Universal Health Organisation (UHO) Weekly Newsletter – 20 Oct 2023



The weekly newsletters bring the updates on the science, battered and bruised during the pandemic, legal updates and impact of activism for a just society, across the world. These are small steps to promote Transparency, Empowerment and Accountability – the ethos of the UHO.

Announcement: Membership & endorsements to the UHO are invited: <u>https://uho.org.in/endorse.php</u>

Rheumatic Immune-mediated inflammatory disease following Covid-19 vaccination.

A recent peer reviewed published <u>study</u> in the medical journal Vaccines suggest that the adverse effects of the Covid-19 vaccine many include immune mediated chronic conditions affecting the blood vessels, the joints, the skin, muscles and other organs. The study reported two deaths due to vaccine associated myositis (inflammation of muscles). Besides the mRNA vaccines, the study also reported these adverse events from the adenovirus vector vaccine AstraZeneca (marketed as Covishield in India and the sheet anchor of our mass vaccination campaign).

First time in public health history we adopted an irresponsible and cavalier attitude of "Shoot first, and ask questions later," more in the manner of Western Cowboy movies, in rolling out the experimental Covid-19 vaccines on a scale unprecedented in public health history. Even after reports of sudden deaths in young healthy people, few questions are being asked by our scientists. For months the Indian Council of Medical Research (ICMR) is exploring the <u>association</u>, if any, between sudden deaths and the Covid-19 vaccines but the silence so far is disconcerting.

UHO has serious concerns that due to poor system of adverse effects following immunization (AEFI) monitoring in the country, and poor public health infrastructure, many of these adverse effects which are surfacing in other countries may go unreported.

Who is responsible for vaccine related harms in the pandemic? If there is no clear accountability trail, then no one is accountable. Even the government of India washed its hands off any accountability in an <u>affidavit</u> to the Supreme Court stating that vaccines were never mandatory – while de facto it was as all citizens know.

Opposition to the WHO Pandemic Treaty coming from the most unlikely quarters.

There are some interesting developments concerning opposition to the proposed <u>WHO Pandemic Treaty</u>. Sensible people who understand the implications of this treaty are worried and deeply concerned that few politicians and world leaders are raising their voice against this attempt of power grab.

The WHO's proposed Pandemic Treaty wants countries to sign an accord binding them to respond the way the WHO dictates in case of future or even potential pandemics. The WHO will be the sole source of truth and its diktats would be legally binding to all the 194 member countries. The provisions of the Pandemic Treaty and the amendments to the International Health Regulations (IHR) barely conceal the aspirations of WHO to become an authoritarian center of power. There is hardly any ethos of cooperation and coordination, rather the whole exercise is centered on total control by the WHO. It would dictate how independent sovereign nations should respond to health emergencies.

Given the dismal track record of the WHO during the pandemic all sensible people should be very worried. Instead of introspection and audit of what all went wrong the WHO is audaciously proposing more of the wrong medicine. Lockdowns, quarantines, experimental vaccines and drugs, and power without accountability would become the norm under the treaty and the amendments.

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Universal Health Organisation (UHO), Regn. No: Greater Mu/0000280/2023 (The Societies Regn. Act, 1860) Managing Committee: Dr Amitav Banerjee (Chairperson), Dr. Arvind Singh Kushwaha, Dr. Gayatri Panditrao, Mr. Ashutosh Pathak, Mr. Prakash Pohare, Dr Veena Raghava (Treasurer), Prof Bhaskaran Raman (Secretary), Dr. Praveen K Saxena, Dr. Mava Valecha

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In this gloomy situation, there is a ray of hope, but from the least expected quarters, the pharmaceutical industry, which has raised concerns on the proposed treaty. One of the provisions in the treaty which call for suspension of intellectual property rights for needed drugs during a future pandemic has rubbed the pharmaceutical industry the wrong way. The Director General of International Federation of Pharmaceutical Manufacturers and Associations (IFPMA), Thomas Cueni, <u>said</u> that the treaty in its present form was unacceptable to them. *"It would be better to have no pandemic treaty than a bad pandemic treaty, which the draft circulated to member states clearly represents,"* he concluded.

The irony of it all! It is not concerned citizens, or elected government representatives who are successfully blocking the steady and inevitable march of the treaty but the pharmaceutical industry, one of the biggest stakeholders which made record profits during the pandemic!

It would be interesting to see how things unfold with this spanner in the wheel by big pharma. Perhaps the clause about the intellectual property rights may be modified and the treaty will still go through. The pharma lobby gets exactly what they want since they have immense influence on all world governments spending hundreds of millions of dollars lobbying every year. Politicians and policy makers have deep ties with them. So ultimately even in democracies it is not the people or their representatives who call the shots. The one who pays the piper, i.e. big pharma, calls the tune. They have too much at stake in pandemics but they would not like their share of the pie to be reduced.

The Amendments to the IHR run into time constraints, continuous watch is required to ensure rules are not broken.

The working group for amendments to the International Health Regulations (WGIHR) may be plotting to violate Article 55 of the International Health Regulations (IHR). A close watch on the developments is needed to prevent this violation.

The WGIHR has announced that they may be unable to table the revisions by January 2024. This is required according to Article 55 of the IHR if the amendments are to be ratified and approved by the World Health Assembly in May 2024. A four month window is mandatory for review of the amendments and public comments.

The correct thing for the WGIHR to do in this eventuality is to express its inability to meet the deadline for the amendments which is due in January 2024 and ask for its extension to the 78th World Health Assembly in May 2025.

However, what is most concerning is that the WGIHR is plotting to breach <u>article 55 of the IHR</u> as suggestive in the following statement made by it, "*The Co-Chairs noted that, in reference to Decision WHA75(9), it appeared unlikely that the package of amendments would be ready by January 2024. In this regard, the Working Group agreed to continue its work between January and May 2024. The Director-General will submit to the 77th Health Assembly the package of amendments agreed by the Working Group.*"

The statement by the working group if put in practice would amount to major departure from existing practice as provisioned in Article 55 of IHR. It will leave no window for review and public comments.

If rules can be breached even before the amendments, the future looks grim.

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