The present COVID-19 vaccines violate all 10 tenets of the Nuremberg Medical Ethics Code as a guide for permitted medical experiments.

HowardTenenbaum
June 29, 2021

Note that views expressed in this opinion article are the writer's personal views and not necessarily those of TrialSite.

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subject/participant/vaccinee. "Fifty years ago in Nuremberg, Germany, 23 physicians and scientists stood trial for war crimes committed before and during the Second World War. The medical trial, and its more famous predecessor, the international military tribunal, have left us with defining statements of ethical principle".

It is imperative that the reader and all involved with these COVID-19 vaccines understand, that under the terms of the Nuremberg Code, individuals or anyone involved in the distribution of these yet to be approved, and therefore experimental, vaccines, can be accused of crimes against humanity, if they administer an experimental medical procedure or device to any subject, without the subject's fully informed consent. "I was only following orders." was not an acceptable defense in 1947. We will treat informed consent throughout this document as it is a very critical aspect of administration of a vaccine or any drug etc., and we feel it has been breached each time thus far, when these vaccines have been, and continue to be administered.

We became very troubled by our point-by-point analysis of the Nuremberg code and wish to present it for the reader. For this analysis, the term 'vaccine' refers to the COVID-19 vaccine, specifically the mRNA or DNA vaccines. 'Vaccinee' refers to the individual in receipt of the vaccine. It is important that we set the table for this examination. Why are we focused on this? We are focused on this because the vaccines are permitted by the government under emergency use authorization only (EUA) status and to reiterate are still, therefore, experimental in nature.


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and harms of these vaccines. As it stands, even for the EUA, proper toxicology studies or animal trials were not performed. Moreover, the initial human trials were performed on completely healthy people under 50 who had zero underlying conditions (e.g. they could even be overweight) and yet as will be mentioned below, the vaccinations are now being recommended to people who have conditions that were not included in the study and this includes pregnancy. Children were also excluded from the trials. The median follow-up for the vaccinations was approximately only two months. This means we did not take the time to test this novel vaccine technology. In relation to the novelty of the vaccine approach currently being used we point out that either the mRNA-lipid nanoparticle, or DNA adenoviral vector platforms perform in a manner heretofore never tried in human subjects and in such a massive vaccination campaign, no less. One of the most distinguishing features of these vaccines is that they program our own cells to manufacture (translate the genetic code) into a protein (spike protein) against which immunity develops. Given that the spike protein is an important part of the SARS CoV-2 virus, this was thought to be the most appropriate strategy. As creative as this approach is, we point out that at this time there are no data available that can elucidate what, if any, longer-term side effects or adverse events might be anticipated following vaccination. As noted above, we only followed these vaccines for a few months when, in order to confirm long-term safety, we need 10 to 12 to 15 years on average to bring any vaccine to market. One of the most critical aspects of vaccine development was ignored in that 'time' component where the vaccine and its effects (presence of effectiveness and/or harms) is followed closely under surveillance. Importantly, the placebo group in the original trials has now been allowed to be vaccinated, so the

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The ten points of the code were given in the section of the judges' verdict entitled "Permissible Medical Experiments".

1. The voluntary consent of the human subject is essential.

Forcing, bribing, and coercing people to accept an experimental drug (vaccine) without providing any information regarding sequelae of this treatment contravenes this regulation. Coercion abounds and is coming both directly and indirectly by our governments, and globally. Directly by way of PSAs virtually shaming people who have not been vaccinated to get vaccinated. In terms of indirect coercion, the MSM, industries including but not limited to airlines, cruising, restaurants, are demanding that people must be vaccinated to use their services either at all, or at least without the need to mask, undergo inaccurate testing, and the like. Of equal concern regarding regulation 1 is that our governments have been exercising vast coercive power to promote participation in these experiments by using techniques such as offering vaccinees lotteries for cash prizes, free food, and reduced prison sentences for prisoners completely negating even the pretense of participation being in any way voluntary in nature. Finally, there is a surfeit of anecdotal (real world) evidence that potential vaccinees are provided with minimal to no information regarding potentially severe AEs that are known to arise following vaccination. The risks and benefits of a vaccine must be explained in full. Only until such time, can we say categorically that they (the people) are truly 'informed' and ethically consented. Given this, it is simply

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to look at the media demonstrations of the vaccine tents and locations and the administration of the vaccine, and you will see that it is operated almost alike a processing mill with no proper consenting. This is a serious breach of the 1st code of the Nuremberg codes. This strengthens further the arguments that participation in these experiments cannot be considered as being voluntary.

2. The experiment should be such as to yield fruitful results for the good of society, unprocurable by other methods or means of study, and not random and unnecessary in nature.

The fact the vaccines are at this time still experimental in nature means that all of society is being coerced into participating in history's largest clinical research study! Insofar as being designed to yield potentially fruitful results for the good of society, we point to the fact that the experimental vaccines are unnecessary for two major reasons and therefore could not yield results that will benefit society. First, we all know that before any vaccines were available, what WAS available was early multidrug outpatient therapy for COVID-19 that would reduce hospitalization and death (as well as long-COVID) by approximately the same percentage (and now we probably know it's more effective), as the vaccines! The EUA's were therefore granted illegally. Secondly, it is becoming increasingly clear that the vaccines carry more harm than admitted or expected by the developers. This is not consistent with results that are for the good of society.

experiment.

According to any of the information currently available, no animal studies have been done! The original experimental proposal was a Phase 1, 2, 3 study. Phase 1 cannot proceed without animal studies. This said we have seen some animal studies, but not of the sort that would be considered as adequate for authorization of Phase 1 trials, never mind Phase 2 and Phase 3, especially since the longitudinal artificial time constraints of a median of 2 months used for the follow-up, post-vaccination! Moreover, the natural history of COVID-19 was not understood fully (and is still not) and yet vaccine development proceeded.

4. The experiment should be so conducted as to avoid all unnecessary physical and mental suffering and injury.

Given the incidence of adverse events up to and including death that are now being chronicled, it is almost impossible that the investigators did not know of these during the initial phases of the still-ongoing study. Subjects were therefore nearly assuredly exposed to unnecessary risk including physical and mental suffering! To reiterate, this was done and is being done without full consent as defined by this Code. Moreover, the administration of an experimental drug in settings such as parking lots and pharmacies fails to ensure that subjects are afforded protection against unnecessary harm, by including the employment of fully trained medical personnel, which was lacking.

Concerning this part of the code, it is probable that many of the physicians participating in the prosecution of the ongoing experiment were vaccinated. So, while there is some reason to suggest that regulation 5 was contravened, it not completely contravened. However, given past knowledge regarding dangerous AEs including death associated with the use of mRNA-based trial vaccines, the investigators either knew or ought to have known that there were clear and present risks of death or disabling injury at the outset of the experiment.

6. The degree of risk to be taken should never exceed that determined by the humanitarian importance of the problem to be solved by the experiment.

The degree of risk has to be assessed on an age-stratified basis. In this regard, one could argue conceivably that if the vaccines were successful, even with a certain low percentage of AEs, their use in elderly subjects should not exceed the risks associated with the problem to be solved by the experiment. Sadly, there is increasing evidence that this might not be the case. But that aside, the use of this vaccine or any vaccine carrying post-vaccination risks (and all do at some level) is in total contravention of the concepts described in regulation 6. In this regard, children and adolescents have virtually ZERO risk of dying from or even contracting symptomatic infection with SARS CoV-2. There is no rationale whatsoever for the inclusion of this age group as subjects in the current mRNA/DNA vaccine study.

As noted above, the delivery of an experimental vaccine (or drug) must be performed in an environment where one can reasonably expect rapid treatment and immediate availability of treatment for any AEs that might occur shortly after administration of the trial injections. This is impossible in parking lot settings, pop-up vaccination centers, and pharmacies. Indeed, one of the greatest mysteries surrounding the administration of the vaccine within inadequate settings lies in the fact that, at least in Canada, the mRNA vaccines have been administered in pharmacies while only until recently were vaccines made available to MDs for delivery to trial subjects. **Issues relating to the preservation of the vaccines also abound, where the temperature control below zero was not adhered to in some circumstances and the expiration dates were exceeded, which by themselves are cause for alarm and express the need for caution.**

8. The experiment should be conducted only by scientifically qualified persons. The highest degree of skill and care should be required through all stages of the experiment of those who conduct or engage in the experiment.

Those conducting the study at large are most likely qualified. However, if one includes the fact that others who are carrying out the study include RNAs, pharmacists, and possibly other untrained personnel, then even this standard is not met.

This has been addressed above. Despite people beginning to realize that there are some serious problems associated with mRNA or DNA vector vaccination, they are still encouraged to the point of coercion on the part of the Government by way of nonstop PSAs, and by its proxies (industries referred to above). We also refer again to the use of prison inmates who might have their sentences reduced if they're vaccinated. The reduction of a sentence by up to 50% is the cruelest and frankly, the most offensive form of coercion possible. In line with this, **Governments have exaggerated deaths to create even more fear of SARS CoV-2, additionally coercing subjects to enroll in the trials. We also point out that due to inaccuracies (an understatement) as to how the cause of death has been redefined to include anyone who has died with but not *because* of COVID-19 or SARS CoV-2 identification by hypersensitive PCR testing, ~~this~~ fuels the now worldwide environment of fear. This has immense coercive power, inducing even more unsuspecting people to enroll in this 'vaccine' research studies/experiments!**

10. During the course of the experiment the scientist in charge must be prepared to terminate the experiment at any stage, if he has probable cause to believe, in the exercise of the good faith, superior skill and careful judgment required of him that a continuation of the experiment is likely to result in injury, disability, or death to the experimental subject.

is no question that the mRNA vaccines and similar, come with very serious AEs including death. Although the absolute risks are tiny for the whole population, this does not hold on an age-stratified basis as noted above. Furthermore, when compared to AEs, in this case, death, it is virtually guaranteed that potential participants in the study will be told that the risks are the same or won't be informed at all. Not only is any equivalence patently false, but the number of deaths for comparable numbers of vaccinated people is at least 20-fold of those associated with the influenza vaccine! If the experiment was to be continued one would hope that at the very least the investigators would have decided to abort the trial as initially set and focus instead on patients at the highest risk level. This did not happen; study subjects did not receive all available information to formulate informed consent. Therefore, the study contravenes the regulations outlined in item 10.

Conclusion

Based on the above comments relating to the 10 points of the Nuremberg Regulations for Human Research, it is clear that this trial is continuing on an illegal basis. Subjects cannot be coerced as they are now. Although not mentioned above, it is also reasonable to state that the introduction of or threat to introduce Vaccine Passports, as well as the threat to not lift lockdowns, masking regulations, restaurant occupancy and so on, unless and until a certain percentage of the population has been vaccinated (note that we do not mean "immunized"), is an example of malicious coercion! We hold that based on the tenets laid out very clearly in the Nuremberg

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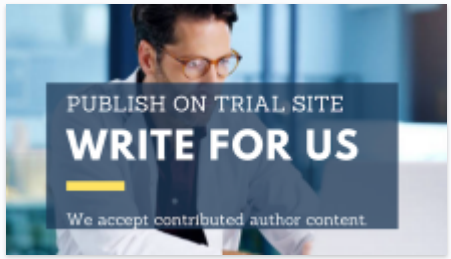

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HowardTenenbaum

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mjnelson99
July 2, 2021

The death producers need to be stopped, but how?
There are very powerful people pushing this agenda.
I will not participate and live where that is most likely possible.

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VanessaF
July 1, 2021

Your article is very informative and I agree 100%. However, what is being done about it? I know people who have taken their first shot of experimental gene therapy/"vaccine" and will not see sense, even after reading an article like this. So what is being done to stop these forced "vaccinations" – for example, the vaccine passport absolutely HAS to be made illegal worldwide. What is being done about this practically?

homebush5
June 30, 2021

Thank you for this! I can't understand how our so called 'leaders' keep saying that they're following the science, when it's been clear, to me, since the start of all of this that they have done nothing of the sort! In Australia, as in the U.S & Canada, our Therapeutic Goods Admin, has not allowed the use of any repurposed drugs for treatment or immunisation e.g. ivermectin, which have proven safe over many years of use. This even though one of our universities, at the start of all this, stated it could be an effective treatment. My point is, that they, the T.G.A. & Aust. Medical Association & government leaders, are happy to push the use of unproven vaccines, but not safe, and not to forget, much cheaper drugs. To me, it's the exact opposite of following the science.

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VanessaF
July 1, 2021

Money and politics :-/

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vaccinated. Our state premier has just thrown his weight behind it for one workers?

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goose
June 30, 2021

Mine workers

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Wildrosebecky
June 30, 2021

Very clear, urgent and important information. Thank you!

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Mia
June 29, 2021

Thank you.
I would like to see some assessment of the ‘traditional’ type of Covid vaccines. Novavax (Coronavax) apparently does not ‘instruct’ your

out for deployment at the end of this year, would be important. While I hope to not have any of these vaccines, I am afraid of being forced to.

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