

COVID

Breaking: Largest Study of Its Kind Finds Excess Deaths During Pandemic Caused by Public Health Response, Not Virus

A study released today of excess mortality in 125 countries during the COVID-19 pandemic found the major causes of death globally stemmed from public health establishment's response, including mandates and lockdowns that caused severe stress, harmful medical interventions and the COVID-19 vaccines.

by **Brenda Baletti, Ph.D.**

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A study released today of **excess mortality in 125 countries** during the COVID-19 pandemic found the major causes of death globally stemmed from public health establishment's response, including mandates and **lockdowns** that caused severe stress, harmful medical interventions and the COVID-19 vaccines.

"We conclude that nothing special would have occurred in terms of mortality had a pandemic not been declared and had the declaration not been acted upon," the authors of the study wrote.

Researchers from the Canadian nonprofit **Correlation Research in the Public Interest** and the University of Quebec at Trois-Rivières analyzed excess all-cause mortality data prior to and during the **COVID-19** pandemic, beginning with the March 11, 2020, World Health Organization (WHO) pandemic declaration and ending on May 5, 2023, when the WHO declared the pandemic over.

The results, presented in a detailed 521-page analysis, establish baseline all-cause mortality rates across 125 countries and use those to determine the variations in excess deaths during the pandemic.

The researchers also used the baseline rates to investigate how the individual country variations in excess death rates correlated to different pandemic-related interventions, including vaccination and booster campaigns.

Not all of the results on a country-by-country basis were the same. For example, in some countries, mortality spikes occurred before the **vaccines** were rolled out, while in other places, the mortality spikes tracked closely with vaccine or booster campaigns.

In some places, excess mortality rates returned to baseline or close to baseline in 2022, while in others, the rates persisted well into 2023. Denis Rancourt, Ph.D., lead author of the study, told **The Defender** the disparities result from the complex nature of pandemic measures — and the data — in different areas.

Once Rancourt's team was able to establish the baseline and excess mortality data for each place, they clustered and examined the data through different filters to interpret it, and drew several conclusions.

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The researchers established that there was significant excess mortality worldwide between March 11, 2020, and May 5, 2023.

Overall excess mortality during the three years in the 93 countries with sufficient data to make an estimate is approximately 0.392% of the 2021 population — or approximately 30.9 million excess deaths from all causes.

The conventional explanation for the excess mortality during the COVID-19 pandemic, Rancourt said, is that the SARS-CoV-2 virus caused virtually all deaths — and there would have been even more deaths if there hadn't been a vaccine.

The variations in excess all-cause mortality rates across space and time, the authors wrote, "allow us to conclude that the Covid-period (2020-2023) excess all-cause mortality in the world is incompatible with a pandemic viral respiratory disease as a primary cause of death."

They said the theory that the virus caused the deaths is propped up by mass virus-testing campaigns that should be abandoned.



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'Idea that vaccines saved lives is ridiculous'

Rancourt and his team cited several factors they believe disprove the theory that the virus caused a spike in all-cause mortality.

For example, they wrote that excess mortality surged almost simultaneously across several continents when a pandemic was declared, while there were no comparable surges in areas that had not yet declared a pandemic.

This suggests that pandemic interventions like lockdowns, which were implemented synchronously across many countries, likely caused the surges.

The researchers also pointed out the significant variation in mortality rates during the pandemic in all time periods, even across different political jurisdictions directly adjacent to each other. If the virus caused the deaths, it would follow that the infection fatality rate would be the same, or at least similar across political boundaries.

The researchers also found a lot of variability in death rates within countries over time, which also would not be an expected outcome if those deaths were caused by a pathogen.

Rancourt said they found "the idea that the **vaccine saved lives** is ridiculous," and based on flawed modeling as he and colleagues also showed in a **previous paper**.

Here again, they found no systematic or statistically significant trends showing that vaccination campaigns in 2020 and 2021 reduced all-cause mortality.

Instead, they found that in many places, there was no excess mortality until the vaccines were rolled out, and most countries showed temporal associations between vaccine rollouts and increases in all-cause mortality.

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Medical interventions — including denial of treatment — caused premature deaths

Rancourt said the excess deaths his team identified are strongly associated with the combination of two major factors — the proportion of elderly in a country's population and the number of people living in poverty. Both factors increased peoples' vulnerability to "sudden and profound structural societal changes" and "medical assaults."

While the proximal cause of death may be classified on death certificates as a respiratory **condition** or infection, the researchers noted, they argue the true primary causes of death are actually biological stress, non-COVID-19-vaccine medical interventions and the COVID-19 vaccination rollouts.

The study provides an overview of plausible mechanisms for this hypothesis, including research showing that some people experienced severe biological stress from measures like mandates and lockdowns.

"If you structurally change the society by preventing people from moving, breathing, working, having their lives, having to stay at home, lock them in. If you do all these incredibly huge changes, structural changes in society, that is going to induce biological stress," Rancourt told The Defender.

"There's very compelling scientific evidence that **biological stress** is a massive killer," he added.

Rancourt also pointed out that the stress of lockdowns affected poor people quite differently than it did people who could easily work from home, have food delivered and live relatively comfortably.

The authors also pointed to extensive evidence showing that medical interventions — including denial of treatment — caused premature deaths.

Such interventions included but were not limited to the denial of antibiotics and ivermectin against bacterial pneumonia, the systematic use of **mechanical ventilators**, experimental treatment protocols, new **palliative medications** and overdoses, **isolation of vulnerable**

people and encouraged voluntary or involuntary suicide.

The March-April 2020 **COVID-19 peak** they identified in several countries is difficult to explain without such medical interventions, they wrote.

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17 million excess deaths tied to COVID vaccines

Finally, the researchers projected that **17 million of the excess deaths** they identified were associated with the COVID-19 vaccines, confirming the findings of their previous research on a smaller sample of countries.

Those vaccine-related estimations were based on analyses of places that had large spikes immediately following vaccination or booster campaigns and also by examining the numbers of vaccine doses and their relation to deaths over time.

Thirty percent of the countries they analyzed had no excess deaths until either the vaccine rollouts or the booster campaigns. And there were significant correlations between COVID-19 vaccine rollouts and peaks or increases in excess all-cause mortality. Ninety-seven percent of countries showed a late-2021 or early-2022 peak in excess all-cause mortality temporally associated with booster rollouts.

It is highly unlikely, the researchers wrote, that the vaccine-mortality associations are coincidental.

Rancourt noticed that people critical of this idea point to the fact that in some places, there are sometimes campaigns or booster campaigns that aren't associated with spikes in excess mortality.

However, he said vaccination campaigns don't always lead to such spikes because vaccination was not related to death in the same way in every situation. Vulnerability factors like the age of those vaccinated, the health of the population and other sociological factors related to

stressors on the immune system change how they are affected by vaccine toxicity or the vaccines' effects on the immune system.

Based on their analysis and interpretations, they concluded, "We are compelled to state that the public health establishment and its agents fundamentally caused all the excess mortality in the Covid period."



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