January 12, 2022

Dear Dr. George Wendel and my other esteemed ABOG colleagues,

I appreciate your willingness to dialogue with me. As you know, I have previously expressed my concerns, now shared by a number of my colleagues, regarding (1) the safety of the COVID-19 experimental mRNA and DNA gene therapy injections in pregnancy, and (2) ABOG's disconcerting September 2021 *Statement Regarding Dissemination of COVID-19 Misinformation*, which has blatantly threatened constituents with revocation of their medical license for "providing misinformation about the COVID-19 vaccine."[1] As a 40-plus year member in good standing of ABOG – an organization I have always held in high esteem – I can genuinely say that the intimidating nature of ABOG's September 2021 *Statement Regarding Dissemination of COVID-19 Misinformation* is heretofore unprecedented.

Couched in bullying language, ABOG's *Statement Regarding Dissemination of COVID-19 Misinformation* begs critically important questions for both constituents and patients alike. These questions are intrinsic to a physician's ability to treat patients free from conflict of interest over fear of reprisal from ABOG (or others). Even more important, these questions concern matters essential to safeguarding and protecting maternal and fetal health and well-being, and are essential to upholding the physician's oath to do no harm. First, what constitutes that which ABOG deems "misinformation about the COVID-19 vaccine"? Second, by whom and how is such "misinformation about the COVID-19 vaccine" determined?

ABOG's *Statement Regarding Dissemination of COVID-19 Misinformation* fails to provide answers to these questions and also fails to acknowledge the growing body of scientific, peer-reviewed evidence that the experimental mRNA and DNA gene therapy injections are a failed strategy that have killed, injured, and endangered many. ABOG's widely circulated *Statement Regarding Dissemination of COVID-19 Misinformation* has placed patients' health in jeopardy while leaving constituents holding the proverbial bag as their medical license and livelihood hang in the balance. Patient safety is sacrificed as constituents toe the line – forced to choose between pushing experimental gene therapies shown to be dangerous to both mom and fetus or lose their livelihoods.

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[1] American Board of Obstetrics and Gynecology (ABOG), *Statement Regarding Dissemination of COVID-19 Misinformation*, Jan. 27, 2021 https://www.abog.org/about-abog/news-announcements/2021/09/27/statement-regarding-dissemination-of-covid-19-misinformation.Specifically, ABOG's statement warns, in pertinent part:

> The American Board of Obstetrics and Gynecology (ABOG) fully supports the statement published by the Federation of State Medical Boards (FSMB) that asserts that *providing misinformation about the COVID-19 vaccine contradicts physicians' ethical and professional responsibilities, and therefore may subject a physician to disciplinary actions, including suspension or revocation of their medical license.* Additionally, ABOG supports a recent American Board of Medical Specialties (ABMS) statement, which expresses concern regarding the serious public health effects of the persistent spread of misinformation regarding the COVID-19 virus. (Emphasis supplied).

ABOG's *Statement Regarding Dissemination of COVID-19 Misinformation* turns a blind eye to this ever-growing evidence and dodges these thorny issues by pointing to published statements made by the Federation of State Medical Boards (FSMB)[2] and the American Board of Medical Specialties (ABMS).[3] However, upon further examination, neither the FSMB nor the ABMS provides adequate answers. If anything, the express collaboration of ABOG with the FSMB and ABMS, together with the language of the FSMB's and ABMS's individual statements, raises red flags about potential collusion, bias, and conflicts of interest within the various medical stakeholders, Big Tech, and the media.

Following ABOG's "Yellow Brick Road": The Federation of State Medical Boards (FSMB)

ABOG's *Statement Regarding Dissemination of COVID-19 Misinformation* first points to the definition provided by the Federation of State Medical Boards (FSMB) for answers. However, the FSMB fails to provide any clear answers to what constitutes "misinformation about the COVID-19 vaccine", or how such "misinformation" is to be determined, or by whom. Instead of providing answers, the FSMB launches accusations, stating that there has been "a dramatic increase in the dissemination of COVID-19 vaccine misinformation and disinformation by physicians and other health care professionals on social media platforms, online and in the media."[4] The FSMB further notes that physicians "have an ethical and professional responsibility to practice medicine in the best interests of their patients and must share information that is factual, scientifically grounded and *consensus-driven* for the betterment of public health."[5]

But exactly what information is "factual, scientifically grounded and consensus-driven for the betterment of public health?" After all, the stakes for all humanity in getting this right could not be higher. And perhaps more importantly, who is the arbiter of such information? While the FSMB does little to define "COVID-19 vaccine misinformation", it does seem to suggest that somewhere, somehow, a certain "consensus" exists on what narrative *should* prevail, perhaps giving clues as to whose interests this prevailing narrative should serve. Toward that end, the FSMB statement's express reference to "social media platforms" and mainstream "media" is highly disturbing, particularly in light of alleged ties between the mainstream media outlets, social media giants, and Pfizer, suggesting (at a minimum) serious conflicts of interest.[6] Disconcertingly, the FSMB statement seems to give the appearance it has communicated – if not

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[2] Federation of State Medical Boards (FSMB), *FSMB: Spreading COVID-19 Vaccine Information May Put Medical License at Risk*, July 29, 2021, https://www.fsmb.org/advocacy/news-releases/fsmb-spreading-covid-19-vaccine-misinformation-may-put-medical-license-at-risk/.

[3] American Board of Medical Specialties (ABMS), *ABMS Issues Statement Supporting Role of Medical Professionals in Preventing COVID-19 Misinformation*, September 13, 2021, https://www.abms.org/news-events/abms-issues-statement-supporting-role-of-medical-professionals-in-preventing-covid-19-misinformation/ .

[4] FSMB, https://www.fsmb.org/advocacy/news-releases/fsmb-spreading-covid-19-vaccine-misinformation-may-put-medical-license-at-risk/.

[5] Id. (Emphasis supplied).

[6] Megan Renshaw, "Conflict of Interest: Reuters 'Fact Checks' COVID-Related Social Media Posts, But Fails to Disclose Ties to Pfizer, World Economic Forum," *The Defender: Children's Health Defense News and Views*, August 11, 2021, https://childrenshealthdefense.org/defender/reuters-fact-check-covid-social-media-pfizer-world-economic-forum/ .

possibly even conspired with – Big Tech and the mainstream media to somehow root out what they collectively deem "misinformation."

Following ABOG's "Yellow Brock Road": The American Board of Medical Specialties (ABMS)

ABOG's *Statement Regarding Dissemination of COVID-19 Misinformation* next points to the American Board of Medical Specialties (ABMS) for answers regarding what constitutes "misinformation about the COVID-19 vaccine." At first glance, the ABMS statement and definition of misinformation seems just as fuzzy as the statement provided by the Federation of State Medical Boards (FSMB). Up front, however, the ABMS identifies "vaccine hesitancy" as the real culprit – explicitly linking misinformation with vaccine hesitancy. [7] Evidently, any information that does not push mass vaccination with experimental gene therapy on all persons constitutes COVID-19 vaccine misinformation, and could "threaten certification by an ABMS Member Board."[8] Interestingly, the ABMS has attempted to frame its statement on COVID-19 misinformation as one that is *supportive* of medical professionals, titling its press release as follows: *ABMS Issues Statement Supporting Role of Medical Professionals in Preventing COVID-19 Misinformation*. Yet the ABMS' threats contained within the press release do not logically follow from these words.

Euphemisms, Intimidation, and Gaslighting, Oh My!

Since ABOG itself has declined to define "misinformation about the COVID-19 vaccine," deferring instead to other medical agencies, I will kindly attempt to offer one for ABOG's consideration. Following the lead of Robert J. Kennedy, Jr., the phrase "misinformation about the COVID-19 vaccine" seems to be "a euphemism" for any statement or scientific evidence that differs from the prevailing narrative of stakeholders who most stand to profit from the COVID-19 vaccines. [9] In this case, these stakeholders appear to include Big Tech,

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[7] ABMS, *https://www.abms.org/news-events/abms-issues-statement-supporting-role-of-medical-professionals-in-preventing-covid-19-misinformation/* . The ABMS states in pertinent part,

> **Misinformation has been directly linked to much of the vaccine hesitancy** and disregard for practical safeguards against infection, including masking and distancing, and is a contributing factor hindering national efforts to combat the virus" (emphasis supplied).

[8] ABMS, *https://www.abms.org/news-events/abms-issues-statement-supporting-role-of-medical-professionals-in-preventing-covid-19-misinformation/* .

[9] In an open letter to Dr. Sanjay Gupta published on April 16, 2020, Robert F. Kennedy, Jr., cogently defines COVID-19 vaccine misinformation as "a euphemism for any statement that departs from the Government / Pharma orthodoxy that all vaccines are safe necessary and effective for all people." © May 9, 2020, *Children's Health Defense, Inc*. "Flu Misinformation and Coronavirus Fears: My Letter to Dr. Sanjay Gupta," Robert J. Kennedy, Jr., https://childrenshealthdefense.org/news/flu-misinformation-and-coronavirus-fears-my-letter-to-dr-sanjay-gupta/ . It should be noted that Robert J. Kennedy, Jr.'s letter was recently brought to my attention by Steve Kirsch's Newsletter, "Who is the real misinformation spreader: RFK Jr of Sanjay Gupta?" Steve Kirsch, Jan. 11, 2021, https://stevekirsch.substack.com/p/who-

Government, the Pharmaceutical Companies, Big Media, and various Corporate and Medical Stakeholders. These are the stakeholders who drive the "consensus" referred to by the FSMB.[10] Perhaps not coincidentally, these are the very stakeholders that are attempting to drive the false narrative that vaccines are safe, effective, and necessary for all persons, including pregnant persons.[11] As it turns out, there is no real definition for "COVID-19 vaccine misinformation" – or real answer to my first question. The phrase "COVID-19 vaccine misinformation" constitutes a euphemism. Euphemisms don't create meaning, they disguise it, and have thus been referred to "the language of evasion, hypocrisy, prudery, and deceit (Holder 2008)".[12]

Gaslighting has been described as "an insidious form of manipulation and psychological control" where victims are "deliberately and systematically fed false information that leads them to question what they know to be true."[13] Gaslighting occurs when "an abuser tries to control a victim by twisting their sense of reality."[14] The abuser or bully misleads their target, creating a false narrative and making them question their judgments, reality, and perception.[15] When the victim calls out the gaslighting, the abuse will frequently try to discredit their victim. When

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is-the-real-misinformation-spreader?utm_source=substack&utm_medium=email&utm_content=share&token=eyJ1c2VyX2lkIjo2OTY3MDg3OCwicG9zdF9pZCI6NDY5NjY4MjEsIl8iOiJxUThNaSIsImlhdCI6MTY0MTk2MzEwMCwiZXhwIjoxNjQxOTY2NzAwLCJpc3MiOiJwdWItNTQ4MzU0Iiwic3ViIjoicG9zdC1yZWFjdGlvbiJ9.-RzqbFPzOn3-XmO3z-VjIb_gtDn65DX3rEQ4DUAaTOQ .

[10] FSMB, https://www.fsmb.org/advocacy/news-releases/fsmb-spreading-covid-19-vaccine-misinformation-may-put-medical-license-at-risk/ . The FSMB expressly notes that constituents must only share information that is both "scientifically grounded and c**onsensus-driven for the betterment of public health**." (Emphasis supplied.)

[11] © May 9, 2020, *Children's Health Defense, Inc*. "Flu Misinformation and Coronavirus Fears: MY Letter to Dr. Sanjay Gupta," Robert J. Kennedy, Jr., https://childrenshealthdefense.org/news/flu-misinformation-and-coronavirus-fears-my-letter-to-dr-sanjay-gupta/. In his open letter to Dr. Sanjay Gupta published on April 16, 2020, Robert F. Kennedy, Jr., defines COVID-19 vaccine misinformation as "a euphemism for any statement that departs from the Government / Pharma orthodoxy that all vaccines are safe necessary and effective for all people." Robert J. Kennedy, Jr.'s letter was brought to my attention by Steve Kirsch, "Who is the real misinformation spreader: RFK Jr of Sanjay Gupta, https://stevekirsch.substack.com/p/who-is-the-real-misinformation-spreader?utm_source=substack&utm_medium=email&utm_content=share&token=eyJ1c2VyX2lkIjo2OTY3MDg3OCwicG9zdF9pZCI6NDY5NjY4MjEsIl8iOiJxUThNaSIsImlhdCI6MTY0MTk2MzEwMCwiZXhwIjoxNjQxOTY2NzAwLCJpc3MiOiJwdWItNTQ4MzU0Iiwic3ViIjoicG9zdC1yZWFjdGlvbiJ9.-RzqbFPzOn3-XmO3z-VjIb_gtDn65DX3rEQ4DUAaTOQ , published Jan. 11, 2022.

[12] "Why Do We Use Euphemisms? Words of Comfort and Words of Deceit," ThoughtCo., https://www.thoughtco.com/why-do-we-use-euphemisms-1692701 .

[13] "Gaslighting," *Psychology Today*, https://www.psychologytoday.com/us/basics/gaslighting.

[14] Ashley Laderer, "How to Spot Gaslighting: 6 Things that Gaslighters Say to Manipulate You," Insider: Health, July 23, 2021, https://www.insider.com/gaslighting-examples.

[15] Sherri Gordon, "What is Gaslighting?" VeryWellMind, Jan. 5, 2022. https://www.verywellmind.com/is-someone-gaslighting-you-4147470 .

dealing with someone who is gaslighting, it is advised to pay close attention to what the abuser actually does, instead of the words they use.[16]

ABOG's *Statement Regarding Dissemination of COVID-19 Misinformation* is nothing short of gaslighting. ABOG's statement professes to encourage constituents to "practice evidence-based medicine based on facts and scientific data."[17] ABOG's statement also adopts the FSMB's position that its physicians "have an ethical and professional responsibility to practice medicine in the best interests of their patients and must share information that is factual, scientifically grounded and consensus-driven for the betterment of public health."[18] ABOG has expressed a concern for protecting patients from harm. While ABOG's words express concerns about patient safety and stress the importance of scientific data, ABOG turns a blind eye to applying the best available scientific evidence and protecting patients from the dangers of experimental vaccines, all while threatening the medical license of constituents who challenge the prevailing narrative. The foregoing is a classic example of gaslighting. Despite its words, ABOG's threatening conduct tells a different story.

Exposing the Wizard: "I'm really a very good man; but I'm a very bad Wizard, I must admit"[19]

ABOG is not alone. Gaslighting has never before occurred as widely as it has during the COVID pandemic, with the pushing of experimental gene injections as the only effective, safe, and necessary option for all persons, even pregnant persons. ABOG, you have a golden opportunity to reverse course, taking a stance that is factual and scientifically grounded, and true to your words purporting to protect patients from harm – by retracting and revising your *Statement Regarding Dissemination of COVID-19 Misinformation*. Will you have the courage to do it? As an organization that professes to care about patients' interests and safety, you may want to peruse the many testimonies of the vaccine injured on Real, Not Rare.[20] If you do, you will find the stories of many who have suffered serious, life-altering adverse effects from the experimental injections, almost all of which share remarkably similar characteristics and symptoms. These vaccine injuries appear to be vastly under-reported. Those who have the courage to come forward are frequently called crazy and accused of mental illness, thus enduring gaslighting by doctors, who often refuse to believe them. ABOG, instead of hiding behind euphemisms, false narratives, and other medical organization's euphemistic verbiage, you can choose to take a bold stand for your patients and constituents and lead the way to exposing what is really going on. Will you do it? The EU in recent days has taken a bold step in this direction –

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[16] Sherri Gordon, "What is Gaslighting?" https://www.verywellmind.com/is-someone-gaslighting-you-4147470 .

[17] ABOG, https://www.abog.org/about-abog/news-announcements/2021/09/27/statement-regarding-dissemination-of-covid-19-misinformation .

[18] ABOG, https://www.abog.org/about-abog/news-announcements/2021/09/27/statement-regarding-dissemination-of-covid-19-misinformation , linking to FSMB, https://www.fsmb.org/advocacy/news-releases/fsmb-spreading-covid-19-vaccine-misinformation-may-put-medical-license-at-risk/.

[19] Quote from "The Wizard of Oz."

[20] realnotrate.com.

warning that boosters risk adverse effects to the immune system and may not be warranted.[21] And a top Israel immunologist has recently followed suit, calling on its leaders at the Israeli Ministry of Heath to admit that the mass vaccination campaign has failed in Israel.[22]

There is an undeniable and growing body of peer-reviewed scientific evidence that these experimental gene therapy injections are unsafe and dangerous to both mothers, fetuses, newborns and infants. Indeed, since the publication and dissemination of ABOG's *Statement Regarding Dissemination of COVID-19 Misinformation*, the Johnson & Johnson injection is no longer recommended for use after life-threatening blood clots and deaths have been linked to the injection.[23] This growing body of evidence credibly and scientifically calls into question the efficacy of these experimental gene therapeutic injections. As unprecedented numbers of new infections now make painfully clear, the experimental injections are proving to be wholly ineffective at preventing infection of the Omicron strain, the current dominant strain in the US. Multiple recent studies indicate that the vaccinated are more likely to be infected with Omicron than the unvaccinated. For example, numbers in a recent study from Denmark now show persons who received the experimental injections are up to 8 times more likely to develop Omicron that those persons who did not.[24] Multiple independent studies indicate that the more one vaccinates, the more one becomes susceptible to COVID-19 infection.[25] Recent studies also suggest that the COVID-19 gene therapy injections cause more COVID cases per million and more deaths per million associated with COVID.[26] Studies which show the experimental injections to be neither safe nor effective, but outright dangerous, are almost too numerous to count. Patient's own brave testimonies on such sites as on Real, Not Rare, are heartbreaking. Continuing to require your constituents to push experimental COVID-19 gene therapy injections on patients in light of mounting evidence that they are neither safe nor effective is ignoring science and placing patients in grave danger. ABOG's pushing the narrative that the experimental injections are safe and effective in the face of such evidence amounts to an egregious false misrepresentation and an intentional failure to disclose the truth to patients.

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[21] Reuters, "EU Drug Regulator Expresses Doubt on Need for Fourth Booster Dose," Jan. 11, 2022, https://www.reuters.com/business/healthcare-pharmaceuticals/eu-drug-regulator-says-more-data-needed-impact-omicron-vaccines-2022-01-11/ .

[22] Steve Kirsch, "Top Israeli Immunologist Criticizes Pandemic Response in Open Letter," Jan 13, 2022, Steve Kirsch's Newsletter, https://stevekirsch.substack.com/p/top-israeli-immunologist-criticizes?r=15hae6&utm_campaign=post&utm_medium=email .

[23] Berkeley Lovelace Jr. and Sara G. Miller, "CDC Recommends People not get J&J vaccine if Pfizer, Moderna are Available," *NBC News*, Dec. 16, 2021, https://www.nbcnews.com/health/health-news/cdc-panel-recommends-people-not-get-jj-vaccine-pfizer-moderna-availabl-rcna8987 .

[24] Steve Kirsch, "New Studies Show that the COVID Vaccines Damage your Immune System, Likely Permanently," Steve Kirsch's Newsletter, Dec. 24, 2021, https://stevekirsch.substack.com/p/new-study-shows-vaccines-must-be

[25] Steve Kirsch, "Pfizer CEO says Two Covid Vaccine Doses Aren't Enough for Omicron," Steve Kirsch's Newsletter, Jan. 10, 2022, https://stevekirsch.substack.com/p/pfizer-ceo-says-two-covid-vaccine

[26]Hannah Ritchie, Lucas Rodes-Guirao, Edouard Mathieu, et al, "Worldwide Bayesian Causal Impact Analysis of Vaccine Administration on Deaths and Cases Associated with COVID-19: A Big Data Analysis of 145 Countries," Nov. 15, 2021, https://vector-news.github.io/editorials/CausalAnalysisReport_html.html

If ABOG truly cared about encouraging the practice of "evidence-based medicine based on facts and scientific data" and "acting in your patients' bests interests" – as it claims in its *Statement Regarding Dissemination of COVID-19 Misinformation* – then it would retract its statement and the threats issued to its constituents. ABOG would welcome and consider independent, unbiased scientific data which seek to challenge the safety and efficacy of the gene therapy injections. ABOG would be willing to challenge the prevailing stakeholder consensus/orthodoxy/narrative that the experimental injections are safe, effective, and necessary. For ABOG to do less than the foregoing, while at the same time professing to care about science and patient safety, is nothing short of gaslighting.

Changing Course?

It is my desire to work with you, not against you, and assist to reverse the dangerous course that ABOG has taken. I believe that ABOG's current course is headed for extreme and unparalleled disaster with untold human lives at stake. I would offer my services to you on a *pro bono* basis and I think we could begin to work through these pressing issues that have threatened the care of women of reproductive age, pregnant women, and their newborns and infants.

Two main issues require your immediate attention that would be best addressed in a formal statement to your constituents. First, the *Statement Regarding Dissemination of COVID-19 Misinformation* published on the ABOG website and circulated to ABOG's 22,000 plus specialists and subspecialists in September 2021 needs to be formally retracted. Second, ABOG needs to immediately specifically recommend *against* the vaccine in pregnancy until there are long-term safety data in the offspring. Experimental gene therapy in pregnancy is extremely radical and without historical precedent absent safety data. It is completely unnecessary as there are much safer alternatives for prevention of all viral illnesses. To push the experimental injections violates our Hippocratic oath of informed consent and *Primum Non Nocere.*

I know most of you. I feel confident that it is not your intent to issue unethical threats, gaslight, and act in contravention of mounting medical and scientific evidence casting serious doubt on the safety and efficacy of the experimental gene therapy injections. I believe it is not your desire to intentionally mislead and harm patients and fetuses, or destroy informed consent and the sanctity of the doctor-patient relationship. As a long-standing supporter of this distinguished organization, I find it difficult to believe that you personally created the language contained in your *Statement Regarding Dissemination of COVID-19 Misinformation.* Perhaps not coincidentally, this same language appeared and was published almost simultaneously by FSMB.org, ABMS.org, AANC.org, multiple other ABMS boards, the AMA, SMFM, ACOG, governmental and private organizations with ties to the pharmaceutical industry, the pharmaceutical industry itself, "Big Tech" companies, the mainstream media, multiple medical journals, insurance companies, and many others who have a financial or other stake in pushing the experimental gene therapies. For lack of a better term, I have collectively labelled the forgoing as a CARTEL, as this best describes the blatant conflicts of interest and collusion which lies at the heart of this language. If ABOG is truly "acting in patients' best interests," – as it proclaims to do – it should be fully committed to the health of its pregnant patients, not serving the interests of the pharmaceutical industry or any other organization. It was and is your

responsibility to resist and oppose this inappropriate language that was most likely pressed upon you by ABMS, FSMB and others.

Sir Karl Popper stated that academicians and science should always be open to divergent opinions, and the scientific method includes discussion of opposing minority opinions and views. Science progresses *only* by refutation. In fact, as history has demonstrated, absent the foregoing, there can be no true science at all. Galileo was persecuted because of his minority opinion that our solar system was heliocentric, not geocentric. Likewise, in the mid 1800's Ignaz Phillip Semmelweis opposed the mainstream narrative. He proved that the 50% maternal mortality at Vienna Lying in Hospital could be decreased simply by hand washing. However, he was mocked, derided, and persecuted by the 'ABOG-like authorities' of his time. Similarly, those of us who expressed concern and opposed the liberal use of opioids in the 1990's (including myself) in our patients were reprimanded; this greatly contributed to the major opioid crisis our country experienced, thus fulfilling the law of unintended consequences. These examples underscore what ABOG is currently doing to their constituents, and it is reaping unparalleled disaster.

ABOG's narrative is *not* evidence based. It was incumbent upon ABOG to have demanded safety studies WITH LONG TERM OUTCOMES *prior* to issuing their threatening language. It is not incumbent upon the vulnerable and innocent to prove that they have been harmed. ABOG is on the wrong side of truth and is forcing a false narrative that will be ultimately responsible for killing and injuring many more than they already have. ABOG has implemented a dangerous retrovirus gene therapy in pregnancy and in women of reproductive age with zero credible studies conducted on whether it is safe.

ABOG is obviously aware that there are multiple OB/GYN and Maternal Fetal Medicine 'experts' who have no credibility and no data as to safety, yet they are pushing this dangerous COVID-19 retrovirus gene therapy in pregnancy and in women of child-bearing age all over the US and the world. Any attempt to engage in informed consent and/or contradict the ABOG narrative comes with the very real risk of damaged professional careers and irrevocably lost livelihoods. Indeed, a national townhall meeting of two maternal fetal medicine physicians took place recently in Indianapolis with the sole purpose of pushing the experimental gene therapy on pregnant women across the nation. Both young MFM physicians were old enough to be my daughters and had a combined clinical experience/publications of only a small fraction of mine. Yet neither I nor any of my colleagues opposing this dangerous recommendation were allowed to participate and balance their outrageously absurd and dangerous presentations. There are so many doing the exact same thing because of professional threats which have been placed on the careers of doctors who oppose the false "safe and effective" narrative. This too is ABOG's fault.

The threats that you have circulated to all your specialist and subspecialists have resulted in the pushing of the experimental gene therapy injections in ***all*** women of reproductive age and pregnant women, with extremely serious consequences. There are multiple independent sources all over the world that have observed significant increases in miscarriage (spontaneous abortion), fetal death, fetal malformation, severe placental inflammation, severe IUGR, neonatal demise, infant demise, permanent newborn/infant/child chronic autoimmune diseases, permanent immune deficiency syndromes, chronic permanent CNS diseases and chronic cognitive

impairment, seizure disorders and the unleashing of neonatal / infant cancers and opportunistic infections, and many other disastrous consequences. Please understand and recognize it is not incumbent upon me to prove this to ABOG or anyone else; rather, it was incumbent upon those recommending it to show safety data *before* pushing this extremely dangerous experimental gene therapy in all pregnant women.

Animal studies clearly demonstrate that the lipid nanoparticles (LNP's) with their mRNA cargo pass through all God made barriers, including the blood brain barriers, the placental barrier, and the fetal blood brain barriers. It is also known that there is a very significant concentration of the LNP's in the maternal, fetal, and newborn ovaries. As you well know, a female fetus is born with all of its gametes (about 1 million ovum) in the ovaries and each is exposed to these potentially poisonous NLP's. It is now widely known and understood that the 'vaccine,' which is actually an experimental gene therapy, works by inducing inflammation. *Yet, inflammation in the developing embryo and fetus is a hallmark for permanent damage, malformation, death, placental insufficiency, and potentially life long chronic diseases in the offspring including severe immunological disturbances, disruption of the TOL7 and TOL8 receptors on cell membranes.* The disruption of the TOL7 and TOL8 receptors are responsible for immune surveillance and the suppression of cancers and opportunistic infections in the body including herpes, zoster, CMV, HPV, TB, toxoplasmosis and many others. Dr. Ryan Cole MD a highly acclaimed pathologist has noted a striking increase in newborn and infant cancers that are extremely rare. There are unprecedented numbers of stillbirth in the US, Canada, Scotland, Europe and many other locations. Scott Davison the CEO of OneAmerica insurance company has noted all-cause death rates are up 40% in ages 18-64 years; this is unprecedented and certainly not attributable to just COVID-19 but also to the experimental gene therapy that you have pushed. He notes that even a 10% rate of increase is catastrophic for the insurance industry. Life insurance companies are warning that there are nearly 100,000 excess deaths per month happening in all age groups in the USA and cannot be attributed to COVID-19.

It is also important for all of ABOG to recognize that they cannot defer this blame to ABMS, FSMB, AMA, ACOG, SMFM, AMA or any other medical organization. ABOG is responsible for all these consequences in pregnant women and women of childbearing age, since this is ABOG's jurisdiction. As you know, ABMS, FSMB, SMFM, ACOG, SMFM and AMA have *no* authoritative action; their recommendations and threats are 'teethless'. This is ABOG's jurisdiction, not the jurisdiction of SMFM, ACOG, AMA or any other of the organizations because they have no authority to threaten their constituents like ABOG has done to me personally and all the other ABOG specialists and subspecialists. As I served on the SMFM BOD for several years, I understand SMFM. They do not discipline their constituents. They are a social organization which provides education and specifically does *not* have the authority to sanction or call out constituents. All of the blame for the mass casualties can only lie with ABOG's decision to push the experimental gene therapy in reproductive age women.

As to safety, the Vaccine Adverse Event Reporting System (VAERS) alone has signaled that the experimental mRNA gene therapy is dangerous. While perhaps not perfect, this data simply cannot be ignored, denied, or derided by ABOG or any other organizations or treating physicians. VAERS is a statutorily-created safety surveillance tool created as an outgrowth of the National Childhood Vaccine Injury Act of 1986 (the "Act"). *See* 42 USC § 300aa-1 *et seq.*

Administered by the CDC and FDA, the creation of VAERS was essentially a *quid pro quo* arrangement for the blanket sovereign immunity given to the pharmaceutical companies for vaccine research and development. Under the Act, pharmaceutical companies are given full immunity from tort litigation arising out of injuries and damages relating to vaccines. However, physicians and organizations like ABOG are *not* similarly situated. Rather, under the Act, as the eyes and ears of patient care, physicians have an affirmative duty to report to adverse events, and VAERS has been deemed "the front line" of vaccine safety. As the 2000 Committee on Government Reform aptly noted:

> ***The Act does require that physicians report***—directly to VAERS or to the manufacturer—certain categories of serious outcomes defined for regulatory purposes as an event resulting in death, life- threatening illness, hospitalization, prolongation of existing hospitalization, or permanent disability.
>
> ***VAERS is intended to serve as the ''front line'' of vaccine safety****, since this type of national reporting system can rapidly document possible effects and generate early warning signals that can then be more rigorously investigated in focused studies.* ***VAERS is considered especially valuable in assessing the safety of newly marketed vaccines.***[27]

Physicians serve a critical reporting role in patient safety by virtue of this statutorily created reporting system. Failing to take seriously VAERS, which is the "front line' of vaccine safety, turning a blind eye to VAERS signal data, and/or pushing a false narrative in the face of VAERS evidence to the contrary flies in the face of those who took the oath, "first, do no harm." It smacks of serving the pharmaceutical interests over the patients' interests. Pushing the false narrative that the experimental COVID-19 mRNA gene therapies are safe and effective in pregnancy, when VAERS data clearly signals otherwise, constitutes a great and tragic ethical and moral failing by those tasked with being on the front lines of patient care and safety. It also falsely misrepresents the true data, and is not faithful to the stated mission of ABOG. It fails to disclose to unsuspecting patients that the safety of the experimental COVID-19 injections has been called into question, and thus both misrepresents and hides information that is material to the patients' decision. It is not unreasonable to ponder whether such egregious conduct and omissions could expose, physicians or physician entities such as ABOG, SMFM or ACOG to legal and/or even criminal liability at some point in the future. Unlike the pharmaceutical companies, there is no blanket immunity for ABOG and staff or physicians who are on the front lines of safeguarding the health of moms and fetuses.

The VAERS Data Has Signaled Warnings that Can No Longer be Ignored

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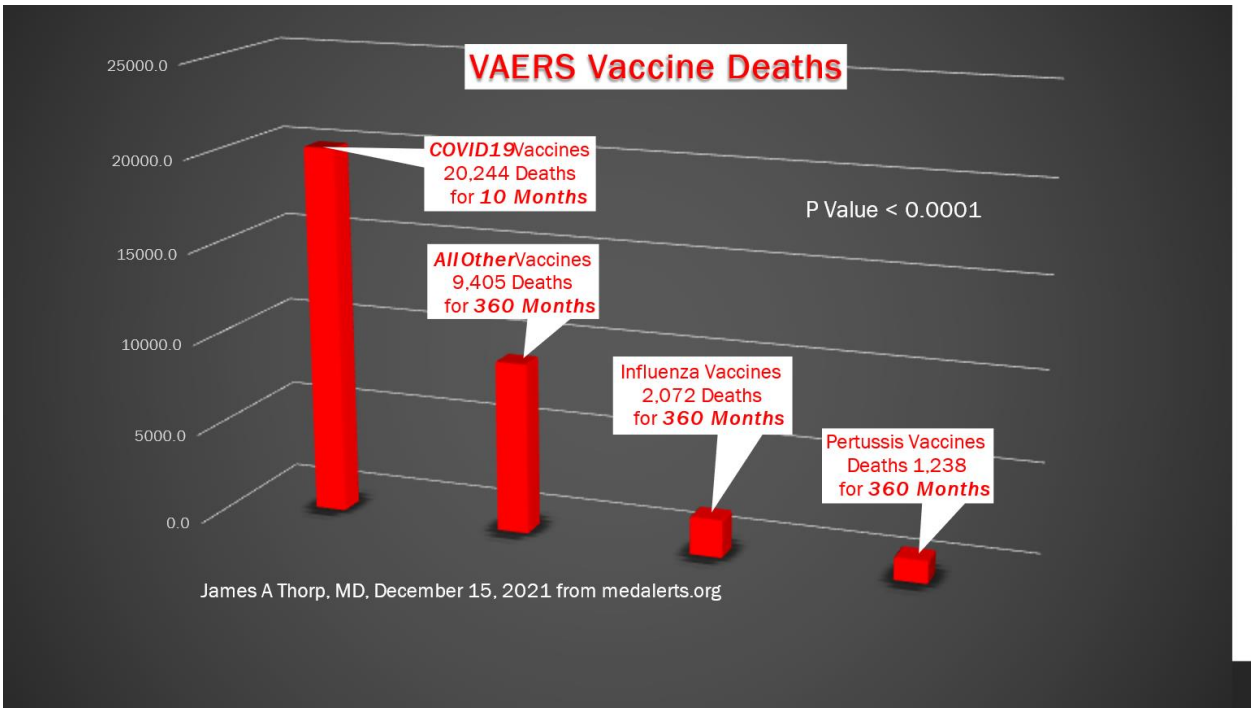
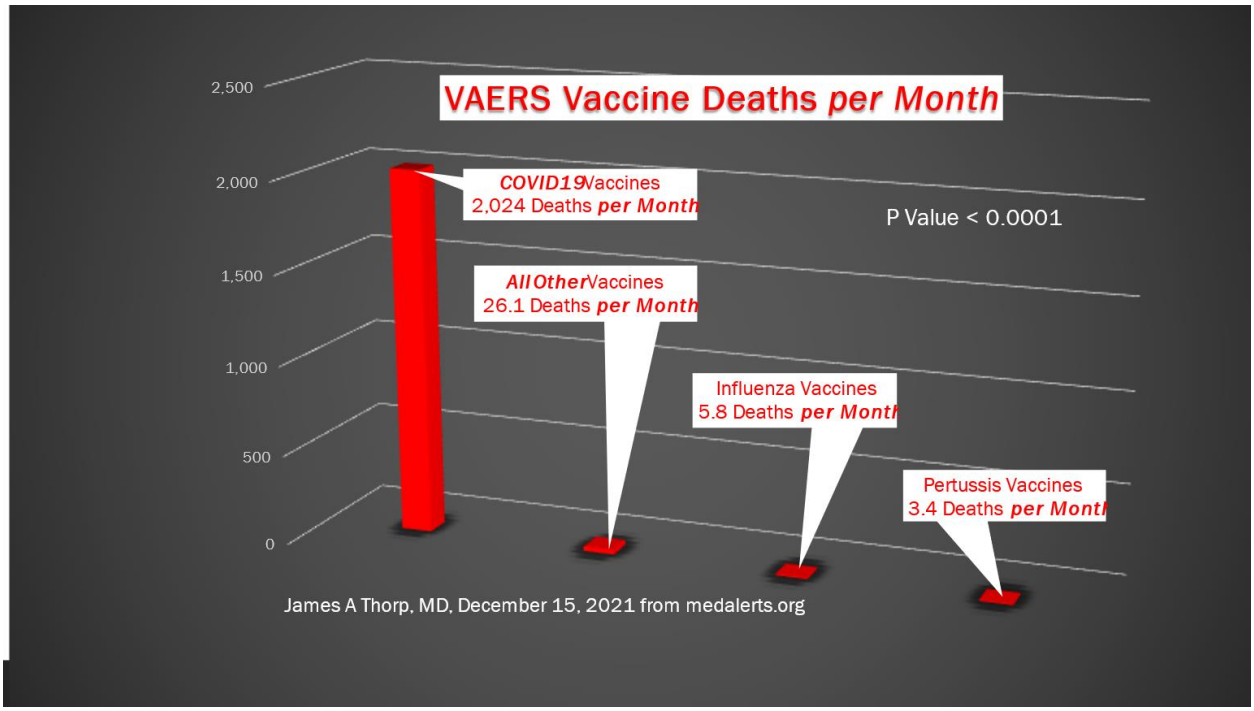
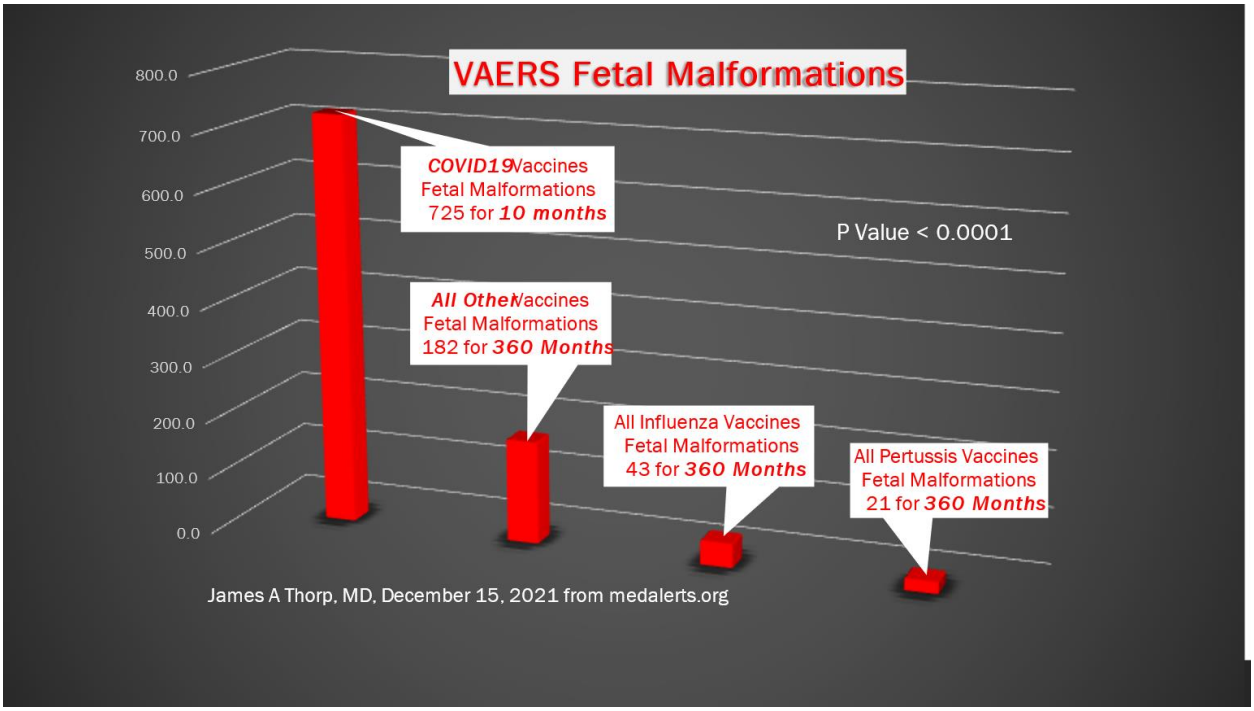
[27] *The Vaccine Injury Compensation Program: Addressing Needs and Improving Practices, 6th Report*, by the Committee on Government Reform, 106th Congress, 2d Session, House Report 106-977, p. 9, (emphasis supplied), https://www.congress.gov/congressional-report/106th-congress/house-report/977/1 .

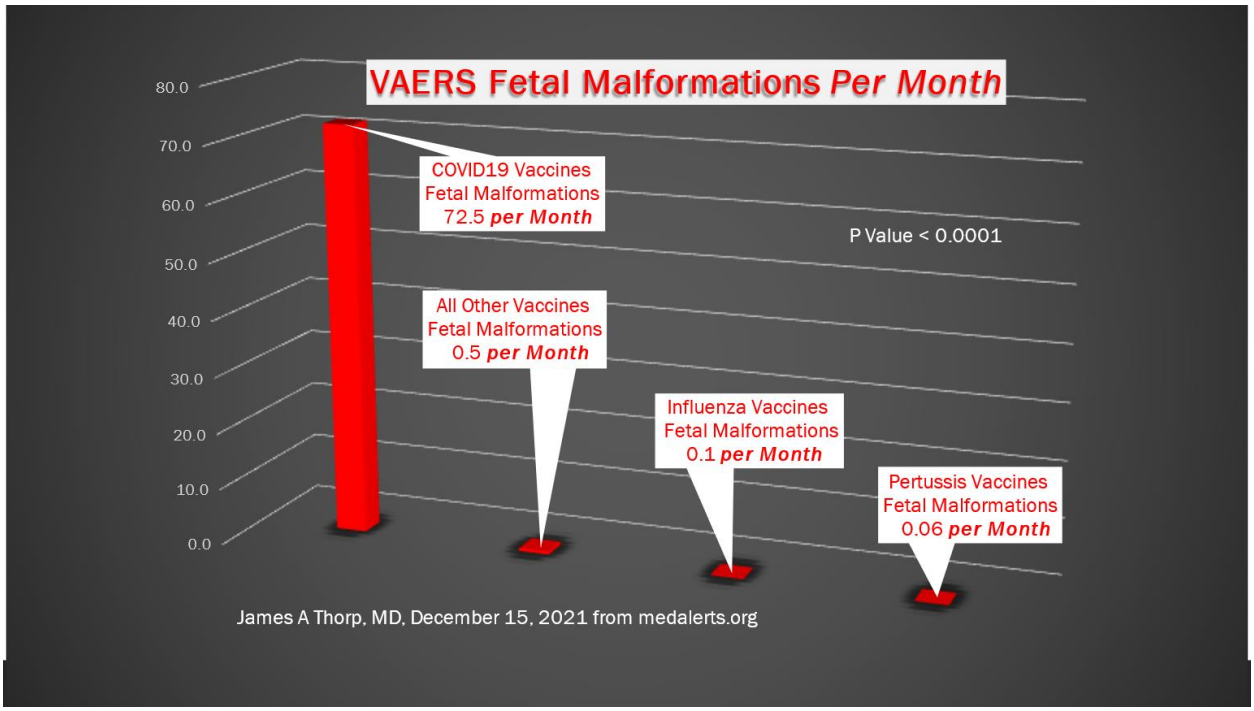
VAERS has shown that the experimental COVID mRNA gene therapy injections have proven to be harmful by any modern safety standards traditionally applied to other vaccines. The '5/50 rule' has always been a 'rule of thumb'; if there are 5 deaths associated with a drug, vaccine or device then a black box warning is issued; if there are 50 deaths the product is immediately removed from the market. Why has ABOG now ignored these long-held safety monitors?

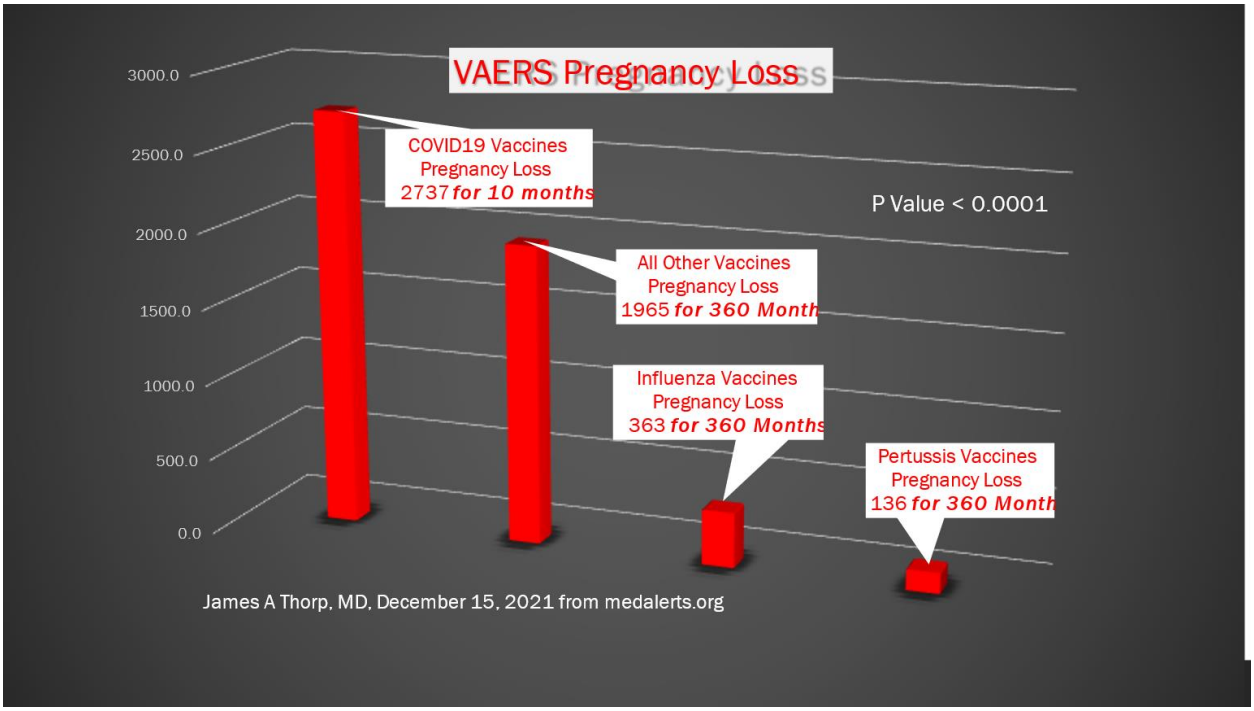
Please see my Power Point slides below from my personal analytics from the CDC/FDA VAERS database via medalerts.org. This was analyzed in conjunction with a Silicon Valley IT expert procurator of this database. In my VAERS analytics I created a six-slide set copied below. I compared 4 bars on the horizontal axis representing the COVID-19 vaccine, all other vaccines in VAERS other than COVID-19 vaccine, the influenza vaccine, and the pertussis vaccine. I purposely reviewed the influenza vaccines and the pertussis vaccines because I have personally reviewed the extensive data with these two vaccines in pregnancy and I believe they might provide a risk / benefit that is potentially favorable for the mother/fetus/newborn/infant. The slides are stratified by vaccine associated deaths, fetal malformations, and pregnancy loss. I purposely avoided spontaneous abortions and fetal deaths individually but included them together in pregnancy loss; I do not believe the VAERS database enterers had our expertise to differentiate between these diagnoses. The COVID-19 deaths, fetal malformations, and pregnancy loss are stunning when compared to all other vaccines in the VAERS registry combined, the influenza vaccines, and the pertussis vaccines. Regardless of how you criticize my analytics they are extremely robust, complete, broad and irrefutable. You are morally, ethically, and legally obligated to follow this verified safety signal.

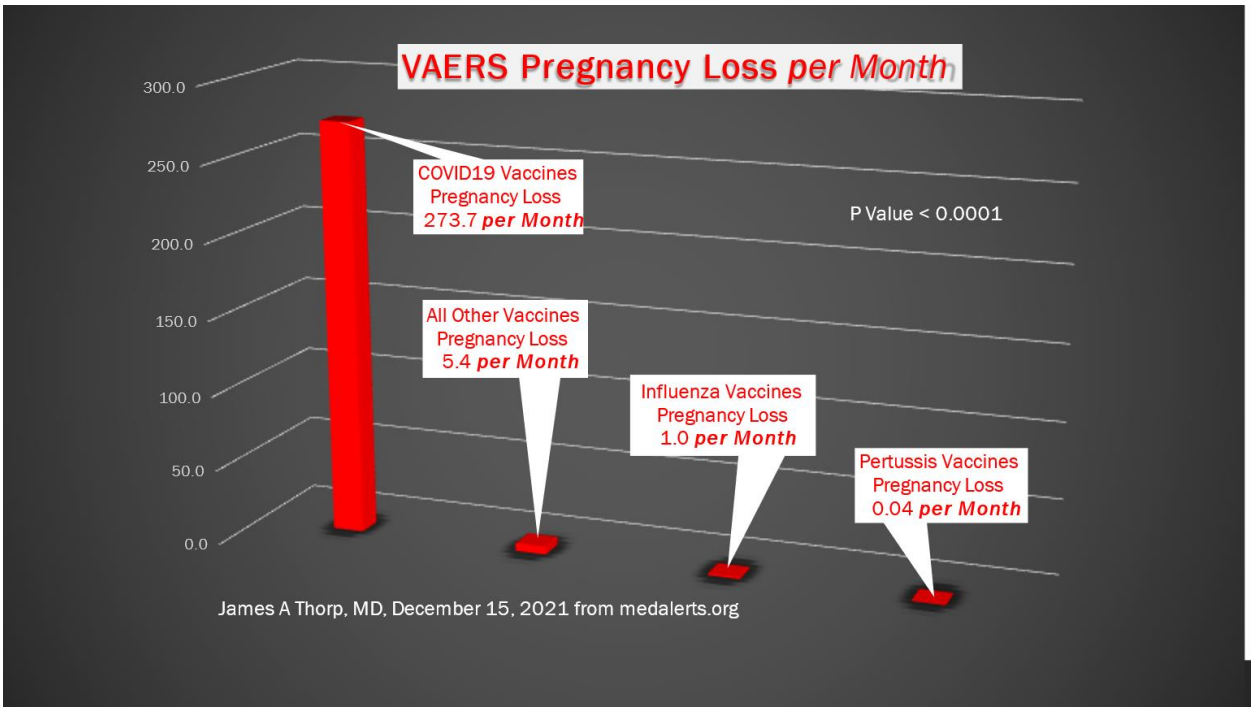



VAERS Vaccine Deaths per Month
2,500
2,000
1,500
1,000
500
0
COVID19 Vaccines
2,024 Deaths per Month
P Value < 0.0001
All Other Vaccines
26.1 Deaths per Month
Influenza Vaccines
5.8 Deaths per Month
Pertussis Vaccines
3.4 Deaths per Month
James A Thorp, MD, December 15, 2021 from medalerts.org


VAERS Fetal Malformations
800.0
700.0
600.0
500.0
400.0
300.0
200.0
100.0
0.0
COVID19 Vaccines
Fetal Malformations
725 for 10 months
P Value < 0.0001
All Other Vaccines
Fetal Malformations
182 for 360 Months
All Influenza Vaccines
Fetal Malformations
43 for 360 Months
All Pertussis Vaccines
Fetal Malformations
21 for 360 Months
James A Thorp, MD, December 15, 2021 from medalerts.org


VAERS Fetal Malformations Per Month
80.0
70.0
60.0
50.0
40.0
30.0
20.0
10.0
0.0
COVID19 Vaccines
Fetal Malformations
72.5 per Month
P Value < 0.0001
All Other Vaccines
Fetal Malformations
0.5 per Month
Influenza Vaccines
Fetal Malformations
0.1 per Month
Pertussis Vaccines
Fetal Malformations
0.06 per Month
James A Thorp, MD, December 15, 2021 from medalerts.org


VAERS Pregnancy Loss
3000.0
2500.0
2000.0
1500.0
1000.0
500.0
0.0
COVID19 Vaccines
Pregnancy Loss
2737 for 10 months
P Value < 0.0001
All Other Vaccines
Pregnancy Loss
1965 for 360 Month
Influenza Vaccines
Pregnancy Loss
363 for 360 Months
Pertussis Vaccines
Pregnancy Loss
136 for 360 Month
James A Thorp, MD, December 15, 2021 from medalerts.org



There are multiple reports from all over the world reporting an increase in fetal deaths, neonatal deaths, and infant deaths. The Scottish data documents a 25% increase among infant deaths. https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/general-publications/weekly-and-monthly-data-on-births-and-deaths/deaths-involving-coronavirus-covid-19-in-scotland

There are NO credible safety data that you have in pregnancy. ZERO. The NEJM article has absolutely nothing safe about it; the VSAFE procurement of data is totally irrelevant, unreliable and laughable. The longitudinal study in the very poorly done study lasted less than 8 weeks; last I heard, pregnancy lasted for 40 weeks. This is complete nonsense. There was ZERO newborn follow up. The fact that ABOG would push this vaccine in pregnancy is an abomination and will be the greatest disaster in the history of obstetrics. The article in the *British Journal of Medicine* in November 2021 by Paul D. Thacker whistleblower exposes the major flaws in the data, fraudulent data, manipulation of data and unblinding of the 'blinded data' and the fraudulent relationship between Pfizer and the NEJM.

The Editor in Chief of the NEJM, Dr. Eric Rubin, had the unethical audacity to vote in favor of the 'vaccine' in children ages 5-11 at the FDA advisory committee, despite being on public record as stating the following: "**We're never gonna learn about how safe the vaccine is until we start giving it.**"[28] This is absolutely the antithesis of the scientific method. At least

[28] Scott Morefield, "FDA Panel Member: 'We're Never Gonna Learn About How Safe the Vaccine Is Until We Start Giving It'", TownHall, Oct. 26, 2021, https://townhall.com/tipsheet/scottmorefield/2021/10/26/fda-panel-member-were-never-gonna-learn-about-how-safe-the-vaccine-is-until-we-start-giving-it-n2598090.

Dr. Rubin was honest in this case. In the case of pregnant women, he simply published and pushed the vaccine in pregnancy with false and worthless data stamped with the seal of the NEJM which most revere as a false god.

The mainstream medical journals have become increasingly corrupted in the last few decades with unethical entanglements with industry and politicians. How is it that 14 months ago the LANCET published a manuscript with the lead author from Harvard that consisted of completely fraudulent data; it was not manipulated data, it was ***completely falsified*** for the specific political purpose of doing a 'hatchet job' on hydroxychloroquine. The LANCET got caught with their 'pants down' and was forced to retract the article, yet the Harvard professor was not punished. And ABOG threatens to destroy their constituents if they spread 'misinformation'? Why did the LANCET publish this completely fraudulent article? It is pure and simple. They wanted to eliminate an extremely safe and effective drug for the early treatment of COVID-19 so that the pharmaceutical complex could make trillions of dollars on the fraudulent experimental gene therapy. There are thousands of physicians like myself that have been treating COVID-19 very early, effectively and safely with a variety of vitamins, supplements, ivermectin, hydroxychloroquine, azithromycin, doxycycline steroids, and other safe medications. Had the CARTEL not mocked, derided, threatened, censored and persecuted those of us who have been using early outpatient treatment then well over 80% of the deaths and hospitalizations in the US never would have occurred. Hydroxychloroquine has been used for 85 years with billions of doses dispensed and has a higher safety profile than aspirin or acetaminophen. Obstetricians, Maternal Fetal Medicine physicians have used hydroxychloroquine for over 40 years in pregnancy without any adverse effects or teratogenicity noted. Hydroxychloroquine in contrast to the experimental gene therapy is extremely safe and also efficacious in therapy during pregnancy and prophylaxis in pregnancy (400 mg PO once weekly).

Dr. Bhakdi and Dr. Arne Burkhardt explain the basic immunology and unequivocally document the unexpected deaths in Germany are caused by the experimental gene therapy; not by any other causes. As Dr. Bhakdi and Burkhardt explain, death is caused by the autoimmune "self-attack" of T killer lymphocytes in all organs systems throughout the body. He states emphatically that all the gene-based vaccines are killing the young and the old.[29]

This corruption makes the recent high-profile fraud trial involving Stanford dropout Elizabeth Holmes – who bilked hundreds and millions of dollars out of investors and hoodwinked the likes of James Mattis and Robert Murdoch in connection with lies she weaved when her medical tech startup Theranos failed – look like child's play. This potential fraud is exponentially worse than the Theranos disaster and amounts to a medical disaster of unparalleled proportions. The Omicron variant exposes the major flaws in any of the COVID-19 vaccines. The vaccine does NOT have positive efficacy; it actually has ***NEGATIVE EFFICACY.*** It increases viral loads, transmissibility and increases the risk to those vaccinated. This is a disease of the vaccinated, NOT the unvaccinated. The most vaccinated countries in the world have the

[29] Dr. Bhakdi Sucharit, "Doctors for Covid Ethics," posted Dec. 2021 on YouTube, https://tube.doctors4covidethics.org/videos/watch/bea288f1-2ee5-4b83-b1aa-534c993298b9.

highest case rates of COVID-19. The most vaccinated states in the USA have the highest rates of COVID-19. How is it that the entire USA NAVY ship the USS Milwaukee had 100% of its crew vaccinated out in the middle of the ocean and it is rendered completely disabled because of a massive COVID-19 break out? How is this possible? The false narratives have fallen apart right in front of everyone's eyes.

The Overwhelming Evidence

In just 12 months from deployment of the COVID 19 vaccine I have reviewed approximately 1,019 references noted below. I would encourage ALL the ABOG staff and examiners to review all these studies, as I have done. After you read all these 1,019 peer-reviewed publications listed below in the references you can come to no other conclusion except that the COVID-19 experimental gene therapy injections are highly morbid and mortal in women of reproductive ages, pregnant women, their offspring and children that will be given this experimental gene therapy injection. The dangers of the COVID-19 experimental gene therapy are irrefutable and ABOG must retract their September 2021 threats and make a strong statement regarding the risks of this experimental gene therapy injection in women of reproductive age and in pregnancy. Please do your due diligence and read these references, as I have done.

I will personally debate anyone in ABOG in a public forum or recorded on Zoom for public consumption. As a matter of fact, I have offered to debate anyone in the world on this topic for a year and I have had no one challenge me, only *ad hominem* attacks. Steve Kirsch has offered $1,000,000 US currency to anyone in the world that will debate him. Why doesn't ABOG take him up and pocket $1 million? Here is his phone number: 650-279-1008. He welcomes your call.

This is a perfect storm that will eclipse the disasters of DES and thalidomide and make them look like a sunny day on the beach.

I look forward to working with you and assist you in reversing this madness.

Thank you very much for your time and consideration with this matter.

All The Best,

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Board Certified Maternal Fetal Medicine
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Gulf Breeze, Florida 32561
850 501 8616

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