheet, Weekly serious adverse event reports]

From January 2021 to April 8th, 2022, these reports were weekly. Now, each column represents the updated numbers and the [yellow] coloured columns represent the number that changed from the week before. So it was pretty consistent from January 1st, 2021, to April 8th—all except for those three red columns—serious adverse events were updated to include these numbers. And some of them were quite high: 200 added in one report.

[Louise's spreadsheet, Breakdown of the monthly serious adverse event reports]

Then they went to monthly reports, and this is a breakdown of the monthly reports. Now on the left-hand side is April 1st [2022], and these are the first monthly reports. Again, each column represents one month's updated data, the historical data. Now from April 1st, May, June, July and August 19th, those numbers continued. Those are serious adverse events that were added or updated in the historical reports.

On August 19th, something really strange happened.

[Louise's spreadsheet, Enlarged monthly vaccine serious adverse event reports, red columns]

From August 19th [2022] to March 3rd [2023], most recently, these numbers started to be updated and these are the numbers [red columns] of serious adverse events that were—removed—from these historical reports.

[00:30:00]

[GoC, Health InfoBase, Vaccine Safety Report, Figure 2. Serious adverse events, up to and including March 3, 2023]

This one here is a little bit further down on the same report. This is the breakdown of the vaccine doses: the serious adverse events by vaccine and dose number.

[GoC, Health InfoBase, Vaccine Safety Report, Figure 1. Text Description, Serious adverse events, up to and including March 3, 2023]

This is the last vaccine adverse event report that was updated March 3rd, 2023. Now for all doses administered that month, the serious adverse event reporting rate was 36.83 per 100,000 doses administered. That equals one serious adverse event for every 2,715 doses administered. That was for the most recent month. I'm not an expert; I'm not a

vaccinologist or a doctor. I don't know what "safe" is. But one serious adverse event in 2,715 doses administered. I'm not getting that.

That wasn't a one-time event either.

[GoC, Health InfoBase, Vaccine Safety Report, Serious adverse events up to and including November 11, 2022]

So this is the report for November 11th [2022] and these are the updated historical numbers for January 8th [2021]. And that's even more. So the reporting rate of 37.57 per 100,000 doses administered, that equates to one . . . [connection lost] [in] 1,715. The first month of the report of the vaccine rollout was one in 2,661.

Now these aren't the original numbers reported.

[GoC, Health InfoBase, Vaccine Safety Report, Serious adverse events reported for January 8, 2021]

So for January 8th, 2021, these are the original numbers that were reported. So 10 serious adverse events in the middle in the top chart, and 338,423 doses administered. This equates to one serious adverse event for every 33,842 doses administered. That could be "safe," I'm not sure.

[GoC, Health InfoBase, Vaccine Safety Report, Serious adverse events reported up to and including November 11, 2022]

But one year and 44 weeks later, the number of serious adverse events, the first arrow, tripled to 31, and the cumulative number of doses administered dropped by, I believe it was around 255,000 doses. So we went from one serious adverse event every 33,842 doses administered to one serious adverse event for every 2,661 doses administered.

Shawn Buckley

For the same reporting period.

Louise MacDonald

Yeah. So this goes back to how many were added since the original report. And, like I said, basically, it took one year and 44 weeks to have the last serious adverse event that happened on the first month of the vaccine rollout to be documented. This again, is not a one-time event.

Shawn Buckley

Can I ask—

Louise MacDonald

Sorry?

Shawn Buckley

You had spoken earlier and showed us some charts. You've told us how numbers get added. So let's say for January 2021. If they're reporting in February of 2021, let's say they have—I'm just making figures up—they have a hundred cases. I can understand that as the year goes by that cases that haven't been processed or were held up in the provincial side trickle

in and so that the number goes up. But what I don't understand is you've been talking about some numbers going down and that doesn't make sense. How do reports get pulled out that had been . . .? [connection lost]

Louise MacDonald

Subtracted? All I know is that this is the data.

[00:35:00]

Up until August 19th [2022], they were added. And then, after August 19th, the cumulative number of serious adverse events started to decline, right up until the last report.

Shawn Buckley

Right, so the total number was higher in August of 2022 than it is in March of 2023.

Louise MacDonald

That's right, yeah.

Shawn Buckley

And no explanation by Health Canada as to why they removed reports.

Louise MacDonald

No, no. Why they were added— Well, obviously, they said that the numbers in the historic reports will change to reflect any delays in reporting in the previous weeks, but there's been delays. . .

Shawn Buckley

Well, like I say, I can understand the numbers going up because of delay. But I can't see the numbers going down because of delay. That's what's confusing me.

Louise MacDonald

Well, it confuses me, too. I don't know why. I don't know why it is. But these are just the numbers. I'm just reporting what the Canadian government is releasing. So how they're subtracting them, I don't know. Again, like I said, it's not a one-time event.

[GoC, Health InfoBase, Vaccine Safety Report, Serious adverse events for Feb 12, 2021, up to and including March 12, 2021]

These are the original numbers reported for February, which is the second month of the vaccine rollout. The serious adverse event reporting rate was 22.86. Now, that still to me seems a little bit high. It equals one serious adverse event on average for every 4,374 doses administered.

[GoC, Health InfoBase, Vaccine Safety Report, Serious adverse events for Feb 12, 2021, up to and including February 11, 2022]

Now, one year later, the serious adverse event reporting rate more than doubled. It is now 50.83. So these were added on to the original reports. A reporting rate of 50.83 is the

equivalent of, on average, one serious adverse event in every 1,967 doses administered. That's all vaccines.

[GoC, Health InfoBase, Vaccine Safety Report, archived page, Serious adverse events up to and including July 23, 2021]

This will be the last one for the change. So July 23rd, 2021, the original cumulative total of serious adverse events was 2,672.

[GoC, Health InfoBase, Vaccine Safety Report, Serious adverse events, up to and including August 19, 2022]

And one year and four weeks later, on August 19th, 2022, that number is now 4,283. That's an additional 1,6[11]. . . . [connection lost]

Shawn Buckley

Louise, you just froze. We'll just give a sec to see if Zoom catches up with us. So we've actually had our technical difficulties today, and usually they begin in the morning. So today, at the end of the day.

I'll just ask David, Do we still have internet? For those watching, we're just doing a reconnect. We're almost done with this witness, but we'll see if we can log her back in and finish her evidence.

Okay, so are we still online? Okay, so we've lost the ability to have Wi-Fi, so we've lost this witness. I think, fortunately, we were close to the end, but we'll just wait another moment to see if we can get her back as the commissioners might have had some questions.

And there we go. Louise, we had some internet problems at our end and you had just frozen. We lost you for a little bit. Now, we've run out of time, so I'm wondering if there's something important for you to sum up. And then I'll see if the commissioners have some questions for you.

Louise MacDonald

Yeah, I'm almost done.

Shawn Buckley

Okay.

Louise MacDonald

[Louise's Chart, Time it took to document last serious adverse event (AEFI)]

Okay, this shows how long it took to document serious adverse events. So from January to August [2021], it was over a year,

[00:40:00]

up to one year and 44 weeks, to document a serious adverse event. If it's taking that long to document them, how can any safety issue be triggered that they're unsafe?

[GoC, List of authorized drugs, vaccines and expanded indications for COVID-19]

May 11, 2022, the Janssen, Johnson & Johnson's vaccine, was authorized for a first booster dose ... [connection lost]

[GoC, Health InfoBase, Vaccine Safety Report, Serious adverse events, up to and including April 29, 2022]

... 888 doses administered. Two weeks later, that vaccine's authorized as a booster dose [See previous slide, List, May 11, 2022]. Like I said, if it's taking a year to document serious adverse events, then it's just mind-blowing. I'll pass that one; we don't need that.

[Louise's spreadsheet, Updated adverse events before and after August 19, 2022]

So this is the last screenshot. This is from January 2021 up until March 3rd, 2023. It shows the numbers that were updated that are yellow to August 19th. And then after that [a decline in numbers in red]. These are still on the website. If you want to, you can check all this stuff.

[Louise's spreadsheet, enlarged, blue column, November 11 and December 9]

And the last thing. November 11th and December 9th was the only report where there was no serious adverse events added or removed [blue column].

Shawn Buckley

Okay. So thank you for that presentation. I'll ask the commissioners if they have any questions.

Louise MacDonald

You're welcome. Yeah.

Shawn Buckley

And there are questions.

Louise MacDonald

I would imagine.

Commissioner Massie

Well, where to start? Thank you very much for your presentation. I will have to probably go back to it in order to get a better picture. But one of the things that I notice in your analysis is, well, first there's a lag in reporting. Sometimes, it goes up and down. We don't know why.

Louise MacDonald

Yep.

Commissioner Massie

Do you expect to get a final picture on what the number will be or do you see lately that it's still fluctuating?

Louise MacDonald

I could give you my opinion. But this is two-and-a-half years of 8 hours to 12 hours a day of studying these. I have tens of thousands of screenshots of this data. Like I said, I'm not an expert. But to me, it shows that they underreported serious adverse events and delayed up to one year. It took one year and 44 weeks to document a serious adverse event. How can any serious adverse event be triggered if it's taking a year to document them? Obviously with these numbers, approving a vaccine for a booster dose when you get one serious adverse event for every 888 doses administered, I just don't know what to say.

How can they be approving them with that safety record? If they're taking one year, 44 weeks to document, how can a safety issue be triggered?

Commissioner Massie

My other question has to do with the AstraZeneca vaccine that has been removed in many places because the serious adverse event was deemed to be too high.

Louise MacDonald

Yeah.

Commissioner Massie

It's very difficult to pinpoint the exact number, but I thought the number that I've seen, at least from Europe, was like much, much higher than this one in 888 that you're mentioning for J&J, so—

Louise MacDonald

No, no, that was Janssen's, the 188.

Commissioner Massie

Yeah, but I'm talking about, if that's the number that they are using to recommend a booster for J&J, and the number for AstraZeneca was way lower than that when they removed it . . .

[00:45:00]

Louise MacDonald

Yeah.

Commissioner Massie

I fail to see the rationale or the scientific basis to make that kind of a recommendation.

Louise MacDonald

Well, if they're making the recommendation and the serious adverse events haven't been reported yet because it's taking a year to report them, then— I seriously, I just don't know what to say. It shouldn't be taking over a year to document serious adverse events. . . [connection lost] . . . so this is administered.

But the Janssen's vaccine, which is one serious adverse event in 888 doses administered: there never should have been a second, third, fourth or fifth dose administered. But because the delay in documenting these serious adverse events is up to a year and 44 weeks, that's why it's being allowed or being approved. They're not documenting the serious adverse events when they happen.

Commissioner Massie

We've seen from another presentation that there's been, I would say, measures put in place to increase the rate of vaccination by partnering with pharmacy and giving bonuses to doctors in order to accelerate that. If we measure the rate of vaccination we accomplish in Canada, we can see it's a success. I mean, we get a fairly high rate of vaccination in Canada, probably due to the—I would say—efficient deployment of all of these measures that have been put in place to accelerate that.

In order to get the number that you spend thousands of hours to compute and maybe get a more on-time, I would say, assessment of the safety of the vaccine: Could you recommend something that could have been done in order to get to these numbers on a more regular basis?

Louise MacDonald

Well, yeah. Don't threaten doctors with their jobs for speaking out about vaccine injuries. If a vaccine injury comes through, put it through. They should all go through. One hundred per cent of vaccine injuries should be recorded. And apparently, if I'm not mistaken, do they not have to be—a serious adverse event has to be reported . . . [connection lost] . . . Story after story of doctors being fired for reporting adverse events. If these are the numbers that they are reporting, I would hate to see if 100 per cent of the vaccine injuries were documented.

Commissioner Massie

Thank you very much.

Louise MacDonald

You're welcome.

Shawn Buckley

Louise, I'll just indicate before any other questions that you live—for the commissioners and people watching—in the Maritimes. When you're talking about hearing reports of doctors being fired for submitting adverse reports, that's in the Maritimes area.

Louise MacDonald

Yeah, well, I know Chris Milburn was . . . [lost connection] . . .

Shawn Buckley

[Missing words] . . . have any other questions.

Louise MacDonald

Thank you.

Shawn Buckley

You know, Louise, they don't have any further questions. But you've spent a lot of time and you've screen-captured a lot of information. I'm going to suggest that you maybe—you and somebody else—figure out some way of collating and making that available for other researchers.

Louise MacDonald

Oh, I will. I actually have every vaccine safety report,

[00:50:00]

every number, every vaccine by dose number, every case by vaccination status report, all in Excel spreadsheets.

Shawn Buckley

That's quite incredible. I'm just suggesting that you could be of great service to making a point of making that public and available.

Louise MacDonald

I've been trying to make it public and available. But I keep getting my social media accounts shut down for misinformation for reporting the Canadian government reports on vaccine injuries.

Shawn Buckley

Well, now we know what to think of government reports.

Louise, there'll be no further questions. On behalf of the National Citizens Inquiry, I want to thank you dearly for attending and—

Louise MacDonald

Thank you very much for having me.

Shawn Buckley

And thank you for all the research you've done. One of the things that we've been trying to do is to encourage people to take action. And you, for the last two years, have wanted to dig down and discover some truth. You've been of great service, so I just want to thank you for that.

Louise MacDonald

Okay, thank you, and I will. It's literally tens of thousands of data that I will have to find a way to have—

I will send them to you. And somehow, I'll get them documented on the NCI website [Exhibits OT-7 to OT-71].

Shawn Buckley

Thank you.

Louise MacDonald

Thank you very much for giving me the opportunity to share this.

Shawn Buckley

Thank you, Louise.

Louise MacDonald

Okay.

[00:51:35]



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The evidence offered in this transcript is a true and faithful record of witness testimony given during the National Citizens Inquiry (NCI) hearings. The transcript was prepared by members of a team of volunteers using an “intelligent verbatim” transcription method.

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