

Why Does Peter Hotez Think We Are Mass Murderers?

The sad story of how an unhealthy father became the bane of the autism community and the leading advocate for vaccine tyranny.



A Midwestern Doctor
Dec 26

♡ 540

💬 515



One of the most common tactics the medical industry uses to defend against the scrutiny of bad medical practices is to accuse those who question those practices (and thus make the public reluctant to receive them) of “**killing their patients!**” (under the logic that the treatment is so safe and effective that causing the public to avoid it equates to murder). Although I am used to seeing inflammatory approaches like this being used to silence debates, I was nonetheless quite taken aback by the WHO’s recent tweet (watch it; it’s only 52 seconds long):



World Health Organization (WHO)

@WHO

"Anti-vaccine activism, which I actually call anti-science aggression, has now become a major killing force globally."

- [@PeterHotez](#), Professor and Dean [@BCM_TropMed](#), on the devastating impact of [#misinformation](#) and disinformation.



11:40 AM · Dec 14, 2022

2,814 Likes **1,636** Retweets

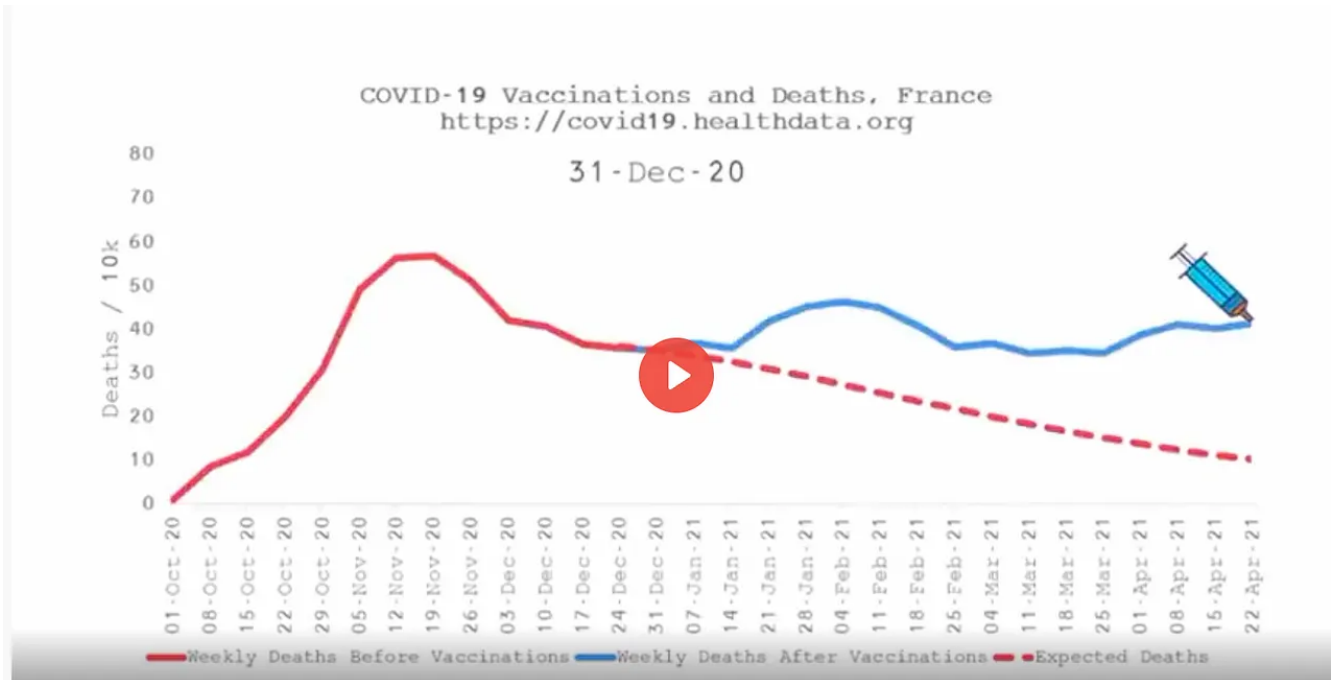
Before we go any further, I would like to note that that there is no way Peter Hotez could have made this video himself, and it was most likely produced [by a PR firm](#).

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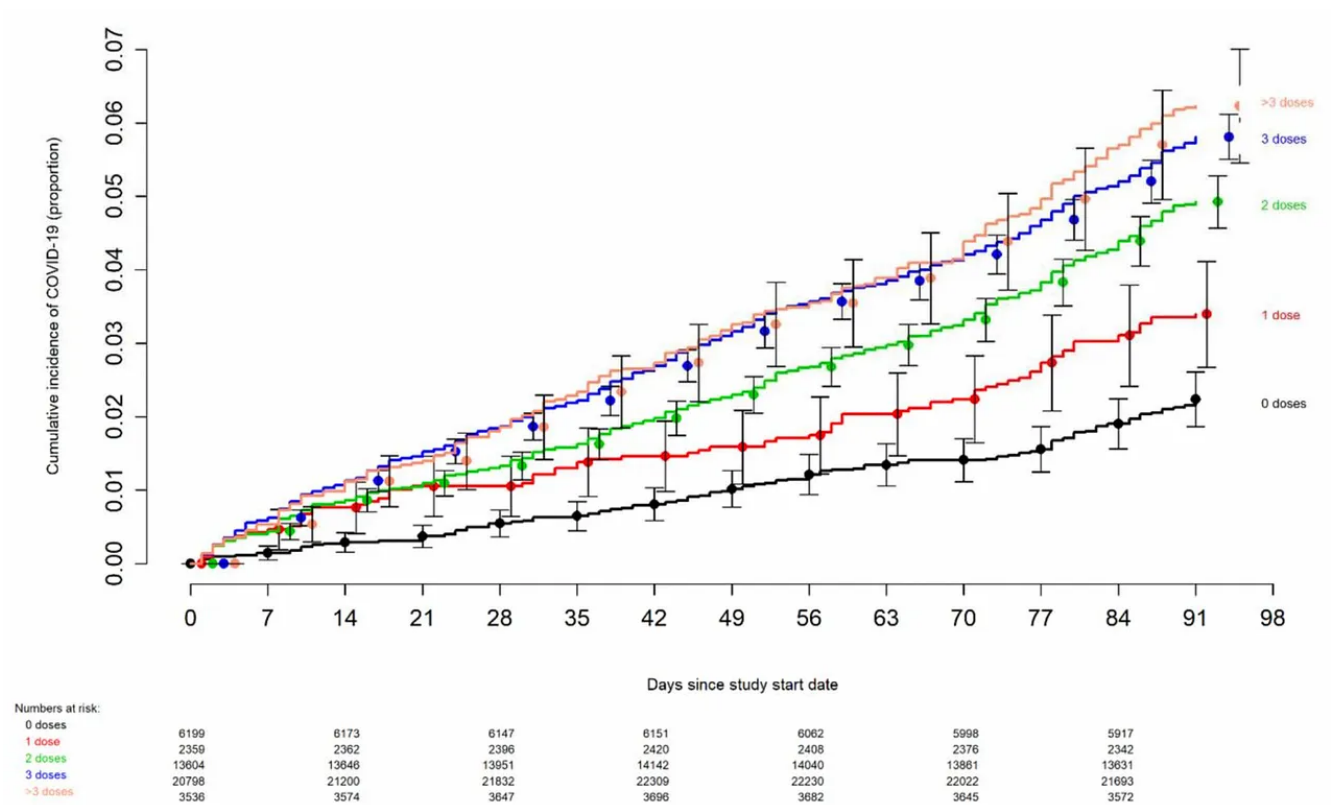
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The central claim of this video, *I believe*, comes from [this study](#) which utilized a few assumptions (which I did not agree with) to conclude that higher vaccination rates *could* have saved 200,000 lives. The problem with its argument is that:

- Since so many deaths not caused by COVID-19 have been classified as COVID-19 deaths, we don't actually know how many people died from the illness (this study just assumed the official but inflated figure as accurate).
- In Pfizer's trial, the survival benefit from the vaccine worsened with time (this has also been observed outside the trials), and [at 6 months follow-up](#) (where the trial was abruptly terminated), more people who were vaccinated died than those who were unvaccinated (which means that it is impossible that there could have been a net gain of life through vaccinating). Since this is the longest clinical trial that was performed on the vaccines, its conclusion must stand until a longer trial is conducted.
- The vaccines we are using have caused SARS-CoV-2 to rapidly evolve into variants for which it no longer offers protection. For this reason, the alleged benefits of the vaccine have [had to be continually modified because](#) it failed to meet each of its previously promised metrics (e.g., [it does not prevent transmission of COVID-19](#)).
- The study fails to account for the fact that national death rates consistently increased or stayed the same (but never decrease) following COVID vaccination campaigns:



- The estimate fails to account for studies like [the recent Cleveland clinic study](#) that have found that the risk of contracting COVID-19 increases with vaccination:

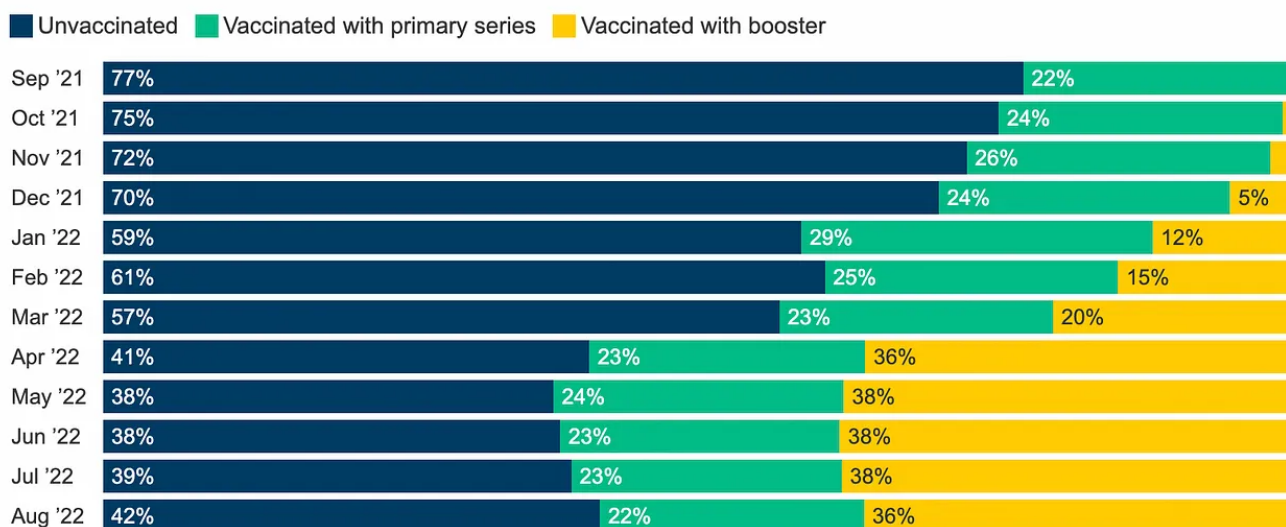


Another [commenter](#) remarked that Peter simply blocked them after being sent [this dataset](#):

Figure 1

Share of COVID-19 Deaths by Vaccination Status, 30 Jurisdictions In the U.S., September 2021 To August 2022, Age 18 and Over

[All adults](#) | [Adults age 50 and older](#) | [Elderly ages 65 and older](#)



NOTE: Partially vaccinated people are excluded from this CDC data source. Share of adult population by vaccination status is for the end of each month.

SOURCE: [KFF analysis of CDC data](#) • PNG

KFF

The estimate also fails to account for the fact that life insurance data has shown that there has been an unprecedented spike in deaths for age groups rarely expected to otherwise die, following the mass vaccination campaigns (summarized [here](#)).

Some of the other claims in the video are also a bit misleading. For example, nuclear proliferation sounds pretty bad, but nuclear weapons were last used on civilians in World War 2, and atmospheric nuclear weapons testing (which does cause [many to develop cancer](#)) has been [prohibited by an international treaty for decades](#). Similarly, aside from 9/11, a very small number of American deaths each year are attributed to terrorism and I am not sure if anyone has died from a cyber attacks.

As the video's claims are crude and nonsensical propaganda, to better understand them we must instead take a closer look at Peter and the WHO. Both are very important to **understand** for where we currently are.

Who is Peter Hotez?

The WHO video was not Peter's first rodeo (he has long been a media darling for news segments promoting vaccination), so it is understandable why many dislike him. Prior to this recent push to criminalize those questioning vaccine safety (which is evil), I viewed him as a comical individual who I genuinely felt bad for, and someone—who like many that do immense harm to the world—is simply controlled by habitual fixations they are never able to move beyond.

I have not done a deep dive into his background. However, everything I've seen is consistent with an unhappy, frustrated individual who frequently gets scammed by life and is both physically and emotionally unhealthy.

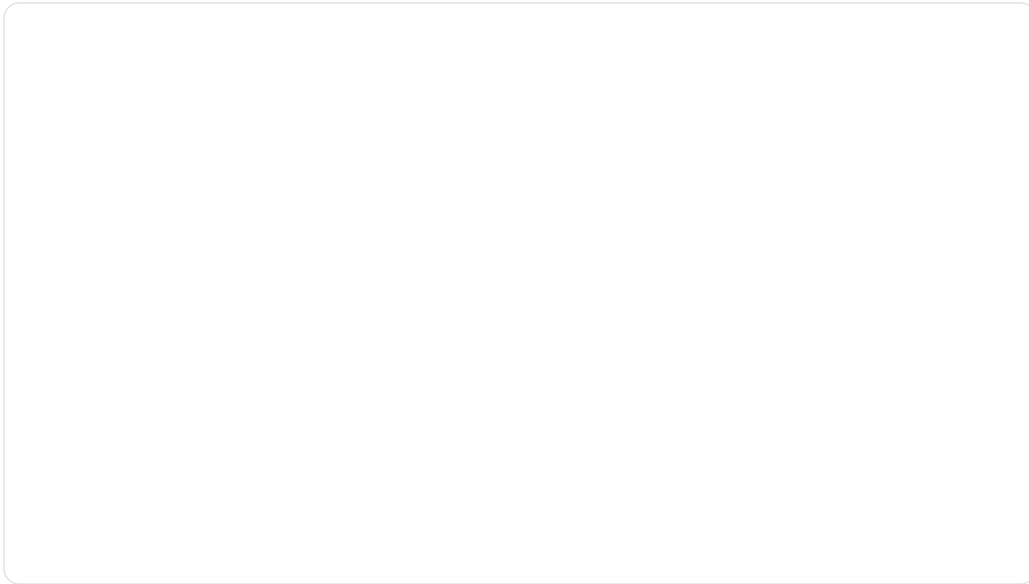
As we review this article, see if you agree with my assessment of Peter (I recognize that many of you will instead conclude he is a sociopath). His personality traits are best shown by the video below, [sourced from a longer Joe Rogan interview](#), where Peter continually emphasized the critical need to develop more and more new vaccines (**please watch the clip below**):

**Pierre Kory, MD MPA**

@PierreKory

This might be my all time favorite Joe Rogan moment.

In just a few minutes, Peter Hotez inadvertently shows the world exactly what has gone wrong with our medical system and why his endless push for more vaccines will never create health.

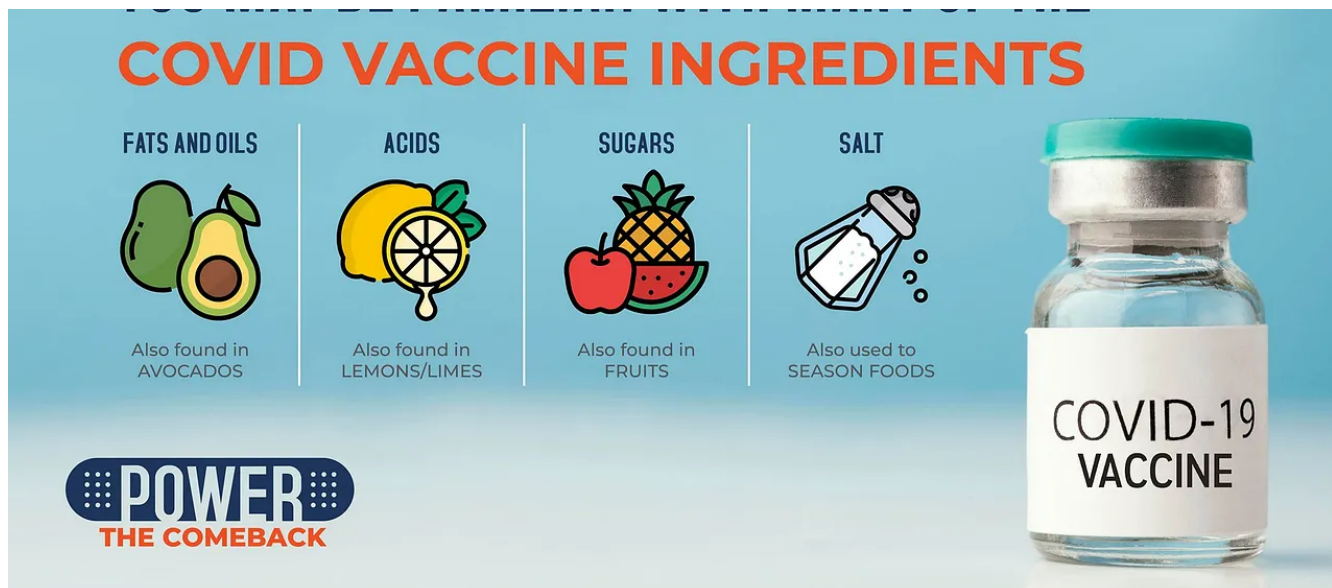


10:41 PM · Dec 25, 2022

15,826 Likes **4,068** Retweets

Since so many things could be said about their exchange, I feel it is best for you draw those conclusions yourself (or read the comments on the tweet—the only thing I did not see highlighted was Peter saying he only took vitamin D because his doctor told him too). I will also note that Peter’s concluding statement vaccines only contained antigens and saline reminded me of a message I saw put forward by Colorado’s department of health earlier in the pandemic:

YOU MAY BE FAMILIAR WITH MANY OF THE



Note: If you have seen [Idiocracy](#), Brawndo's messaging may come to mind (e.g., replace SALT with ELECTROLYTES and SEASON FOODS with FEED PLANTS).

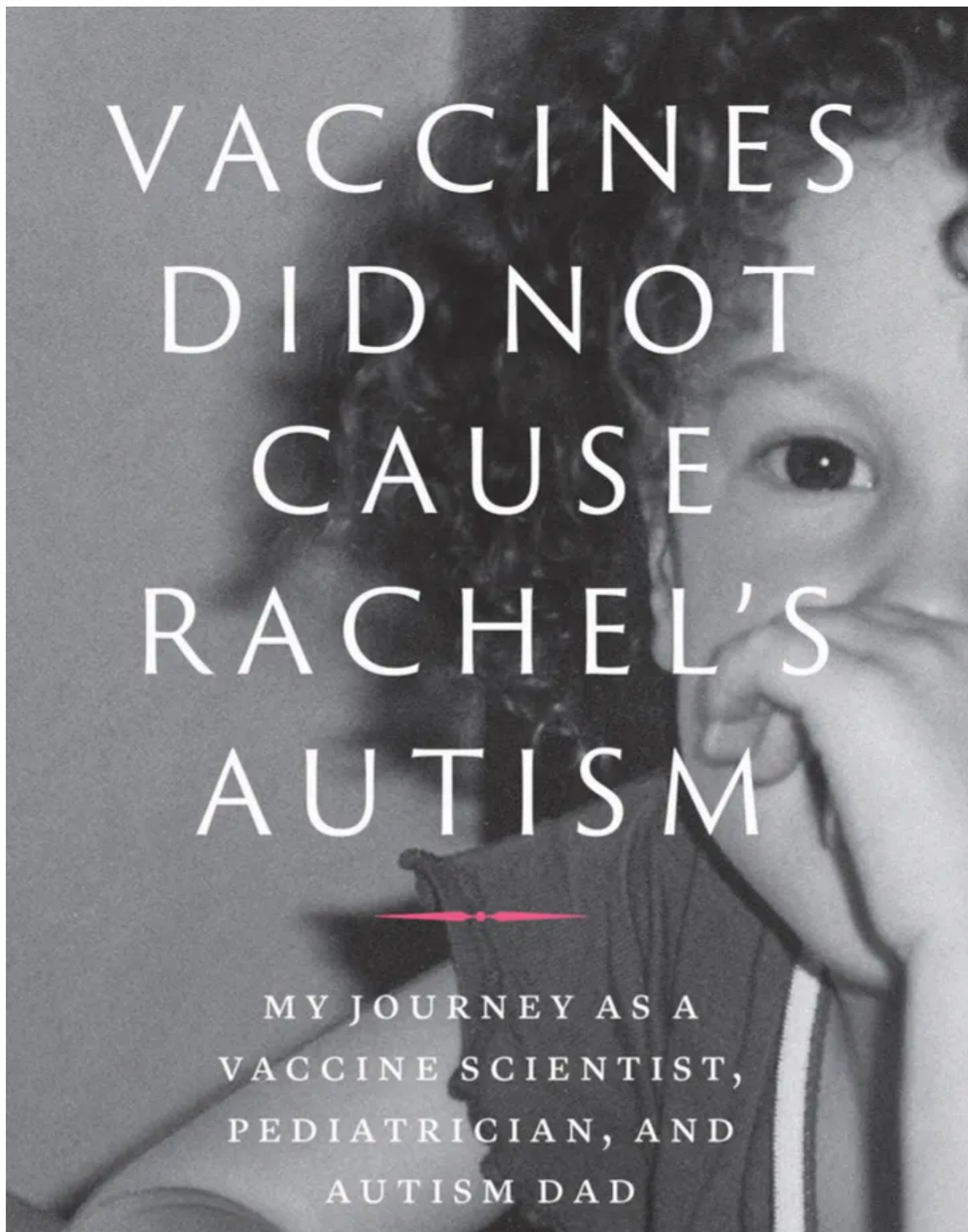
Peter currently serves as the Dean of Baylor's School of Tropical Medicine. This position is a bit unique as there are very few medical schools in the country with tropical medicine programs (Hawaii has one, but that is because it is in the tropics), and in all other cases, these programs are departments led by a Chair instead a Dean.

Although it is very difficult to prove that anyone is lying, I believe Peter's [written statement](#) about his current job proves he deliberately lied when he stated at the end of the previous Rogan clip that vaccines do not contain chemicals:

“I can personally say that when we're advancing one of our neglected disease vaccines to clinical trials and submitting investigational new drug filings to the FDA, we have to justify and prove the safety and necessity of **each component**.”

Peter is well known for publicly speaking out against individuals linking vaccines to their child's autism (he does it a lot). Peter takes this topic quite seriously and *bravely* published [a book](#) on the topic he regularly cites as proof to dispel any arguments linking vaccines to autism.

PETER J. HOTEZ, MD, PhD



In writing this article, I decided to finally read his book. Its content makes it very clear that Peter is a vaccine cultist, and will reframe every piece of information to support his

preexisting beliefs. Despite that, I was still in disbelief when I found this passage within his book.

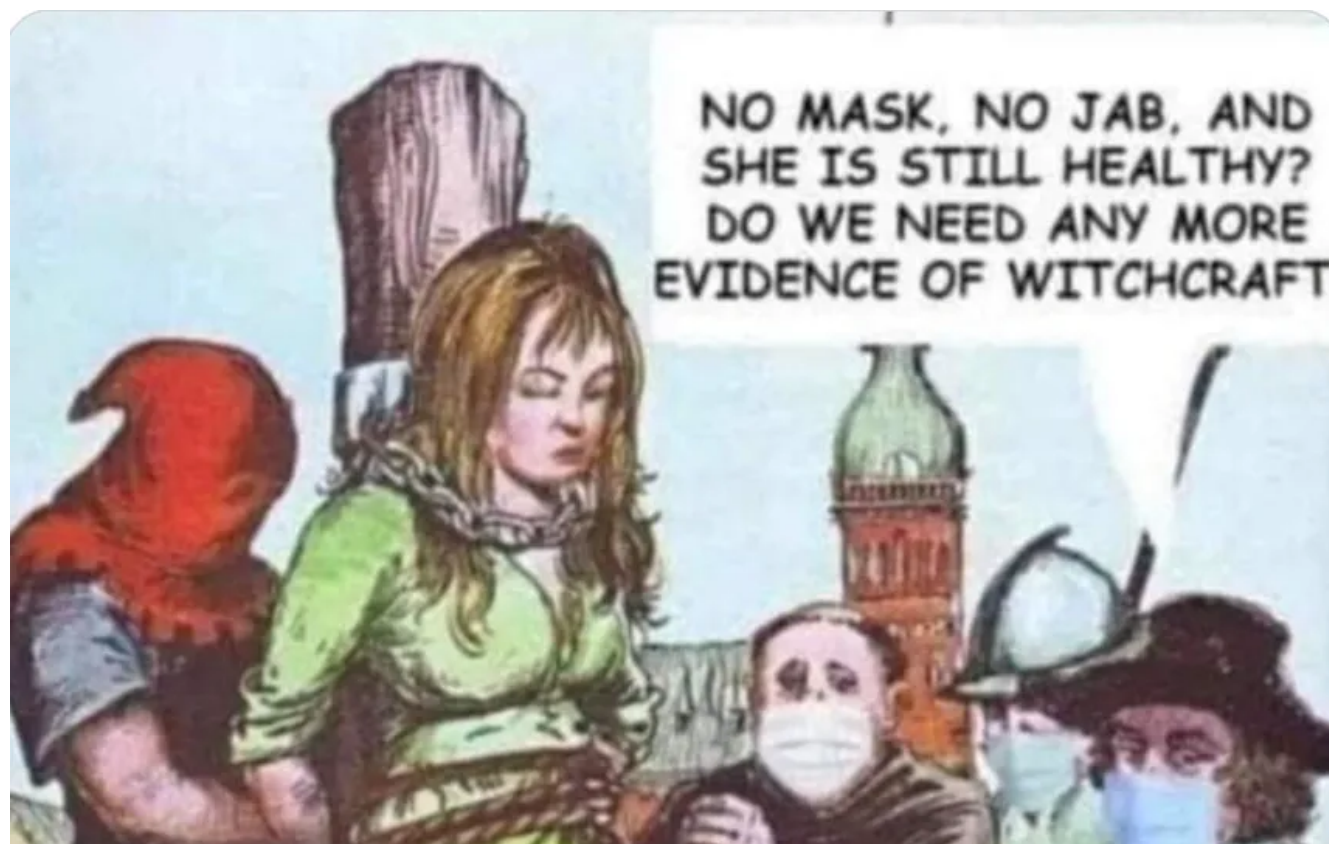
The First American Anti-vaccine Movement

Our current situation, which began in 1998, is not the first time that anti-vaccine attitudes have threatened the health and safety of Americans. Anti-vaccine movements have been around in one form or another since the founding of the American colonies. The Reverend Cotton Mather was a Massachusetts Puritan minister who sometimes got it right, but at other times he came out on the wrong side of history. Mather was a proponent of the Salem witch trials but was also arguably America's first great vaccine champion.

My jaw dropped when I read all of this. It does however help to explain why Peter is so eager to silence dissenting scientific viewpoints.

This period also ignited the first major American anti-vaccine movement. In response to variolation pamphlets written by Mather and his proponents, some local newspapers objected, while other area physicians wrote countervaccine pamphlets condemning the practice. Some suggested that variolation violated natural laws put forth in the Bible and other religious writings [1]. Things reached their nadir when the objectors to vaccination tossed some sort of homemade bomb into Mather's home. Appended to the device was a note that read, "Cotton Mather you dog, dam you! I'll inoculate you with this; with a pox to you" [1]. (Such a story reminds me that perhaps I should complain less about the snarky or even mean-spirited e-mails, memes, and tweets that I receive from my anti-vaccine critics!)

Note: Like the COVID vaccines, smallpox vaccination (or variolation) [routinely failed](#), and [was frequently catastrophic](#), which helps to explain why Peter and [Reverend Mather's](#) mandates provoked such strong animosity from the general public.





Did Vaccines Cause Rachel's Autism?

Note: I was on the fence about writing this section (I don't feel that it is fair to bring someone else's children into a debate), but due to the amount of damage that Peter has done to the autism community, I believe it is appropriate to examine the central thesis of his book.

As far as I could tell (I tried to give him the benefit of the doubt on this one), Peter was unable to establish what caused Rachel's autism or to prove that vaccines were not responsible for it.

Although Peter provided a somewhat ambiguous timeline of what happened (he only states that his daughter has perfectly adhered to the CDC vaccine schedule, and gets annual flu shots), what was written suggests that Rachel's progressive decline coincided with her vaccinations. The most important details I found were as follows:

Ann told me that in infancy Rachel did not “mold” to her contours the way [her older brother] Dan did. I think it's helpful to hear in Ann's own words about Rachel's first few months: “Rachel's body had a different feel when I held her. She felt stiff and not relaxed from the time that she was a very young infant.”

Vaccine-injured children will often show alterations in their central nervous system, which results in an excessive muscle tone throughout their body (one neurologist I trust eventually concluded this change results from microstrokes to the [pyramidal tracts](#) and [extrapyramidal system](#)).

Note: the opposite (a general floppiness everywhere) can also occur.

It is also important to recognize that vaccine injuries [are typically cumulative](#) and each successive injection produces a more severe reaction than the previous (hence why severe reactions to the second mRNA vaccine are more common than reactions to the first, particularly if a concerning reaction had already happened). This is equivalent to successive strokes or traumatic brain injuries each being more damaging than the one which preceded it.

“Probably Rachel’s most notable feature as a baby, besides not wanting to be hugged, was her loud and piercing cry, which in the beginning our pediatrician had ascribed to colic..Rachel’s elopements, colic, and crying made the house a much more stressful place than it had previously been. We remember that unlike the other children, Rachel was enormously difficult and not often very “fun.”

Rachel’s piercing cries could be heard up and down Buttonwood Circle in Cheshire, as I tried to calm her down. She was about two months old and it was colic, we were quite sure. Ear infections, persistent colds, and digestive problems all *could have* contributed to her distress. Doctor’s visits confirmed mild illnesses and we carried on.

I, and colleagues with far more experience in this area, have observed that infants who are vaccine-injured will often develop a cry identical to the one Peter describes immediately following vaccination ([Andrew Moulden](#) also emphasized this point). The quality and feel of this cry along with its persistence (and its periodic transformation into a more severe vaccine injury) have led my colleagues to suspect it is a symptom of brain inflammation.

Furthermore, one of my colleagues performed fundoscopic examinations of dozens of infants in this state who were brought to the ER and consistently observed signs inside their eyes that a degree of brain swelling (which is painful) was occurring. It should also

be noted that DTP, the vaccine [most frequently associated with brain inflammation](#) is given at 2 months of age.

This cry is quite disturbing, and observing it before I entered medicine (I am sensitive to things like this) was one of the things that clued me into there being something very wrong with the entire vaccination paradigm. Infants can only communicate by crying, and mothers frequently recognize that cry is the infant trying to tell them something is very wrong. Unfortunately, the “experts” the mothers then consult tend to label the cry as “colic” since pediatricians are never trained in any other way to interpret it ([this process also explains why doctors lack the ability to recognize many other critical diagnoses](#)).

To share one of many examples, on a pediatric rotation, I saw a little girl recoil in terror when the nurse walked in with a vaccine, screaming “*Mommy you promised not to do this to me.*” The nurse assured the mother her child was just psyching herself out about the needle and that the pain would be over by the time she noticed the needle had gone in and it was already out. The nurse took the child to another room away from the mother while another nurse forcefully restrained her, and I saw the pain and then shrieking start a few seconds *after* the vaccination was completed. It persisted for the rest of the visit and by the time the girl left, she was demonstrating subtle signs of neurologic injury that were not recognized by any of the staff.

Peter, who like many in the medical field, lacks critical observational skills, instead dismisses this diagnostic sign by arguing:

The period between one and two years of age is when brain volume increases and ASD [Autism Spectrum Disorder] is frequently diagnosed. That same period is also an important time in a child’s routine vaccine schedule...The fact that children often cry when they receive vaccines reinforces this supposition. In our case, Rachel would cry longer and with much fiercer intensity than our other children. When children on the autism spectrum receive their vaccines, this can become both an unpleasant and very memorable event.”

Vaccine pushers love to claim vaccine skeptics claim correlation without causation but typically fail to recognize how they routinely twist correlations into fitting their own world view.

A routine schedule exists to have children see their pediatricians at certain ages (these primarily serve to sell vaccines and [push unhealthy infant formula](#) on the children). Let's quickly review the vaccines that were given in 1995 (Rachel was born on 10/14/92):

Vaccine	Birth	2 Months	4 Months	6 Months	12 Months	15 Months	18 Months	4-6 Years	11-12 Years	14-16 Years	
Hepatitis B	HB-1	HB-2	HB-3								
Diphtheria-Tetanus-Pertussis (DTP)		DTP	DTP	DTP	DTP or DTaP ≥ at 15 months		DTP or DTaP		Td		
<i>Haemophilus influenzae</i> type b		Hib	Hib	Hib	Hib						
Poliovirus		OPV	OPV	OPV				OPV			
Measles-Mumps-Rubella					MMR		MMR or MMR				

Note: [Children today](#) receive far more vaccines than they did in the past due to [legislation being passed](#) which incentivized making as many of them as possible. I also tried but was unable to find the 1993 or 1994 vaccine schedule, however I suspect they match the 1995 one.

Peter states that at their routine 18-month visit (which is preceded by the 15-month visit), their pediatrician noticed concerning changes in Rachel that prompted a referral to a specialist, which then resulted in her receiving an autism diagnosis one month later. From this timeline, I believe it is quite likely that Rachel received her MMR vaccine (the vaccine most frequently associated with causing autism) at 15 months of age (although it is also possible she received it at her 12-month visit), and then developed symptoms of autism which were recognized at her next visit (but sadly not by Peter *who was also trained as a pediatrician*).

In the chronology Peter presented, Rachel showed a progressive worsening occurred with each subsequent vaccination she received, which eventually culminated in her current situation. I believe Peter's inability to recognize any of this was a combination of poor observational skills and his unwillingness to acknowledge any complicity in her injury.

Occasionally, my colleagues see patients who remember the trauma they were forced to go through from an injurious childhood vaccination, and these conversations have led us to believe the piercing cry is an infant's attempt to communicate that their entire perception of the world has been altered. Additionally, we (and acupuncturists I've spoken to) frequently see patients with a phobia of needles that can be traced to a childhood vaccine injury.

Most of my colleagues believe if vaccines must be done, they should not begin until 2-3 years of age, as prior to this time, children lack the ability to communicate how the vaccines are affecting them (other than the cry most medical professionals ignore), and informed consent must be honored for patients of all ages. There is no medical justification to vaccinate at such an early age (in some cases, such as when the hepatitis B vaccine is received, an infant's immune systems is not even able to mount a proper antibody response to the vaccine).

Additionally, the blood sludging process ([which I and others believe is a key mechanism of harm from vaccines](#)) disproportionately affects the smaller vessels in the body, and until around 2-3 years of age, the size of the developing blood vessels in the brain makes them particularly vulnerable to vaccine induced microstrokes. Many holistic pediatricians have put forward vaccination plans which delay and space out vaccinations (which *does* reduce vaccine injuries). Unfortunately, the medical orthodoxy (Peter included) despises this approach, has fought to prohibit it, and justifies this position because doing otherwise "violates CDC recommendations."

Children of Doctors

In many cases that are shared with me where severe medical injury occurred, I hear a similar story: the patients had a bad feeling about receiving the toxic pharmaceutical (e.g., a spike protein vaccine), they eventually relented because the doctor badgered them into it, and once the life-changing injury transpired, the victim severely regretted ignoring their intuition. To address this question, I consulted with colleagues and we attempted to explain what drives doctors to do this:

The Forgotten Side of Medicine

Why Do Doctors Push Dangerous Pharmaceuticals on Patients?

When the COVID-19 vaccines entered the market, although I expected the vaccine to have a lot of problems, I was completely unprepared for the deluge of injuries that would be shared with me by friends and patients immediately following its rollout. In turn, I felt I had a civic duty to document them (in the first year of this campaign, I came across app...

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3 months ago · 301 likes · 281 comments · A Midwestern Doctor

One of the neglected tragedies in medicine is what happens to the children of physicians. These parents on account of their zeal for being anointed authorities of allopathic medicine often default to solving the problems their child encounters by prescribing pharmaceuticals. When the inevitable injuries occur, it is extraordinarily challenging for them to acknowledge that their faith injured their child, and instead these parents default to [gaslighting](#) their children, and using more medical treatments to treat these injuries.

This has happened to a few close friends (whose parents can **never** acknowledge what actually happened), and I frequently observe physician colleagues lament the poor health of their children. Sadder still, I've observed colleagues lament that their child's pediatrician says that they are not yet old enough for a flu shot and I have quite literally listened to groups collectively voice their outrage that the COVID vaccine was not yet emergency-approved for them to give their children.

Peter of course laments how Rachel's condition has affected his life:

“Some recent estimates indicate that the costs of a child with ASD can be in the millions of dollars over a lifetime. In our view, that seems about right. And then

there are the intangibles. Finances aside, it is and has been enormously stressful having Rachel in the house for the past 25 years. The full toll on us and her siblings remains to be fully determined.”

He writes much more than this, and discloses at the end of the book that they are still struggling to find some type of life for Rachel to live.

Given that doctors will never admit to injuring their children, I was also curious to see Peter’s argument for why vaccines could not have caused his daughter’s autism:

“Early on, meaning from the time Rachel was first diagnosed, it was clear to me that autism is a complex neurologic and developmental process or group of processes that **must** stem from alterations in the brain architecture and neurochemicals beginning way before birth. *I felt* that the complexities resulting in ASD could only be explained by genetic or epigenetic (how the genes are subsequently modified through biochemical and related processes or mechanisms) events before or immediately after the time of conception—in other words, way before infants ever receive their first vaccinations. If there is an environmental component to autism, ***it would have to be some type of prenatal environmental exposure.***”

One of the most common errors you see in modern “critical thinking” is someone debunking an argument by arbitrarily declaring a few premises to be true which are then used to dismiss the unorthodox position (I tried to cover a few of the most memorable COVID-19 examples [here](#)). Beyond the **need** for it to be true, Peter’s basis for his assertion was that:

- He observed abnormal changes in Rachel which preceded her autism diagnosis and assumed she must have been born with them (whereas it could also have meant he failed to recognize a progression of vaccine injuries that eventually lead to autism).
- He cited MRI studies that showed abnormal brain enlargement that preceded the symptoms of autism (and fails to recognize what else could have caused this).

Peter also cited the common orthodox position that every single scientific study disproves the link between autism and the vaccines (which is not true). Many readers

have asked me to cover this topic and discuss this research. My time to write is limited (I have so many things I want to cover which I have not gotten to) so I prioritize, carefully presenting important subjects that are not otherwise being discussed, and the only reason I have not broached the autism subject is that there is a lot of ground to cover and many others have already produced excellent work on it.

However, I will share that I and colleagues know a large number of parents who observed nearly identical symptoms (including cognitive decline) in their children immediately following vaccination. Since this sample includes a few people I am very close to, I am not particularly inclined to support Peter's position that all studies debunking the link between autism and vaccination are robust while those supporting it are fraudulent. The best illustration of my sentiments can be found in this brief video:

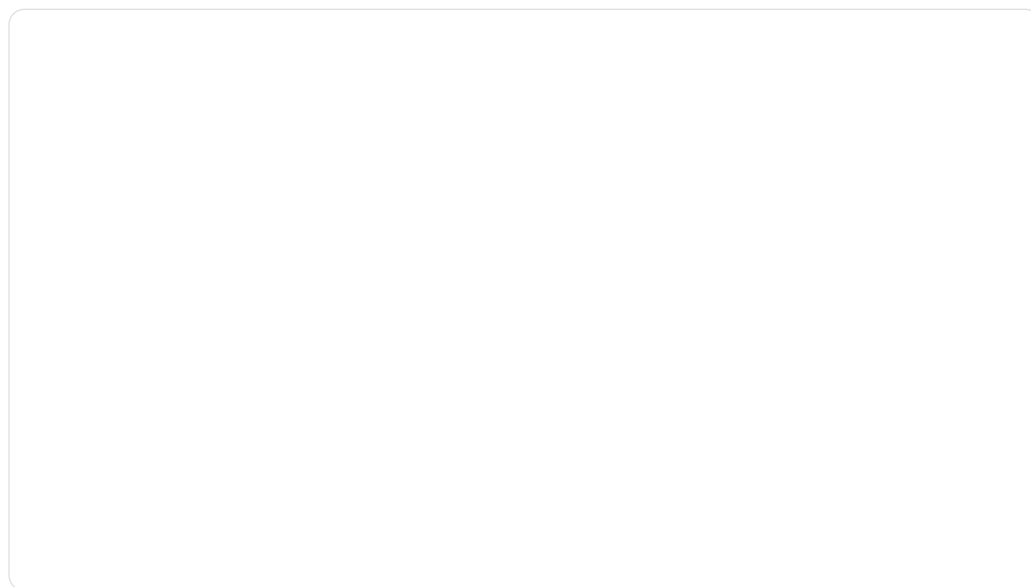


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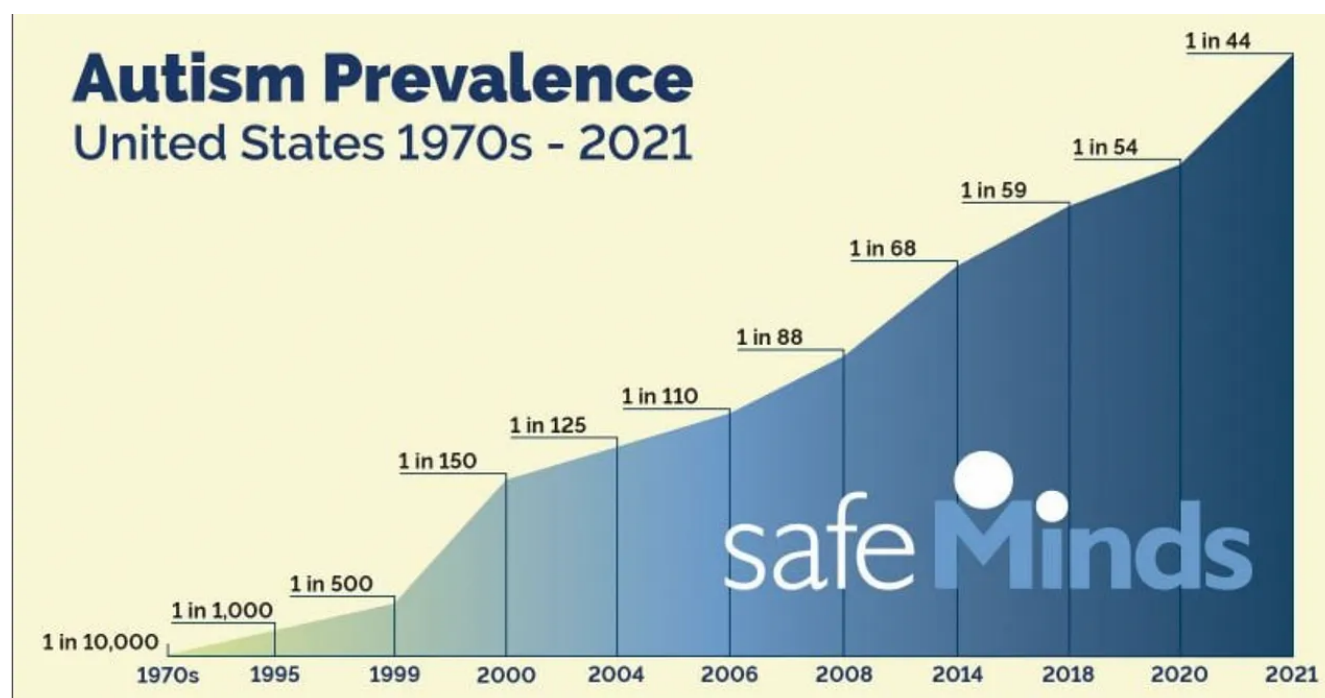
I have met a fair share of people with identical experiences to the parents in this audience.

I suspect that in the near future we will see the same for those with COVID-19 injuries, and like before, almost everyone will deny they exist.



10:19 PM · Dec 26, 2022

There has also been a massive spike in autism that directly coincides with the increasing administration of vaccinations (but is curiously absent in unvaccinated populations).



Since a trend like this could only come from the introduction of an environmental toxin (autism used to be *very rare*), it puts individuals like Peter in a challenging position. The typical response, which Peter also utilizes throughout his book, is to instead argue that it is due to complex interactions of genetic factors which will eventually be understood in the future with more research, rather than looking at the toxic exposures which have been repeatedly linked to this epidemic.

Parents of Autistic Children

One thing that is rarely appreciated about medical injuries and other complex illnesses is how disproportionately they affect the poor who often don't have the choice to stop working just because their bodies are falling apart and who typically cannot afford most of the support or services necessary for mitigating these diseases.

The current autism situation is tragic, especially when you consider that the parents of autistic children have a horrendous burden (**most do not have the luxury of the**

physician's salary that Peter receives). Worse still, in my medical career, I've seen cases of the parents separating (as the father cannot handle the child) and the mother being economically forced to settle for a new partner who has no compassion for the child's difficulties and instead abuses them.

What is so unfortunate about this is that autism can be partially or fully addressed through integrative medical therapies which acknowledge the injury (a few of my colleagues specialize in this area and I have utilized their approaches for a few people I am close to). Many parents of autistic children also find that dietary modifications (e.g., avoiding the junk food Peter loves to eat with Rachel) are very helpful for their children. Given all of this, how do you think Peter responds to the situation?

Scientist "The Anti-Vax Lobby Owns the Internet" | Joe Rogan



Peter insists there is a grand conspiracy of anti-vaxxers with nefarious motives who have monopolized the internet, and he actively disparages the approaches that parents far less privileged than him desperately try out for their children. Most importantly, he affirms his commitment to never debating the other side under the rationale that Robert F. Kennedy is the equivalent of a Holocaust denier, and thus should never be given any type of platform for a debate. As this interview shows, Peter is not the most suited to debating a skeptical audience, which helps to explain why he only appears [for softball](#)

[interviews](#).

In his book, Peter rationalizes his hostility to these parents because their attempts to draw attention to the autism-vaccine connection have resulted in social services being diverted away from adult autistic children (Peter in turn is upset the available services do not meet his family's current needs).

This argument is somewhat nonsensical—when you consider the number of autistic children that are now emerging, and their immensely complex needs, there will never be sufficient resources to provide social services to all of them. Similarly, consider how poorly we treat the elderly because we lack the resources to address their needs, while at the same time [treatments that could restore their independence are kept off the market](#).

I instead suspect Peter's hostility arises from his faith in vaccinations being challenged and the possibility being raised that he could be complicit in what happened. However, it should also be noted that he has taken money from the vaccine cartel [for decades](#).

In his remarks, Dr. Hotez remembered the decision he made in 2000 to come to GW from Yale University.

With a grant from the Bill and Melinda Gates Foundation, Dr. Hotez and his colleagues could afford to be choosy. “With this substantial funding, we could have gone almost anywhere in the country,” he said. “So I ask you the rhetorical question: Where does one go in order to learn how to translate genes and antigens and turn them into a bottle of hookworm vaccine?”

Note: Although Peter continually promotes the miraculous hookworm vaccine (e.g., [on his Joe Rogan appearance](#)), he has still failed to produce it, which has led many, including [a reader who worked with him](#) to question why he has been paid for decades to do it. I am not sure if these vaccines are even necessary since we already have cheap and highly medications (e.g., ivermectin) available for treating parasitic infections.

The Decade of Vaccines

In 2010, [at the World Economic Forum](#), Bill Gates announced that [he would commit 10 billion dollars in funding](#) for [a decade of vaccines](#). The [WHO eagerly took up his initiative](#) and [Peter likewise enthusiastically endorsed their actions](#). The [next year](#) Peter moved to Baylor to found their School of Tropical Medicine to continue his endless quest to create new vaccines.

As you might expect, Peter's School of Tropical Medicine has received quite a few [large donations](#), and prides itself on [its partnership with the Gates foundation](#). Peter, likewise, [has authored friendly scientific publications](#) and [spoken in many venues](#) (e.g., [here](#) and [here](#)) to promote the decade of vaccines (for those of you wishing to know more about how industry uses "trustable" third parties to promote their message, it is detailed [here](#)).



To enact his plan, Gates used the financial weight of his foundation to redirect the WHO's priorities toward vaccination. This resulted in the WHO's resources being diverted away from public health projects which had previously helped many (this was shared with me by contacts in the WHO) and the Gates Foundation [causing tragedies across the third world](#) including ones where young women were forcefully sterilized (see [here](#) and [here](#)) or made [to be test subjects for unsafe vaccines](#).

Once that plan was implemented, I watched the Democratic Party's leadership [convert to ardently supporting vaccination](#) (previously the majority of the vaccine safety movement was in the progressive wing of the political spectrum). State legislative battles broke out shortly afterward, and in each case, regardless of how much parents fought, legislators voted down party lines for or against mandatory vaccination. As California served to spearhead this process, [a variety of draconian laws to mandate vaccination were enacted there](#).

At some point in this process, it dawned on me that a push like this (e.g., getting the entire Democratic Party in line with this agenda) required a lot of money—something that could not be obtained from the meager amounts made from selling vaccines to the Third World. Later, it was discovered that in 2016, [Gates crafted a business plan to rapidly produce emergency vaccines](#) which bypassed the normal regulatory process and expedited the approval of vaccines, and appeared to have been the blueprint for Operation Warp Speed (Gates subsequently [made a lot of money](#) investing in Pfizer's vaccine 2 months before COVID-19 officially emerged in China).

As best as I can tell, it was recognized that there would be major barriers to adopting these vaccines (both due to concerns about their safety and insufficient testing time). This was most directly shown in the Event 201 documents (an exercise simulating a SARS virus outbreak that happened immediately before COVID-19 broke out), where widespread censorship of the media [was recommended to combat vaccine hesitancy](#).

Similarly, in 2019, the WHO chose to declare that vaccine hesitancy was one of [the greatest health threats the world faced](#). As you might expect, [Peter was one of the original cheerleaders for this message](#). Since that time, Peter has promoted this message around the country, upped the ante, and has moved closer and closer to declaring his opponents (whom he clearly lacks the ability to debate) mass murderers.

For example, last year, Peter [published an article](#) calling for any criticism of establishment scientists (e.g., Fauci) to be classified as a **federal hate crime and prosecuted accordingly**. Instead of reprimanding this highly unethical behavior (science depends upon debate), the medical profession has bestowed [some of its highest honors upon him](#) (Peter was also nominated for a Nobel Prize [this year](#)).

Not surprisingly, Peter's outbursts have continued to escalate (e.g., he has written many other similar papers trying to claim people disagreeing with him equates to assault and has made false claims [Peter was later forced to retract](#) against independent journalists to support his hysteria against vaccine safety advocates). Those outbursts have now reached the point Peter is making obscene statements like the one [at the start of this article](#).

Readers have also noted he was one of the regular commentators on the local news spreading false pandemic hysteria throughout 2020, best illustrated by this montage of his tweets:

Prof Peter Hotez MD PhD @PeterHotez
Rip apart the Trump antisience White House disinformation campaign, **Putin weaponized health communication**, the right wing extremist antivaccine attacks against me playing out on Fox News weekday evenings, antivax PACs? Not a problem. But Tik Tok? OMG pure dread and raw terror.

Ashish K. Jha, MD, MPH @... · 2021-04-17
My 14 year-old is telling me I have to make a Tik Tok video about vaccines

This is a terrible idea. I'm going to embarrass myself. ...
Show this poll

9:01 PM · 2021-04-17
285 Likes 34 Retweets 1 Quote Tweet

Prof Peter Hotez MD PhD @PeterHotez
Some tough decisions this weekend, next few days, regarding benefits vs risks **of implementing quarantine around US cities with high #COVID19 transmission**

7:52 PM · 2020-03-28
134 Likes 22 Retweets 2 Quote Tweets

Prof Peter Hotez MD PhD @PeterHotez
First, **halting delta transmission through vaccination** is a high bar but it's doable. It means pretty much all of the adults and adolescents. Defeatism saying it's not possible is unhelpful. We need more ambassadors for the red states. Living here in Texas I'm willing to help.

7:38 AM · 2021-11-03
483 Likes 76 Retweets 4 Quote Tweets

Prof Peter Hotez MD PhD @PeterHotez
Fourth and final, we **need to vaccinate the kids**. It's imperative to do this to protect them from hospitalization and longcovid, but as I point out this AM in [dailybeast](#) it will also help the

[ailybeast.com](#)
Myths, and Complacency Stand Between and the End of the Pandemic

M · 2021-11-03
472 Likes 84 Retweets 3 Quote Tweets

Prof Peter Hotez MD PhD @PeterHotez
Second, we must change the definition of what it means to be fully vaccinated. I was disappointed when FDA/CDC advisory committees voted down **universal 3rd mRNA immunizations**, that needs to be fixed. We need this to both prevent longcovid, halt transmission

7:40 AM · 2021-11-03
485 Likes 85 Retweets 6 Quote Tweets

Prof Peter Hotez MD PhD @PeterHotez
As I've said repeatedly, with this raging transmission **the only we'll get through in person classes** is if 1) everyone walking into the school is masked (possible exception of some special needs kids), and 2) everyone **12 and up is vaccinated vs COVID19**

[cdc.gov](#)
The Delta variant spreads easily in indoor spaces when people are unmasked and unvaccinated

[cdc.gov](#)
Outbreak Associated with SARS-CoV-2 B.1.617.2 (Delta)...

Prof Peter Hotez MD PhD @PeterHotez
Third, we must recognize that the **immunity to infection and recovery is not robust**. Such individuals need to be vaccinated. Otherwise they are at risk of reinfection from delta by a factor of 5-6

[cdc.gov](#)
Laboratory-Confirmed COVID-19 Among Adults Hospitalized ...

45 AM · 2021-11-03
97 Likes 91 Retweets 2 Quote Tweets

Prof Peter Hotez MD PhD @PeterHotez
Looks like I've tested positive for COVID, moderate symptoms of fatigue, headache, sore throat, isolating at home doing zoom meetings. I'm grateful to have been vaccinated/boosted, which certainly prevented more severe illness. Just started Paxlovid. Transmission up, be careful.

5:40 PM · 2022-05-09

24.8K Likes 3,230 Retweets 695 Quote Tweets

Conclusion

One of the most fascinating things about the era we currently inhabit is how bizarre much of the propaganda we've seen over the last two years is (e.g., [this was recently aired in Russia](#)). Because much of the COVID-19 vaccine campaign went against all common sense, an extremely aggressive propaganda campaign (possibly the most aggressive in history) was utilized to sell the vaccines.

I am quite curious to see how some of the more memorable examples will be looked at in the future, once this mass psychosis breaks. For example, this promotion was put together by Hawaii's health department (notice how accurately it represents Peter's position in [the Joe Rogan clip](#)):

DOH New Year's vaccine video draws fire before it's pulled



One of the most depressing examples I discovered came about last year:



**MAKING A LIST.
CHECKING IT TWICE.
GONNA FIND OUT WHO'S
VACCINATED AND NICE.**

**Bring your 5-11 year olds to get
vaccinated and see Santa!**
Get your Shot for Santa and receive a
\$100 Visa Debit Card when you get your first
dose of the COVID-19 vaccine.

WHEN:
SATURDAY, DECEMBER 11 • 5-8 PM

WHERE:
THE GREEN AT
10155 PERKINS ROWE

TAKE YOUR SHOT FOR \$100 **BRING BACK LOUISIANA**

As hard as that is to believe, Canada actually aired the same message this year:

Dr. Tam's holiday health check with the North Pole



One of the things I am the most hopeful for in our current era is that the internet has the power to invalidate traditional propaganda. This is because [the model our society has revolved around for a century](#) (spending a lot of money to produce a message and then blasting it across every major media source) [has been disproven by the internet](#).

For example, [the WHO tweet](#) two weeks ago that inspired this article has not been seen by that many people (2000 retweets, many of which came from those criticizing its message), and that video segment took quite a bit of effort to produce. Conversely, in less than a day [Joe Rogan's criticism of Peter](#) (which took about 30 minutes to find, clip out, and tweet) was seen by over 3 million people (the previous [tweet](#) criticizing the WHO's tweet has also passed a million views). Similarly, [Robert Malone's tweet](#) of the article I produced on the German data has received nearly 800,000 views.

As the above examples show, the vertical propaganda model is no longer viable, since anyone who publishes the right message can be seen by far more people than whomever the legacy media is being sponsored to promote. Furthermore, there are not one or two people doing this; millions of people online are trying to produce content that changes the narrative and the internet **continually selects for the most persuasive messages to go viral**.

Peter who is understandably frustrated by this, in [the above Rogan segment](#) attempts to attribute his loss of relevance to a well organized and malicious online conspiracy. The reality however is that his ideas simply cannot compete with the truth in an open marketplace and that his longstanding policy to only do media appearances with friendly hosts who support his sponsors' messages will no longer cut it.

Although Peter's message (that each of us is a mass murderer) is quite disconcerting, I believe it is simply reflective of one of my [favorite phrases](#):

“First they ignore you, then they laugh at you, then they fight you, then you win.”

At this point in time, it is becoming more clear to the public that the vaccines were a scam (e.g., see [this recent poll](#)). These vaccines are not effective, [more and more signs of their catastrophic harms and costs to the economy are emerging](#), and the financial world appears to be recognizing this trend and starting to move against them. I believe this is

also why, as the above examples show, the public is now so open to hearing the opposing narrative that has been [meticulously censored for the last 3 years](#).

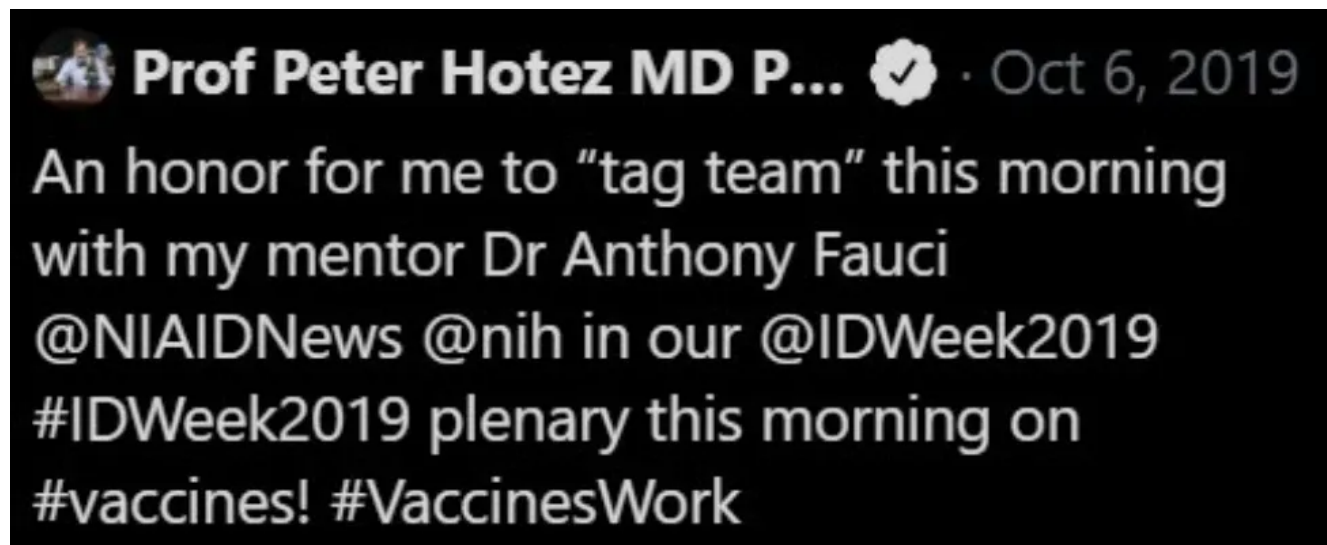
One of the biggest signs that things are changing is that even Paul Offit, one of the foremost advocates for vaccination [rejected the most recent COVID-19 booster](#). Peter being Peter, unfortunately, has not realized this and recently [gave a glowing endorsement of the latest product](#). In an interview 3 days ago, while lamenting the deadly rise of anti-vaccine activists, and that only 7% of Texans received the booster [he stated](#):

“I call it [the refusal to vaccinate more] the greatest self-immolation in American history,” [Peter] Hotez said. “It’s just so tragic.”

Ain’t it?

Please let me know in the comments if you have any other key stories about Peter I need to include in this piece. Peter’s story provides a critical illustration of what happens when insane ideas are shielded from outside scrutiny for decades and why open debate on these issues is so critical for the health of society.

Many have argued his current posturing is an attempt to get Fauci’s job (which would be bad since Peter is trying to create a robust censorship apparatus to defend his inability to debate). Although I am not Fauci’s biggest fan, I suspect he also realizes why Peter is not the most qualified individual to be his successor.





I hope you all had a wonderful Christmas and that we won't have to have the same filth (e.g., the examples I showed above) promoted by public health agencies next Christmas.

515 Comments

Thank you again for all your support and I wish you a wonderful 2023!

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Write a comment...



BioMedWorks Writes BioMedWorks' Newsletter 23 hr ago **Pinned**

Midwest Doc

Amazing, after 3 years of enduring relentless attacks from the far right claiming I'm paid by pharma (I'm not), or leftist media (nada), or I'm in a globalist cabal with the World Economic Forum (never been invited) this is what they finally pin on me...

Well, separate from my work at NIH with Fauci, in late nineties I worked with the emerging small nonprofit at Georgetown Univ: Sabin Vaccine Institute. It rapidly grew and I was ousted; Peter Hotez brought in along with GAVI monies. They were pulling together the dengue vaccine initiative. He went to Texas because of the vax trials going on there. I was frequently up close and personal with Hotez. Saw him in action and over time.

He really is a sociopath. Works directly for the Deep State Cabal.

Laura Kragie MD biomedworks.substack.com



138 Reply Collapse



...
 onenewspage.com
25 replies by A Midwestern Doctor and others
 "Junk Food-Aholic" scientist wants anti-vax surveillance || Ryan Cristiàn
 "Junk Food-Aholic" scientist wants anti-vax surveillance || Ryan Cristiàn:
 #PeterHotez.. News video on One News Page on Monday, 26 ...



Mauro Dec 26

30.1K 29 34 313

After studying the subject of vaccines, I lost faith not only in vaccines but also the entirety of allopathic medicine.

The podcast can be viewed [here](#) and does an excellent job at reviewing Peter's conduct.

94 Reply Collapse

48 replies by A Midwestern Doctor and others

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