

Sir Patrick Vallance - Chief Scientific Adviser
c/o 10 Downing Street
Westminster
London
SW1A 2AA

30th November 2021

Dear Patrick,

I write to you again, following up on a letter I sent you on the 28th January this year, some 10 months ago (see attached copy). I continue to be concerned about what has happened in the UK relating to the SARS-CoV2 virus pandemic. I note that despite supplying you with a “cure for covid” pack that your Government pursued an almost exclusive policy of pharmaceutical injection. These leaky vaccines (experimental mRNA medical devices) seem to have significantly worsened the plight of your citizens, by comparison to countries that have deployed Ivermectin, e.g. India & Japan.

The Yellow Card reporting system records nearly 1.3M adverse reactions and 1800 deaths from these injections. It is well known that such recording systems only capture between 1% and 10% of actual adverse outcomes.

UK Yellow Card Data to 17th Nov. 2021		
Brand	Adverse Reactions	Deaths
Pfizer	380236	611
AstraZeneca	842270	1127
Moderna	58476	19
Unknown	3768	32
TOTAL	1,284,750	1789

Hopefully you will agree that millions of injuries and thousands of deaths are not just unfortunate but were quite unexpected from these “safe and effective” vaccines? I note that the products remain on temporary or emergency authorisation (according to the MHRA) but also that the data-basis for the temporary status is still derived from the original period in autumn 2020 (before this Phase3 trial was commenced on the UK population). I suggest that it is now time to review the authorisation status based on empirical data, specifically the 1.3M adverse reactions and 1800 deaths.

I have noticed a reluctance to promote Ivermectin (IVM) in early treatment or in hospital settings of more serious infections. In the USA, where they still discourage home use you will find that IVM is actually being used in hospitals to reduce the bad outcomes from “breakthrough infections” (where the vaccinated patients exhibit symptoms of COVID but caused by the vaccination itself). To this end I enclose another gift, this time, pure Ivermectin to show how easily available it is and how affordable, this 4 pill blister pack costs only £1.23. You could use this for yourself and your own family if they contract COVID despite their vaccination and you could promote it for use in all UK healthcare settings.

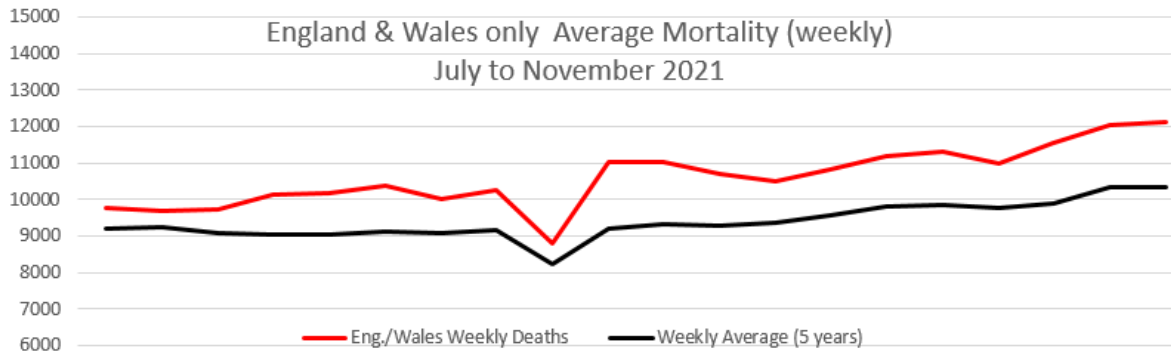


In your role as Chief Scientific Adviser you carry a great responsibility to weigh alternate solutions to the pandemic challenge and adopt those that are safe, affordable and fast. This is a safe drug, Ivermectin has already been dispensed 3.7million times to the human population (with little or no side-effects). You could consider prophylaxis in within your various remits to protect civil servants and or public sector workers. It could be considered a legal duty to deploy a known protection to those who are exposed to infection risk during their normal duties.

Additionally I would like to draw to your attention a number of studies made of samples of the actual contents of real vaccine vials. These independent examinations deserve an official Government investigation and clarification. It seems that in addition to the expected mRNA active ingredients, that number of additional excipients (unexpected ingredients) have been discovered, possibly due to poor quality control but also perhaps due to nefarious activities or other agendas.

- Graphene materials
- Trace Metals & metal shard contamination
- Electro-magnetic and conductive components
- Live Parasites

Lastly it is important to consider the effects of your vaccination programme on “all cause” mortality and the prospective health of the UK population. We note that the excess deaths (compared to the 5 year average) are elevated since July 2021 and show no sign of returning to the normal level (see graph)



The start to the elevated deaths in the summer months along with lack of any traditional infection bell curve is suspicious. The symptoms of people presenting in primary care and hospitalisation deserve close attention. It seems that people are suffering new symptoms, inconsistent with those of the COVID-19 respiratory illness from the year 2020.

- Cardiovascular Deterioration
- Breakthrough infection or Antibody-dependent Enhancement (ADE)
- Vaccine Acquired Immunodeficiency Syndrome (VAIDs)
- Reproductive Health issues (fertility and birth disarray)
- Super Cancers (out of remission and fast metastasising)
- Prion Disease (CJD)

We propose the cause of the elevated mortality (24K) to be a “delayed” vaccine-related outcome, and strongly suggest you immediately stop all COVID injections in the UK.

Kindest regards,

Doctor Paolo

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