

Universal Health Organisation (UHO)

Weekly Newsletter – 24 May 2024



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 invited: <https://uho.org.in/member.php>

NHS in the UK is intimidating doctors who raise concerns about patient safety

Disturbing trends of naming and shaming doctors who raise concerns about the possible adverse effects of medical treatments are prevalent across the world. Doctors working in the National Health Service (NHS), UK have confessed how they are [bullied and harassed](#) by colleagues and administrators if they raise concerns about patient safety issues. This has been [reported](#) in the leading British mainstream daily The Telegraph.

Investigative journalism by The Telegraph has revealed that NHS employees are more likely to shame the doctors raising concerns about patient welfare rather than investigate the issues of patient safety they have raised. Of the 52 doctors interviewed by The Telegraph, 41 said they were harassed with counter-allegations. Some were even intimidated by “police interviews.” The NHS acted as the judge, jury and executioner silencing the physicians who try to live up to the Hippocratic Oath of doing no harm. The medical establishment seems to drive a culture of cover ups of medical errors.

ICMR trashes BHU study on Covaxin side-effects calling for its retraction and threatens researchers with legal action

The Indian Council of Medical Research (ICMR) seems to have taken a cue from the NHS.

Our august research body, the ICMR, is indulging in strong-arm tactics unbecoming of its stature. It threatened researchers at the prestigious Benares Hindu University (BHU) with [legal action](#) for publishing a paper in a reputed high impact medical journal, “Drug Safety,” enumerating the adverse events from Covaxin over a one year follow up period. The ICMR has also written to the journal to retract the paper.

UHO has come out in support of the BHU researchers in an [open letter](#) to the ICMR for the following reasons. The authors of the [study](#) had followed up for one year, a large sample of 1024 participants (including 635 adolescents) who had taken Covaxin manufactured by Bharat Biotech and the ICMR. The study filled an important gap in identifying long term adverse events from the vaccine. The limitations of the study were lack of a control group of unvaccinated people and follow ups was based on telephonic interviews. Both these shortcomings have been acknowledged in the paper. These admissions are signs of research integrity which calls for appreciation instead of intimidation. Instead of threatening and shaming the authors, ICMR, with the resources at its disposal, could have taken the study forward and carried out an in-depth face to face interviews of the participants as well as assembled a post-hoc control group of the unvaccinated for comparison. Collaboration in research should be encouraged instead of polarization. The paper has gone through rigorous peer review before being published by Springer Nature in a prestigious high impact journal. So calling for a retraction on the whims and fancies of the ICMR is untenable. In its letter to the ICMR, the UHO has also asked the august body to conduct proper studies on vaccine safety and release the data of Phase-3 trials of

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Covaxin with long term follow up.

UHO's position on the controversy has been covered by the mainstream newspapers like the [Times of India](#), [Business Standard](#) and [Economic Times](#). The letter also featured in newsblog [Counterview.net](#) edited by former veteran journalist of Times of India, Mr Rajiv Shah. UHO managing committee members also [deliberated](#) upon the unprofessional conduct of the ICMR on a public platform.

Ex-CDC Director, states that it's high time to admit "significant side effects" of Covid-19 vaccines

Among the gloom and darkness of suppression of science and censorship of uncomfortable truths there are some rays of hope. Some influential and eminent authorities who played an important role during the pandemic are speaking up on the possible side effects of the Covid-19 vaccines and even acknowledging that scientists were silenced.

Dr Robert Redfield, former Director of the Center for Disease Control and Prevention (CDC), USA, [admitted](#) that many scientists and officials who tried to warn the public about the potential side effects of the Covid-19 vaccines were pressured into silence and that it's high time to admit that there were "significant" side effects that made people sick.

"We kind of got cancelled because no one wanted to talk about the potential that there was a problem from the vaccines," Dr Robert Redfield [said](#). "I know a number of people that are quite ill and they never had COVID, but they are ill from the vaccine," he continued. "And we just have to acknowledge that."

The UHO appreciates this frankness on the part of the former CDC Director in admitting people have been harmed by the Covid-19 vaccines. At the same time, UHO is dismayed that our Indian experts are still not admitting that vaccine could cause harm. In a rather irresponsible statement Dr Soumya Swaminathan [said](#) that "clotting due to Covid is *perhaps* 100 times more than clotting caused by a vaccine." And she issues this statement after AstraZeneca (Covishield) has accepted that their vaccine can cause clotting and has [withdrawn](#) the product from the market after [facing lawsuits](#) in UK courts! UHO is of the opinion that she should substantiate this statement by producing hard data of clotting events before and after the mass vaccine rollouts. Failing this she does not deserve to be called a scientist but a propagandist. And using the term *perhaps* qualifying her outlandish statement is more appropriate for a politician rather than a professional scientist.

Coroner in NZ says death from myocarditis preventable if adequate information had been given

A coroner in New Zealand, has [ruled](#) that prior information to the public about possible side effects of the Covid-19 vaccine before taking informed consent, could have prevented a death due to myocarditis.

However, in spite of this bold judgment by the coroner, Sue Johnson, the investigative agencies asked to fix accountability while admitting that there have been glaring omissions by the vaccine providers in not informing the people of the known risk of myocarditis, concluded that there is no need for disciplinary action due to the unprecedented circumstances of the worldwide pandemic.

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This is the strategy of authorities worldwide – to hype the lethality of the virus and overestimate the impact of the pandemic giving an illusion that the benefits of the vaccine outweigh the risks. This distortion of true benefits and risks has been more damaging to our population comprising mostly of young people who were never vulnerable to the pandemic by virtue of their young age and over 80% having acquired natural immunity by the time vaccine was rolled out. Even one death due to vaccine, of a young person, with negligible risk from Covid-19, is one too many and accountability should be fixed.

Singapore faces new Covid-19 wave, 25,900 cases reported in a week, masks advisory issued

Keeping up the hype of the pandemic the authorities aided by the media and other vested stakeholders, continue flogging a dead horse. There are [reports](#) that there were 25,900 cases of Covid-19 in the week May 4 to May 11 and the count keeps doubling every week, a 90% increase. The government of Singapore has issued an advisory to people to wear masks again. However, hospitalizations have been few from 181 – 250 weekly in the same period. ICU admissions were also low, only three, compared to earlier weeks.

We are of the opinion that these numbers should not be cause for concern. There are hardly any hospitalizations or ICU admissions. This is a common cold with a special label based on RT-PCR reports. This should not drive another pandemic of panic.

The peak should be taken in context based on earlier admissions during this season due to influenza like illnesses (ILI). For decades the weekly number of admissions in Singapore due to ILI has been [ranging between 150 to 350](#).

Some state officials in India have pushed the panic button on the rising peak of this benign variant in Singapore albeit with a rider “but” like true bureaucrats. Tamil Nadu health officials have [acknowledged](#) that Singapore variant is mutant of Omicron and therefore milder, so no need to panic. *But*, we are fully prepared to face any eventuality. Whether to believe “no need to panic” or “to be prepared to face any eventuality” is a perfect example of bureaucratic doublespeak. Let us keep our fingers crossed that nobody presses the panic button and implement restrictive measures like school and business closures.

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