

Exhibit 144

VAERS Adverse Events - Reproductive

Dr. Jim Thorp

“There are new very concerning pharmacovigilance signals from VAERS surrounding the use of COVID-19 vaccines in women of reproductive age. COVID-19 vaccines compared to the influenza vaccines are associated with increases in menstrual disorders, miscarriage, fetal chromosomal abnormalities, fetal cystic hygroma, fetal malformations, fetal cardiac arrest, fetal cardiac arrhythmias, fetal cardiac disorders, fetal vascular mal-perfusion abnormalities, abnormal fetal surveillance testing, abnormal fetal growth patterns, placental thrombosis and fetal death. All of these adverse outcomes are statistically significant (p value < 0.0001) – in other words the probability of these adverse outcomes occurring by chance alone is less than 1 in 10,000. It was incumbent upon the COVID-19 vaccine manufacturers, FDA, CDC, American College of Obstetrics and Gynecology, Society for Maternal Fetal Medicine and American Board of Obstetrics and Gynecology to have demanded this safety data prior to pushing these dangerous “vaccines” in pregnancy. These institutions have violated the golden rule of pregnancy: new substances be it nutraceuticals, drugs, or vaccines have NEVER been allowed in pregnancy until long-term outcome data are available. Now, the COVID-19 vaccines make prior obstetrical disasters of diethyl stilbesterol (DES) and thalidomide look like prenatal vitamins. I am calling for a world-wide ban and moratorium on the use of any experimental gene therapy and/or COVID-19 “vaccines” in pregnancy until long-term safety data are irrefutable.”

James A Thorp MD

Here are the findings from the VAERS database analytics and these have been confirmed by a statistical consultant. All these odds ratios are statistically significant ($p < 0.0001$).

Abnormal uterine bleeding (menstrual irregularity) is 1000-fold greater.

Miscarriage is 50-fold greater.

Fetal chromosomal abnormalities are 100-fold greater.

Fetal malformation is 50-fold greater.

Fetal cystic hygroma (a major malformation) is 90-fold greater.

Fetal cardiac disorders are 40-fold greater.

Fetal arrhythmia is 50-fold greater.

Fetal cardiac arrest is 200-fold greater.

Fetal vascular mal-perfusion is a 100-fold greater.

Fetal growth abnormalities are 40-fold greater.

Fetal abnormal surveillance tests are 20-fold greater.

Fetal placental thrombosis is 70-fold greater

Fetal death (stillbirth) is 35-fold greater