

Misuse of the Fatwā of Shaykh Ibn Bāz (رَحْمَةُ اللَّهِ) on the Ruling on [Preventive] Treatment and Vaccination

Abu 'Iyaad

2 Muḥarram 1443 / 10 August 2021

Version 1.24



Essential summary: Fatwās of scholars on the permissibility or commendation of taking preventive treatments cannot be used to vilify people who live in lands where they are not required to take injections and still have free choice in the matter. They cannot be deemed sinful or having opposed Allāh and His Messenger (صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ). Further, the ḥukm shar'iyy of a Muslim authority effectively forcing subjects (albeit in an indirect way) to take an unproven, experimental injection, tying their livelihood and movement to it, while there exist many alternative preventive and curative treatments has not been adequately addressed. These fatwās on permissibility of preventive treatment do not constitute proof in that matter and cannot be used.

Statements of scholars such as the one presented below from Shaykh Ibn Bāz on **the mere permissibility** of taking preventive measures to ward off disease before its occurrence, this being a matter of personal choice, are not under dispute.

Recently, this fatwā has been used and applied to the current situation of **policies of experimental injections**¹ that are still in

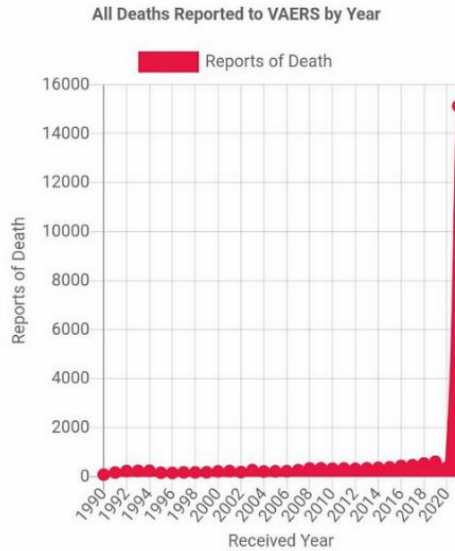
¹ While these injections are not being physically forced on people, it is clear that the policies are meant to punish and disadvantage people in their livelihood and their ability to work and subsist, making it an indirect form of coercion, despite being presented and marketed as “voluntary”.

clinical trial, against people’s will, through indirect means of coercion. Injections which have so far been **fatal to tens of thousands of people at minimum** in only the US, UK and EU alone, at rates multiple times more than all deaths caused by vaccines combined in the past two decades. They have been injurious to many millions more and growing.

This injection is being made “voluntary” under threat of penalties, deprivation of livelihood and inability to participate

in society in many countries across the world.² This is in relation to an illness that has **a 99.5% minimum survival rate** for people under the age of 70 with no underlying conditions³ and which is overwhelmingly, nothing more than a rebranding of the common cold, flu and other known illnesses through PCR test fraud.

This article has been written to exonerate Shaykh Ibn Bāz, in that his speech is being stretched, extended and misapplied to the current situation, outside of what he intended by his fatwā.⁴



² This is leading to poverty, adversity and ruin for many and also forcing people out of jobs, restricting access to basic needs and limiting participation in society and economy.

³ Based on data from Sweden, refer also to Professor John Ioannidis, here: <https://www.medrxiv.org/content/10.1101/2021.07.08.21260210v1.full.pdf> and listen to various UK chiefs describe the mildness of the disease here: <http://cv2020.s3.amazonaws.com/video/covid-severity.mp4>

⁴ The policies of lockdowns, social isolation, coerced injections are causing death, harm, injury, deprivation and loss of livelihood, food shortages and destruction of the economy, and have led to tremendous discontent in every

Likewise, to defend and exonerate other scholars whose words may have been misconstrued and stretched.

The fatwā of Shaykh Ibn Bāz only speaks of preventive medicine, in this case vaccination, as being permissible, as a matter of personal choice.

These general fatwās on the mere permissibility of preventive medicine—*inapplicable to the unfolding realities we are observing across the world*—are being used to criticise or attack sensible, well-informed, educated people who have grave concerns and serious questions about this controversial, dubious, suspicious injection upon concrete empirical evidence. They are being declared “misguided in religion” for having a sound evidence-based medical opinion in this matter that is held by hundreds of thousands of doctors and specialists, **the majority of whom are actually pro-vaccination in general.**

These people appear to be conveying the idea that the health authorities of Saudi Arabia in particular have a worldwide, exclusive monopoly on views on contagion, medicine, medical information and treatments which Muslims in every part of the world are obliged to follow. Even the Saudi authorities do not claim this, nor do the major scholars of Saudi say this either.

Thus, speaking with a different worldly medical opinion despite it being the opinion of tens of thousands of doctors, scientists, professors, and even the health and/or scholarly authorities of other nations, Muslims included, in a worldly matter of known differing, is, according to them, sin, disobedience and “*khurūj*”.

If they had said that this applies only to Saudi Arabia, for its own subjects—just as the policies of each country only apply to the country’s own subjects—there would be no issue at all. As we

nation. These affairs have been falsely blamed on a virus when its true cause is exaggeration in the matter of contagion and misguided, unscientific policies being directed by the World Bank/IMF/WHO for the pursuit of broader agendas and they have little to do with a virus, illness or pandemic.

explained in a lengthy previous article,⁵ each Muslim country’s ijtihād in this matter applies to its own subjects and the policies of one country cannot be imposed upon subjects of other countries.

However, there are people who wrongly think that an exclusive worldwide monopoly on scientific and medical truth belongs to one country alone which overrides and supercedes policies of all other countries in a worldly matter of differing—[in which nations are actually free to devise their own policies for their own subjects, upon their own evaluations, orientations in medicine and standards of evidence]—and that no matter where a Muslim lives in the world, he must follow the policies of that one country.

Thus, if you are a Muslim in Tanzania for example, or Madagascar, or Florida in the US or any other country whose leader, or authorities, or doctors, or scholars may oppose masks, distancing or injections or do not mandate them, leaving them as a matter of personal choice without penalty or disadvantage, and you are a medical professional, or academic with a background in the field in that country, supporting this position, or the position of its doctors or scholars, that you cannot express your medical opinion in these matters, on vaccination in general, or the Covid injection in particular, because this entails “*khurūj*” against the authority. But which authority?

The authority of another country, thousands of miles away, which you don’t even live in, are not even a subject of, and are not even bound by its policies in relation to a worldly matter in which doctors, scientists, professors, institutions and nations have greatly differed over, and as for vaccination itself, then it is an issue riddled with dispute and controversy for the last two centuries and remains so today.⁶

⁵ <http://cv2020.s3.amazonaws.com/ai-writings.pdf>

⁶ There is no dispute about vaccination being permissible, rather the issue here is one of imposing burdens of sin upon people who have decided not to take a specific experimental injection in these current events.

And this is despite the fact that all of these issues are openly debated and discussed in any case among doctors, specialists, in journals and elsewhere, they are raised, discussed, debated in parliaments and senates of nations and are not hidden.

When they quote, stretch and misapply the fatwās of scholars, they create the impression that what they are saying is what the scholars themselves are saying, when the reality is otherwise and those listening to them may not be wise to this.

If something takes the ruling of being permissible (mubāḥ), or even commended (mustaḥabb), a person is not sinful for not doing it, and what Allāh and His Messenger made permissible or commendable cannot be made obligatory, neither by any scholar, nor by any government or ruler.⁷

General fatwās like that of Shaykh Ibn Bāz on preventive medicine do not explain whether the coercive policies and actions described above are permitted in the Sharī'ah from a fiqh point of view, and nor do they outline the conditions and restrictions that must be attached to these policies if they are indeed deemed permissible.

Further, general texts pertaining to “taking the means” and “obedience to the rulers” are not sufficient on their own as evidence for the lawfulness of these types of policies and the alleged religious obligation of taking the injection for Muslims in every country in the world, at least not in the absence of safeguarding conditions such as:

—1. The absence of any warranted suspicion against the manufacturers, promoters and beneficiaries of these worldwide vaccination policies, and they are a) Communists and other disbelievers with known and openly declared agendas, b) corporate criminals convicted in courts of law and fined billions,

⁷ The only situation where treatment becomes obligatory as explained by Muslim scholars is when the sick person would die and the treatment is known with a degree of certainty to save his life.

with repeat offences, and c) openly declared Eugenicists and population reductionists.

—2. Independent laboratory research, analysis and verification of the contents of these injections and their claimed safety and efficacy with actual experiments.

—3. The complete nonavailability of alternative treatments, preventive and curative.⁸

—4. The provision of medical and non-medical exemptions⁹ and in the latter, religious conviction should also be included¹⁰,

—5. Clearly defined and active policies of compensation for death or injury from the injection and/or

—6. The ability to take doctors or health authorities to court for misinformation or not providing full informed consent¹¹,

—7. and others.

These conditions qualifying the obligation would safeguard the welfare of the subjects, given that medicine is ripe with corruption

⁸ Effective, safe preventive therapies, meeting the highest standards of scientific evidence exist. See for example, <https://www.cureus.com/articles/76496-therapies-to-prevent-progression-of-covid-19-including-hydroxychloroquine-azithromycin-zinc-and-vitamin-d3-with-or-without-intravenous-vitamin-c-an-international-multicenter-randomized-trial>. This means there is no basis for coercive experimental injection policies.

⁹ Some Muslim countries, including Saudi Arabia, do provide these exemptions at varying levels, may Allāh grant them tawfiq in accommodating people's preferences and needs.

¹⁰ There are religious, moral and medical grounds for being opposed to injections, wherein a person may consider himself sinful in the sight of Allāh for taking them because of the benefit risk principle, and this is a matter of worship, a relationship that the servant has with His Lord in which the ruler should not intervene, especially when there are safe and effective alternatives which a person is willing to take as a way of doing his part in an epidemic to prevent or limit disease. If a believer holds a particular view about contagion and is suspicious of the injections of the disbelievers, he may hold it to be a sin to put his health at risk, especially when he is at close to zero risk of illness or death, and he is willing to take other safe and proven measures.

¹¹ Providing frank, accurate, up to date information on all adverse events, deaths and injuries caused by the injections.

at the corporate level and history has shown that whole nations and their health authorities have been misled through media hype, fearmongering, bought science and snake-oil injections in the past. Refer to the **Swine Flu Scam of 2009**, for example.¹²

In Indonesia—as has been related to me—people are given health interviews to check for comorbidities, asthma and other conditions. As a result, many people are denied the injection, despite wanting it. Other Muslim nations may not provide the same level of individual choice and may have what are by and large blanket policies.

Those that die or are injured, they may be simply branded as “Covid” casualties or their injury or subsequent illness, acute or chronic, is declared coincidental and they are left largely to fend for themselves.

I know and have spoken to people working or studying in Gulf countries whose family members died after the injection or have themselves been hospitalised and some feared death for themselves following rapid deterioration of their health. I have reports from brothers of heart injuries and what is similar.

Since the start of 2021, when the injection rollout started, I have been contacted by many people working in the Gulf countries. They were very distraught about the developing situation, having to surrender to an injection that goes against their medical and religious convictions.

So I advised them that if you desire to remain in the country and this means more to you than avoiding potential risk to your health, then you have no choice, practically speaking, but to take it and you can take steps to prevent or limit any potential harmful effects. Further, that because of your desire to remain in the country for Allāh’s sake, for the environment, for pursuit of knowledge, because of īmān and sincerity, I ask Allāh to invalidate

¹² <http://cv2020.s3.amazonaws.com/video/swine-flu-scandal-channel-4.mp4>
<http://cv2020.s3.amazonaws.com/video/swine-flu-scandal-rt-news.mp4>
<http://cv2020.s3.amazonaws.com/video/swine-flu-scandal-1976.mp4>

its potential negative effect as reward for that īmān and sincerity, and I have never ceased making du‘ā for such people in this predicament, not just in these Gulf countries, but all across the world. In some other Muslim nations, or where there are significant Muslim populations, these same policies are not being applied with the same vigour, and they do have genuine choice as it currently stands. So all of this shows that this is a matter of differing between nations, Muslims included and policies vary in their strictness, harshness, laxity and mercy.

Further, there is a big difference between the ruler ordering everyone to take **Vitamin C, Vitamin D, Zinc, Ivermectin or Hydroxychloroquine** as a means of prevention¹³—about which there is hardly any difference of opinion among *genuine physicians* as forms of safe treatment—and the ruler ordering everyone to be injected with a dubious, experimental injections in clinical trial with a trail of death and injury behind them.¹⁴

In the former case, it can easily be said that taking these supplements would indeed be from the ma‘rūf in which the ruler is to be obeyed, and thereafter, the injection, because of its highly controversial nature, could be offered as a choice for whoever wants it, each person bearing the burden of his own choice.

The point being that **this is a matter of ijtihād and every nation has its own approach, its own decisions and its own preferences** as to how to deal with this situation. There can be good, bad, harsh, soft, broad, narrow, effective, harmful, guided, misguided, evidence based and non-evidence based approaches.

¹³ The authorities of El Salvador distributed to all its subjects a supplement and medication package free of charge and it contained Ivermectin, Vitamins C, D, Zinc and antibiotic medications.

¹⁴ **Note:** The health authorities of some nations are making it clear that they are not forcing anyone to take the injection but only highly recommending and encouraging people to take it, and they deny that they are forcing anyone. This has come from a number of Muslim countries in the Gulf.

The rulers are allowed to make *ijtihād* in these issues, and they can be right and wrong, close to the truth in some areas and far from the truth in other areas, and in all of that, the hand of obedience is not removed from them. Any hardships that arise, then a person has patience and if there are permitted means of redress in the *Sharī'ah*, then he has the right to pursue them and should do so through appropriate channels.

Note: The position of Ahl al-Sunnah towards the rulers is in moderation between that of the **Khārijites**, that of the **Murji'ah**, and that of the **Rāfiḍah**. For we do not incite rebellion and disobedience against the rulers for alleged or actual sin, error and oppression. Nor we do remain silent from making rejection of the evil (*inkār al-munkar*)—[this being other than making rejection against the ruler himself]¹⁵—with the excuse that this will lead to tribulation and thus, should be abandoned. And nor do we behave like the Rāfiḍah who claim their leaders are infallible, as if they receive revelation from Allāh and their *ḥukm* is His *ḥukm*. And alongside that, we do not remove the hand of obedience from them just because they may fall into something of error, sin, innovation or oppression and nor do we resort to what takes place in the lands of disbelief and alleged democracy of protests, marches, demonstrations and so on.

As for obedience to the ruler, it is in that which the *Sharī'ah* permits obedience to him, it is not absolute.

Ibn Taymiyyah said: “Ahl al-Sunnah do not permit obedience to the ruler (*imām*) in everything he commands, rather, they do not obligate obedience to him except that in which obedience to him is permitted in the *Sharī'ah*.”¹⁶

¹⁵ Thus we show rejection against sins and evils such as concerts, music, dancing, innovations and other things prohibited in the *Sharī'ah* which have found their way into society through approval or implementation by the rulers and warn from these affairs, but we do not make rejection against the rulers themselves and incite against them and remove the hand of obedience just because of these affairs.

¹⁶ *Minhāj al-Sunnah* (2/76).

Thus, general fatwās on preventive medicine and its permissibility do not explain whether a person is obligated in the Sharī'ah, when proven and safe alternatives exist, to take an injection **manufactured by corporations convicted in courts law for fraud and bribery, with a trail of and death and injury behind them**. It has not been shown with evidence that this constitutes **the ma'rūf** that requires obedience and **if, how, when and why** a person becomes sinful in such circumstances if he wishes to decline participation in such medical experiments which carry **an empirically proven risk to life and health** and whether he has the right to refuse and to choose preventive treatments of his own choice if he so wishes.¹⁷

There are many pertinent and as yet unanswered questions wherein the judgement of Allāh and His Messenger or the guidance of the Sharī'ah in this scenario have not been made clear with textual evidences **upon an accurate, up to date depiction of the factual realities**.¹⁸

¹⁷ As it stands, an option to decline may not exist practically speaking as doing so would greatly disadvantage a person's life and livelihood, making it very difficult for him to function in society.

¹⁸ There is also the more fundamental issue of Muslims having blindly-followed the disbelievers, materialists and atheists in some of their speculative sciences, particularly **the superstition of viral contagion** for which no scientific evidence has ever been demonstrated.

One should keep in mind that millions of Muslims have been misled by deviants in creed (such as the Jahmiyyah, Mu'tazilah, Ash'ariyyah), thinking their claims to be evidence-based, the origin of their misguidance being the speculative "natural philosophy" (i.e. science) of the Greeks and others. Or how millions of Muslims and many nations have been misled into thinking celebrating the Prophet's mawlid is evidence-based, whereas in reality, they have been deceived by lies, false evidence, distortions and misinterpretations. Similarly, the worldly sciences are also not free from errors, lies, fraud and misinterpretation of observations and evidences, especially, when in the modern era, these sciences are founded upon materialism and infused with evolutionary dogma.

As such, before people can be told, “Fear Allāh, take the jab” and be accused of sin, disobedience, treachery and the likes because of so-called “vaccine hesitancy”¹⁹ and before they are effectively pressured against their religious, medical and scientific beliefs and convictions and oppressively declared to be “arrogant” and “extreme” there are important questions that have to be answered with evidences based on accurately described factual realities.

This is not merely a simple issue of the permissibility of preventive medicine, which include vaccines for those who see

As for virology, then it is a pseudoscience founded on misinterpretation of observations and sleight of hand tricks in laboratories. This situation developed after the failure, over many decades in the early 20th century, to demonstrate the existence of the alleged pathogenic virus particles through experiments based on genuine scientific principles

This has been objectively and scientifically demonstrated and the fraud has been uncovered and is no longer concealable. Resisting and rejecting this reality will be futile.

The “virus” is a theoretical abstraction and a misinterpretation of the detection of proteins and genetic breakdown fragments of cell components in samples. These are consequences of disease states, not their causes, similar to how ash is the result of a fire, not its cause. However, these components are abstracted into a “virus” and sleight of hand tricks and fraud are then employed to present an alleged genetic sequence which has no existence in physical reality. It is pure invention through the aid of computer software.

Because the invalidation of virology as a fraudulent pseudoscience pulls the rug from beneath the charade of the manufactured pandemic, it is very hard for many people to swallow, including Muslims, because of the implications.

However, the truth is the truth, even if it is detested or rejected by the multitudes and hordes.

¹⁹ Many Muslims are following the disbelievers in these terminologies without thinking about whether these terms and their implications are actually legitimate or compatible with the Sharīah. A Muslim cannot be forcefully medicated against his will if he does not desire it, or if he prefers to use an alternative of his liking and preference. Applying these derogatory labels is unwarranted, and all a person is doing by regurgitating these phrases is becoming a mouthpiece and salesman for big pharma.

them as a means, as that is not under dispute and this discussion is outside of that arena.

THE FATWA OF IBN BĀZ²⁰

We present a translation of this fatwā from Shaykh Ibn Bāz with some comments thereafter to highlight the abovementioned important issue in more detail.

Question:

س: ما هو الحكم في التداوي قبل وقوع الداء كالتطعيم؟

What is the ruling on treatment before occurrence of disease such as vaccination?

Answer:

ج: لا بأس بالتداوي إذا خشي وقوع الداء لوجود وباء أو أسباب أخرى يخشى من وقوع الداء بسببها

There is no harm with treatment **if he fears** the occurrence of disease due to the presence of an epidemic **or for other reasons on account of which he fears** the occurrence of disease.

فلا بأس بتعاطي الدواء لدفع البلاء الذي يخشى منه؛ لقول النبي ﷺ في الحديث الصحيح: "من تصبح بسبع تمرات من تمر المدينة لم يضره سحر ولا سم" وهذا من باب دفع البلاء قبل

وقوعه

Hence, there is no harm with taking treatment to ward off the calamity [of disease] that one fears, due to the saying of the Prophet (صلى الله عليه وسلم) in the authentic ḥadīth: "Whoever takes seven of the dates of Madīnah in the morning will not be harmed by magic nor poison."

²⁰ <https://binbaz.org.sa/fatwas/1552/الداء-وقوع-التطعيم-قبل-وقوع-الداء>

This is from the angle of repelling calamity before its occurrence.

فهكذا إذا خشي من مرض وطعم ضد الوباء الواقع في البلد أو في أي مكان لا بأس بذلك من باب الدفاع، كما يعالج المرض النازل يعالج بالدواء المرض الذي يخشى منه

Likewise, **if he fears** an illness and is vaccinated against the epidemic that is occurring in the city or in any place, **there is no harm** with that from the angle of defence, just as a disease that has occurred is treated with medicine, the disease that one fears.

COMMENTS

The Shaykh repeated three times, “there is no harm” and tied it to fear, saying “if he fears occurrence of disease.”

Thus, the ruling is one of permissibility for the one who fears occurrence of disease, whether in an epidemic or outside of it, and this is a matter of individual choice and personal preference for each person. **This is alongside the fact that Allāh did not make medicinal treatment wājib²¹ upon His servants, neither outside an epidemic in normal circumstances, nor within an epidemic and the matter has been left to individual choice.**

As for the claim that it becomes obligatory if the ruler orders with it, then this is not unconditional and absolute due to many reasons, as outlined in this article.²²

Preventive treatment is not restricted to any one thing as the people of the Earth as a whole, in all the different regions have their own ways which they have tried and tested empirically, there

²¹ The scholars explain a situation in which it becomes obligatory, which is when a sick person would die if he does not take a specific treatment that is proven to work and will save his life with some degree of certainty, there being no other treatment besides it.

²² Frankly, this matter would have been for the likes of Shaykh Ibn Bāz, Shaykh al-Albānī, and Shaykh Ibn ‘Uthaymīn who were of exceptional calibre had they been present, and today, it ought to be taken to the likes of Shaykh Rabī, Shaykh al-Fawzān or Shaykh al-Luḥaydān from those who are alive.

being tremendous variation and differing with respect to these ways among specialists and physicians, and Allāh (عَزَّوَجَلَّ) has created multiple avenues for preventions and cures.

Shaykh Ibn Bāz as well as other scholars have speech in this regard wherein they explain that the foundation with medicine is experience (tajribah) and they affirm the existence of many types of treatments, inclusive of **ruqyah** and **du‘ā** and **istighfār**, and **charity**, in addition to **medicines of various types**, upon various schools and approaches in medicine, which people choose from according to their trust, preference and experience.

Thus, whoever denies that:

- du‘ā as a means, *on its own*, or
- the innate healing power of the body placed therein by its Creator (referred to by some as “natural immunity”)²³, *on its own*, or
- seeking forgiveness and repentance, *on their own*, or
- ruqyah *on its own*, or

²³ There is no comparison between what Allāh created of innate healing powers, and man’s attempts to mimic what Allāh created. This shows the importance of what is referred to as “natural immunity” within the germ theory model of disease, which we would refer to as vitality. In the presence of vitality, disease never has an opportunity to arise and set in, except as Allāh wills. Supporting “natural immunity” is better than trying to induce artificial immunity while destroying natural immunity in the process by poisoning the blood, tissue and nervous systems, which is what happens with vaccines. This also shows that the true causes of vitality lie in other than these injections. These injections, conceptually speaking, are nothing more than attempts to manipulate the body and alter its natural balance, skewing one type of “immunity” (adaptive) over and above the other (innate) and you end up having to pay the price, in both the short and long term for doing so. This is because these vaccines tend to alter, corrupt or deactivate the innate immune system which is the major part, whilst overly sensitizing and inflating the adaptive (antibody) immune system, which is only a tiny part of overall immunity. This article from the Washington Post, (upon a germ-theory, big-pharma, pro-vaccine narrative) touches on this subject somewhat: <http://cv2020.s3.amazonaws.com/natural-immunity-humility.pdf>.

—supplementation of various types, on *their own*, and
 —righteous deeds, *on their own*,

are all **independent preventive and curative means that Allāh placed or legislated for His servants, whether outside an epidemic or within it**, then he is an ignoramus who does not know medicine, and nor what He revealed as alluded to by Ibn Taymiyyah (رحمة الله). Anyone who boldly claims that nothing prevents illness before its occurrence save an injection and only an injection alone, then he has additional layers of ignorance on top of that and he is also lying.

His claim constitutes a lie in Allāh’s religion (al-shar’), a lie in His decree (al-qadar), a lie in the affair of medicine itself.

Even the manufacturers of the injections themselves, in their clinical trial designs, do not claim this about their own product²⁴, let alone the fact that reality has disproven this claim already.

Whoever claims that **no preventive treatment exists for Allāh’s servants** except this injection—not du‘ā, not “natural immunity”²⁵, not ruqyah, nor other preventive treatments of choice—but only this injection and it is not permitted for Allāh’s servants to adopt means of their choice, then he is misinformed, deceived, ignorant or simply lying.

However, there is no dispute with anyone who has been led to believe that *vaccination is among the many means* and speaks with that, having trusted those physicians who believe these

²⁴ These injections do not prevent illness and they are not designed or intended to at all, from the very outset. They are designed to be **for therapeutic purposes only**, to make symptoms less severe (and even that is an inflated, unproven claim based on science fraud and virology pseudoscience). The reason behind this is to enable permanent markets and profits to be established for the future and to extract wealth out of nations.

²⁵ Alḥamdulillāh, as it currently stands, some Muslim countries acknowledge and affirm what is called “natural immunity” and do not require those who have had the illness and have recovered to take the injection, though in some cases, a time limit has been placed on such a status.

things based on the doctrine of medicine they have been taught, and who freely exercises his choice to take an injection.²⁶ Everyone can make their own free choice and bear the consequences of their choice. There is no dispute at all over this.

²⁶ Vaccination is based on the flawed germ theory of disease promoted historically by unscrupulous men such as **Louis Pasteur** and **Robert Koch** driven by fame and fortune, and it ignores the true and real causes of disease, reducing it to a simplistic **one germ, one cause, one disease model** which opposes factual reality and denies the multi-causal multi-factorial nature of disease and the workings of al-Qadar. Diseases that were once thought to be “contagious” and caused by a germ simply turned out to be deficiencies in essential minerals and vitamins as root causes, along with lifestyle choices, which once addressed, either make the disease disappear altogether or make it very mild and harmless, without any need or concern for “fighting” and “destroying” any alleged germs. Any alleged germs, if present, were secondary and consequential to the true causes of the disease in question and this is true of all the so-called “infectious diseases”.

The same situation is playing out today with **respiratory illnesses** as it once did with diseases like **scurvy, pellagra** and **beriberi**, all thought to have been caused by a germ and considered contagious, when its true causes are toxicity (from air, food, water and radiation) and malnutrition (poor diets, depletion of vitamins, minerals, essential nutrients). These people fall into the same mistake that the Messenger (صلى الله عليه وسلم) highlighted to the bedouin in the matter of contagion when he said: “*And who/what gave it to the first [camel]?*” The bedouin made an error in causation and ignored the fact that the camels were subjected to the same factors, causes and conditions that led to disease occurring in all of them within a given duration of time, with the notion of “spread” simply being presumed and imaginary. Disease is multifactorial, multicausal and populations are subjected to shared, general population-level factors and specific individual-level factors as a result of which disease is created afresh in each individual from whom it was decreed. Pollution and toxicity from modern-day industrial, electric and radiative environments and deficiencies in Zinc, Vitamin D, Vitamin C and Selenium are significant underlying factors in respiratory illnesses. They are neglected because they are not profitable like patented injections and drugs which do not cure, but only remove or mask symptoms, or offer only a fake, hyped-up, artificial, fleeting type of alleged “immunity” which brings with it long term negative consequences upon health.

This fatwa of Shaykh Ibn Bāz—and others similar to it—about the permissibility or commendability of preventive medicine as a matter of personal choice does not address these current circumstances.

Likewise, bringing texts that relate to “taking the means”, they are also not under dispute and cannot be used here.

Similarly, texts pertaining to “obedience to rulers” are not absolute, especially in the matter of medicine which Allāh did not make obligatory in His legislation, and in which mankind has differed and in which there is also tremendous corruption at the corporate level in the modern era.

These general texts require further qualification with appropriate conditions as well as reconciliation with other texts (see further below for examples), to ensure that subjects are not harmed due to authorities making errors in worldly knowledge, or being misled by international institutions and pharmaceutical companies, as no one is infallible in worldly matters and this has already happened numerous times in recent history.

As for the present circumstances regarding which questions must be posed and relevant fiqh rulings provided with evidences, they can be accurately described as follows—these being the realities which any such rulings must take into account and must be based upon—namely, policies of making people take injections:

- 1. **Under threat of punishment and/or restriction of livelihood and other limitations** what are:
- 2. **Experimental injections in clinical trials promoted by their manufacturers through scientific and academic fraud...**²⁷

²⁷ From the fraud of the manufacturers is that in their clinical trial data, used to win acceptance and emergency use authorisation, they presented **relative risk reduction** (~70-90%) of severe symptoms for their injections instead of **absolute risk reduction** (~1%) to greatly inflate their alleged efficacy. The fact

	What they told you it did	What it actually does
	THE MARKETING LIE	THE LANCET STUDY
Job Type	Relative Risk Reduction	Absolute Risk Reduction from Job
Pfizer/BioNtech	95.03%	0.84%
Moderna (NIH)	94.08%	1.24%
Janssen	66.62%	1.19%
AstraZeneca/Oxford	66.84%	1.28%

Source: [www.thelancet.com/journals/lanmic/article/PIIS2666-5247\(21\)00069-0/fulltext](https://www.thelancet.com/journals/lanmic/article/PIIS2666-5247(21)00069-0/fulltext)
 For more information please visit: doctors4covidethics.org

... and are **unproven to prevent illness or its alleged transmission**, making this to be nothing short of forced participation in medical experiments, and

—3. Some of whose components are **derivatives from the faeces of chimpanzees** (Adenovirus vector in Astrazeneca, Johnson & Johnson injections) which are known to induce hyperimmune responses²⁸ and anaphylactic shock in some people, and

—4. Which are shown to have been linked to **tens of thousands of deaths in the US, UK and EU alone**, this being a very conservative estimate, as well as **short and long term debilitating injuries** in others...

that health specialists of nations were unable to pick up on this is a travesty. Refer to the following article:

[https://www.thelancet.com/journals/lanmic/article/PIIS2666-5247\(21\)00069-0/fulltext](https://www.thelancet.com/journals/lanmic/article/PIIS2666-5247(21)00069-0/fulltext) and also <http://cv2020.s3.amazonaws.com/covid-vaccine-efficacy.pdf>

²⁸ “Ad[enovirus]-based vaccine adverse effects include fever, pneumonia, diarrhea, transient neutropenia and lymphopenia, fatigue, labored breathing, headaches, liver damage, and fasting hyperglycaemia. Rare but grave adverse reactions include neuropathies such as Bell’s palsy, Guillain-Barré syndrome, gait disturbance, and transverse myelitis, an inflammatory condition in the spinal cord.” [https://www.cell.com/molecular-therapy-family/molecular-therapy/fulltext/S1525-0016\(20\)30536-0](https://www.cell.com/molecular-therapy-family/molecular-therapy/fulltext/S1525-0016(20)30536-0).

Covid-19 Injection Damage: EU, UK AND US SUMMARY		Estimated Numbers if those reported were just:	
		1%	10%
Region and data entry cut off date	Total Reported	Total	Total
UK Fatalities - 1st September 2021	1,632	163,200	16,320
EUdra Fatalities - 11th September 2021	24,528	2,452,800	245,280
US Fatalities - 3rd September 2021	14,506	1,450,600	145,060
Total Fatalities	40,666	4,066,600	406,660
UK Injuries - 1st September 2021	1,186,844	118,684,400	11,868,440
EUdra Injuries - 11th September 2021	2,292,967	229,296,700	22,929,670
US Injuries - 3rd September 2021	3,146,691	314,669,100	31,466,910
Total Injuries	6,626,502	662,650,200	66,265,020
UK Reports - 1st September 2021	357,956	35,795,600	3,579,560
EUdra Reports - 11th September 2021	929,128	92,912,800	9,291,280
US Reports - 3rd September 2021	675,299	67,529,900	6,752,990
Total Number of Reports	1,962,383	196,238,300	19,623,830

... as well as laying the ground for **long term chronic illnesses** which are now being reported by doctors, such as nerve damage, cancers, heart problems, and

—5. Which are manufactured by **criminal organisations** (such as Pfizer) who have been **convicted in courts of law for fraud and bribery** and **fined to the tune of billions of dollars**²⁹ and who **commit medical and scientific fraud** as well as **bribery** of sorts to make their harmful drugs and injections appear beneficial and necessary, and

²⁹ See <https://www.justice.gov/opa/pr/justice-department-announces-largest-health-care-fraud-settlement-its-history> and also <https://www.justice.gov/opa/pr/johnson-johnson-pay-more-22-billion-resolve-criminal-and-civil-investigations> by way of example only, the list is very long.

—6. These manufacturers having also made clear that these injections are **not** intended to prevent illness and nor its alleged transmission, **but only lessening of its severity or symptoms**,³⁰ and this is by design, in order to secure long term markets and profits for repeat **therapeutic doses**, and

—7. Alongside all of this, **denying people the right and the freedom to choose known and empirically proven treatments of their choice**, both preventive and curative, which many proficient, prominent, famous and renowned doctors across the world have successfully used to cure tens of thousands of people³¹ **and for which there is credible empirical evidence**, and

—8. Ignorantly, falsely and oppressively accusing mothers and fathers of being negligent and legally accountable for not subjecting their children to this unproven, experimental injection, and

—9. Ignorantly, falsely and oppressively accusing **world-renowned and celebrated specialists, scientists, doctors and**

Drug Company Settlements 2006-2015

Company*	Total Penalties 2006-2015	Number of Settlements 2006-2015**
GlaxoSmithKline	\$7.628 billion	26
Pfizer	\$3.458 billion	28
Johnson & Johnson	\$2.822 billion	18
Merck	\$1.890 billion	26
Abbott	\$1.822 billion	15
Eli Lilly	\$1.706 billion	14
Teva	\$1.471 billion	13
Novartis	\$1.230 billion	18
Amgen	\$901 million	12
AstraZeneca	\$669 million	10
Purdue	\$646 million	5
Allergan	\$601 million	2
Daiichi Sankyo	\$586 million	6
Bristol-Myers Squibb	\$583 million	10
Mylan	\$566 million	20
Others	\$3.812 billion	151
Total	\$30.391 billion	374

Source: Public Citizen

* Parent company at time of settlement.

** Includes civil settlements and criminal penalties paid to federal and state agencies.

Calvin Alago/Fair Warning

³⁰ And even this has been empirically proven to be false, because these experimental injections comprise poisoning of the blood, tissue, organs and nervous system, whose harmful effects may not manifest immediately, but after many months, years or decades, so their alleged benefit is overwhelmed by their harm.

³¹ This makes the injection obsolete and unnecessary and thus, denies the large corporations the billions or trillions they can make on their self-engineered future worldwide markets for these injections.

professors—whose credentials, prior to this pandemic, were impeccable and never challenged, rather extolled—of “misinformation” when they raise their legitimate and very strong evidence based concerns, this being a significant threat to the markets and profits of vaccine manufacturers, and

—**10. With the knowledge that the biggest funders and promoters of these injections are also known eugenicists and population reductionists.** They are the same ones that openly claim the world is overpopulated by 90% and that the population needs to be reduced, otherwise the earth’s resources will be depleted and the planet will be destroyed and that this affair is an emergency that needs to be tackled, with vaccination being one of the means to this end. The people of this orientation have already been exposed using injections aimed at impairing fertility in young women in places such as Africa and India over the past few decades, and

—**11. Many court cases have been initiated** in non-Muslim countries, in Europe, Canada, USA, Australia, New Zealand and elsewhere in which **scientific fraud and illegality** has been proven with respect to: **a)** the fraudulent PCR “test” which is driving the illusion of a pandemic, used to rebrand other illnesses, inflate death counts and declare the healthy to be “carriers”, “cases” or “infected”, [thereby leading to exaggeration in contagion and promotion of superstition and omens among people], **b)** harmful measures and policies contrary to scientific evidence, **c)** cronyistic, fraudulent approval of these experimental injections, **d)** exaggerated and spurious claims about the pandemic in general, and

—**12. Organisations such as the WHO are proven to be corrupt institutions that serve the interests of the pharmaceutical corporations, being bought and paid for by private interests.** They serve the interests of the Communists

and they promote sexual liberation philosophies³² and other affairs of corruption. For this reason, there is a huge distrust of these organisations and institutions, yet they are the very ones directing or dictating the pandemic response in pretty much all the nations of the world.

Scandals have occurred previously with alleged flu pandemics and vaccines whose harm became apparent later, causing death and injury, leading to court cases and financial settlements. This is well known and established, and there are clear examples from 1976 and also recently in 2009.

Further, these criminals at the WHO deliberately distorted the definitions of ”**pandemic**”, and “**herd immunity**” for the benefit of the vaccine manufacturers and beneficiaries who fund them. As such, it is evident that this organisation, in collaboration with other organisations and institutions, is involved in criminal enterprise, despite showing an apparent face of goodness and concern for health, and despite having otherwise beneficial activities.

Thus on all of these counts, this organisation is rotten and corrupt, it is a vehicle for agendas, a donkey that can be bought and ridden, and thus cannot be trusted.

Documentaries and reports have been produced outlining these affairs in detail.³³

It will be of no avail trying to exonerate them or claiming they are “trusted institutions” just because governments have treaties and agreements with them.

³² See this document from the European branch: https://www.bzga-who.de/fileadmin/user_upload/WHO_BZgA_Standards_English.pdf

³³ <http://cv2020.s3.amazonaws.com/video/swine-flu-scandal-channel-4.mp4>
<http://cv2020.s3.amazonaws.com/video/swine-flu-scandal-rt-news.mp4>
<http://cv2020.s3.amazonaws.com/video/swine-flu-scam-fauci.mp4>
<http://cv2020.s3.amazonaws.com/video/swine-flu-scandal-1976.mp4>

Also look for a 2016 documentary titled “TrustWHO”.

These institutions such as the WHO, CDC, MHRA³⁴ and their counterparts in various non-Muslim countries are treated, because of concrete evidence, not mere suspicion, in the field of medicine, similar to how a liar and fabricator is treated in the field of reports. It is not necessary that a liar tells lies in all of his speech before he is considered a liar, rather much or most of what he speaks is true and he may have good conduct in addition to that. The same applies to these corrupt, bought out and paid for institutions that perform regulatory capture to stifle and prevent anything that undermines the monopoly and profits of big pharma.

This is not a matter subject to debate, there is no discussion, debate or wrangling on this matter, as it is an established and undeniable reality.

Questions based upon the abovementioned factual realities have not been asked and answered. Speech or opinion that does not take the above affairs into account is not up to date, accurate, reliable or credible, especially when these realities are no longer hidden or obscure. None of this is “misinformation” or “conspiracy theory”, these are all concrete facts and it is only the badly misinformed who repeat these statements.

Anyone who knowingly denies these concrete realities after they have been shown and despite them having become common knowledge risks losing credibility and becoming a laughing stock in the future.³⁵

³⁴ These institutions serve the agendas of big pharma by engaging in regulatory capture as a means of stifling all competition and pursuing anyone who discovers, verifies, proves and promotes genuine cures, thereby challenging the monopoly. There is a revolving door between these corrupt, crony institutions and big pharma.

³⁵ Some nations or states may be aware of these realities or at least some of these realities, and have acted or are acting accordingly in order to preserve their beneficial interests. Also, as we have explained elsewhere, nations may have reasons for implementing unscientific, unproven measures or policies,

Before anyone can be accused of being “sinful” or “disobedient” or “opposing the Sunnah” and the likes, or being an “anti-vaxxer”³⁶ or “arrogant” then the legislative rulings based upon these realities must be made clear, and at present this has not taken place.

Using broad texts such as those relating to taking the means, obedience to authorities and deferring matters to them in the *nawāzil*³⁷ does not in itself constitute evidence of the soundness and validity of each and every single policy.

For example a ruler requiring children to take injections which, for this age range, have a very high risk of causing long-term heart damage and a reduced lifespan, while the children literally have a zero percent fatality rate from the illness itself, then this opposes medical principles and may clash with numerous texts, some of which are mentioned further below and on the basis of which Muslim scholars, such as Shaykh Ibn ‘Uthaymīn have spoken on this matter, on the risk-benefit principle in medicine.

Forced medication of the healthy, especially children, who are at almost zero risk of dying from the illness, while the medication carries risk of death and injury, and forced participation in clinical trials with unproven, experimental injections under threat of

they may be tied more to long term economic and political considerations, such as future trade, foreign investment, tourism, loans for debt relief and the likes than they are to do with the pandemic itself, alongside their suspicion, distrust or even full knowledge of what is really taking place.

³⁶ This is a term repeated by some people who have opted—for some unknown reasons—to become mouthpieces for big pharma. If used in a derogatory sense, which is its primary intent, it would be unlawful and entail sin. This is a term invented by those among the disbelievers who have agendas and goals.

³⁷ These verses and any other texts do not constitute evidence that the ruler has the right to forcefully medicate the healthy against their will, especially not with risky, unproven, experimental injections with a trail of death and injury behind them, and even more so when a person’s pursuit of livelihood is conditioned upon them. Separate, independent evidence must be provided for that.

restriction of livelihood, and the claim that it is obligatory to comply with this, **unconditionally**, at risk to one's life and future livelihood does not have any evidence in the Sharī'ah, whether in an epidemic, or outside of it. No evidence has been presented that this is the ma'rūf in which obedience is obligatory, and this does not mean at the same time that the hand of obedience can be removed from the ruler.³⁸

We are speaking here, purely from the angle of knowledge and fiqh rulings and deflecting charges of sin against people who have hesitated in taking these experimental injections, particularly in the situation where they are not even legally obligated to in their country.

Shaykh al-Islām Ibn Taymiyyah said: “As for this action being obligatory (wājib), commended (mustaḥabb) or unlawful (ḥarām), then this is from the universal judgements in which no one has the right to make a judgement therein except Allāh and His Messenger. And the scholars of the Muslims seek [such information and evidence] that directs them to the ḥukm of Allāh and His Messengers [with respect to this action] through its evidences.”³⁹

And thus, the ḥukm of Allāh and His Messenger needs to be made clear with Sharī'ah evidences applied to factual realities as to whether:

—1. This matter is from the good (ma'rūf) and from the broad beneficial interest (maṣlaḥah 'āmmah), in which they are:

Obligated to obey the ruler and undergo a tangible risk of harm and injury to oneself for the claimed benefit of others by taking these experimental injections, or

³⁸ The reader should know that this is not a call to removing the hand of obedience, but simply a request for evidence of the ḥukm of Allāh and His Messenger to be provided in this matter based on an accurate depiction of the true realities and appropriate evidences that address these realities.

³⁹ Majmū' al-Fatāwā (27/297).

—2. **This is an error in ijtihād, or**

—3. **This is exceeding the limits in which they, the subjects:**

Must show patience in accordance with the Sunnah, while seeking permitted forms of redress,⁴⁰ without removing the hand of obedience from the ruler, and supplicating for him and for rectification of the affairs, recognising that this is a trial for their sins and disobedience.

Thus, the types of questions that get to the heart of the matter and which need to be answered **with clear evidence** [in order to:

—provide an evidence based fiqh ruling on these realities

—prevent hasty, unjust or unwarranted accusations of sin and disobedience upon the servants of Allāh and regurgitation of terms such as “**anti-vaxxer**”⁴¹ and “**vaccine-hesitancy**” and the oppressive claim that those who refuse dubious, potentially fatal and injurious injections are “arrogant” and so on],

include the following:⁴²

—1. **Given the preceding facts**, with respect to the authority given by Allāh to a Muslim ruler or his delegates/departments, does it allow them to unconditionally require subjects⁴³,

⁴⁰ Such as writing to offer advice to the authorities, taking the relevant people to court if necessary if there is clear evidence of malpractice, seeking fatwā from a scholar regarding one’s personal circumstances, seeking an exemption, whether medical or non-medical and so on, from affairs which are permitted.

⁴¹ Calling a Muslim an “anti-vaxxer” to denigrate and belittle him is unlawful and constitutes a crime, it only emanates from an ignoramus or one filled with bigotry. This is because medicine is not obligatory, it is a worldly issue of much differing, and the servants of Allāh are free to choose treatments of their choice.

⁴² Some of these questions may not apply, or they may change or become irrelevant if the circumstances and situation changes in a country from what it is currently, given that this is an ongoing an developing situation.

⁴³ Although this is the image presented by some people, it does not actually appear to be the case. It is not illegal to be unvaccinated with the experimental Covid injections in most countries and though life may be difficult, you still have the free choice to decline the injection, at your own disadvantage.

whether by direct or indirect means, under threat of penalty and restriction of means of livelihood, to partake in ongoing clinical trials of experimental injections of private, profit-driven companies, without their informed consent and against their will, whether in a state of perceived emergency or outside of it, while those companies are totally indemnified against liability?⁴⁴

—2. **Given the preceding facts**, does this constitute the maʿrūf in which obedience must be shown, or is it an errant ijtihād or does it constitute that which requires patience from the subjects and for which there are permitted forms resolution and redress? With our knowledge of course that the hand of obedience is not withdrawn from the ruler.

—3. **Given the preceding facts**, does Allāh allow a believer the right to decline unproven experimental injections,⁴⁵ and is he sinful for exercising his choice contrary to the ruler’s policies and recommendations, particularly when he fears the risks to his health, and distrusts, upon sound evidence and good reason, the Communists, Materialists, Eugenicists and others in

⁴⁴ **All the injections are under clinical trials at the moment, they only have emergency use authorisation and are experimental. No data exists on their long term safety. As for short term, then tens of thousands of deaths with millions of adverse reactions are found in reporting systems in the UK, EU, US and Canada.** However, these are grossly underestimated numbers because only 1-10% of all adverse events tend to be reported. Further, injury and sickness after injection is attributed to “Covid-19” and not to the injection as the true cause of such injury and sickness. This is by design and intent, doctors have been warned against ascribing death and severe adverse events to the injection. In rare cases, where family members of the deceased or the one injured by the injection becomes vocal in protest, is the admission made. Thus, the true extent of death, injury and disease is greatly underestimated and concealed. The pharmaceutical and big tech companies are in collusion to censor and hide all information exposing these realities.

⁴⁵ However, in actual reality, refusing is not even a choice, because penalties and punishments are applied as means of coercion and one cannot work, earn livelihood, travel and shop if one does not take the experimental injection.

this matter of the injection, upon the insight and advice of scholars of the past and present such as Imām al-Shāfi‘ī, Shaykh Ibn ‘Uthaymīn⁴⁶ and others?

—4. **Given the preceding facts**, does Allāh allow a ruler to override the personal religious conviction of his subjects, such as when some of them consider it harmful and sinful in religion to take the injection because of religious, scientific and medical convictions? This being a matter of religiosity and worship, a private affair between a servant and His Lord.⁴⁷

⁴⁶ The Shaykh said: “It is disliked for you to go to a dhimmī, meaning a Jew or a Christian to whom we have given a guarantee of protection, to take treatment with him, because he is not trusted. And when [the affair] is like that, then giving them responsibility over Muslim doctors is more worthy [of being disliked]. **Because he who is responsible [over others] has his own view and he may direct [others] to something unlawful, or to something that harms the Muslims.** For this reason we say: Seeking treatment from non-Muslims is not permissible except with two conditions: The first: The [existence] of a need for them. The second: [Ensuring one is] secure from their scheming, **because we cannot be secure from the scheming of the non-Muslims save rarely...** For that reason it is necessary to take precaution against them and to ask Allāh (ﷻ) that He bestows us [the ability] to dispense with them, because they are enemies of the Muslims.” Sharh ul-Mumtī‘, in the chapter on funerals (Janaa’iz), 5/232-235.

⁴⁷ In some Muslim countries, such as Saudi Arabia for example, both **medical** and **non-medical exemptions** are available, so may Allāh reward them for making such exemptions available. However, it is unclear exactly what enters into “non-medical exemptions”, this requires further investigation, and this is an avenue that can be investigated and pursued for those who have objections and concerns. In non-Muslim countries, forced vaccination without informed consent is illegal and constitutes a crime. Religious and philosophical exemptions as well as “sincere and deeply-held beliefs” which are not based in religion can be invoked by those not wishing to take experimental injections in these countries. However, in these Western countries clever and deceptive marketing propaganda is being used to engineer consent to overcome these protections granted by the law and these Western governments are using private institutions to implement policies which would be illegal for the government to do, attracting immediate lawsuits and court actions.

—5. And when it is the case that the ruler does not have any special privilege or monopoly in universal affairs of knowledge, (in affairs of worship) in which scholars have differed, such that he can intervene between a servant and his Lord, impose his view upon him and punish him for non-acceptance,⁴⁸ does this also extend to the field of medicine, in which scientists and doctors of the world have greatly differed, having different schools and approaches therein, and in which Allāh and His Messenger have explained the ruling, one of permissibility or recommendation at best for the one who is actually sick?⁴⁹

—6. **Given the preceding facts**, does Allāh grant the ruler authority to deny subjects the right to choose preventive medicine of their own choice, and upon that, is a Muslim sinful for exercising his choice, contrary to the ruler's dictates?⁵⁰

—7. **Given the preceding facts**, does Allāh grant the ruler authority to tie his subjects' pursuit of livelihood to participation in clinical trials and unproven experimental

⁴⁸ Refer to Majmū' al-Fatāwā of Ibn Taymiyyah, 35/357 onwards. So this would mean that a ruler wants you to take an injection, and you say, "No, I do not hold that view, I prefer to take Vitamin D, Zinc and other supplements to prevent illness as I consider them safe and more effective, and the injection has proven ineffective and also harmful, and I would be sinful in the sight of Allāh for putting my health or life at risk." So does the ruler have the right to impose his view upon you in what is a universal affair of worldly knowledge and personal preference, and override the freedom of choice given to you by Allāh in this affair, keeping in mind that taking medicine is permitted or commended at best and is not obligatory at all.

⁴⁹ Tens of thousand of doctors, scientists and professors have sounded the alarm on these experimental injections. However, there is an established and openly declared collusion between big pharma and big tech to censor any and all information against these experimental injections and which advocates other safe and empirically proven treatments, both preventive and curative.

⁵⁰ Again, in actual reality, a person does not even have the ability to exercise that choice because of the various systems and policies implemented that make it more or less impossible to do so, due to severe restriction in movement and livelihood, with the threat of penalties.

injections,⁵¹ or even to a particular proven and effective medicine exclusive to others, and would a Muslim be sinful for trying to avoid that because of religious, scientific and medical convictions, and for choosing an alternative medicine of his own choice and preference?

—8. Upon that, what advice is given to Muslims who are being put to trial with these affairs in both Muslim and non-Muslim lands? With the knowledge that deaths and injuries from these injections are undeniable reality and are either ignored due to lack of efficient reporting systems in certain countries or dismissed as mere “coincidental illness”⁵² or deliberately concealed in a predetermined, organised, calculated manner as is currently taking place and has become evident in many non-Muslim countries?⁵³

—9. Bukhārī and Muslim relate the incident⁵⁴ when the Messenger (صَلَّى اللهُ عَلَيْهِ وَسَلَّمَ) ordered some Companions to treat

⁵¹ Rather, a failing, harmful medicine in reality.

⁵² Vaccine induced death, injury and illness is being rebranded as “Covid-19”.

⁵³ Variants and mutants are being invented to act as a cover for vaccine induced death and injury. Thus the “delta” variant was invented to coincide with the rollout of the injection in December 2020 and to serve as a narrative for why vaccines would fail or lose their alleged effectiveness over time and to account for the death, disease and injury caused by the injections. It’s because “selection pressure” led the virus to mutate and become more evasive, and this of course is Darwinian evolutionary make-believe. The “mutant” or “variant” has no existence in physical reality and exists only on computer, as a fabricated model and sequence. No “variants” are being isolated and purified from any patient, this enterprise is outright fraud and making fools of mankind. The “variant” and “mutant” narrative has been fabricated to allow the continuation of this false state of emergency for an indefinite period while other political, social and economic agendas are pushed forward in the background.

⁵⁴ Ā’ishah (رَضِيَ اللهُ عَنْهَا) related: We put medicine in one side of his mouth but he started waving us not to insert the medicine into his mouth. We said, “He dislikes the medicine as a patient usually does.” But when he came to his senses he said, “Did I not forbid you to put medicine (by force) in the side of my mouth?” We said, “We thought it was just because a patient usually dislikes

themselves with the same treatment they gave to him against his will while he was unconscious for an illness they suspected he may have had. Is there retaliation (qiṣās) for coercing or administering an unwanted medication on a sick person against his will, and by extension, on a healthy person against his will?⁵⁵

—**10. Given the preceding facts**, when a ruler says: “You must take this injection to prevent illness and its spread” and the subject says: “I don’t want to because I don’t agree with this treatment, I believe it may kill or injure me as it has done to others, and I do not trust the disbelievers who manufacture it, upon what Allāh has revealed of their enmity and ill intentions, and nor do I trust the Darwinian Eugenecists who are vehemently promoting it, but I am happy to take other than it”, to whom has Allāh and His Messenger given the final say and whose right is the greater right in this situation, whether in an epidemic or outside of it?

—**11.** Some non-Muslim nations offer compensation for death and injury caused by the injection,⁵⁶ even if some of them make it extremely difficult to do so. If a Muslim sought compensation from a health authority via the courts, given that he is effectively being coerced to take the injection, is this considered permissible redress for harm and injury caused, or is this considered opposing the ruler and his authority?

medicine.” He said, “None of those who are in the house but will be forced to take medicine in the side of his mouth while I am watching, except al-‘Abbās, for he had not witnessed your deed.” Al-Bukhārī in Kitāb al-Ṭibb (no. 5712).

⁵⁵ In Faṭḥ al-Bārī, Ibn Ḥajar indicates that retaliation is due, citing Ibn Baṭṭāl, “Because doing this is a crime against him and thus, retaliation is due.” And Ibn Ḥajar says: “So taken from it is that when the sick person has knowledge, he is not to be compelled to take something he has prohibited from, and nor is he prohibited from something he has ordered.” Faṭḥ al-Bārī (al-Maktabah al-Salafiyyah) 10/167.

⁵⁶ See <https://www.thehindubusinessline.com/news/world/singapore-to-give-financial-aid-to-people-affected-by-vaccine/article33690555.ece> for example.

Keeping in mind that in non-Muslim countries there are numerous reporting systems for death and injury after injections, these do not appear to exist in Muslim countries. As a result, these affairs are not being picked up to the same degree. Thus, vaccine caused death and injury may be easily ignored or dismissed as unrelated, coincidental illness.

—**12.** Now that...

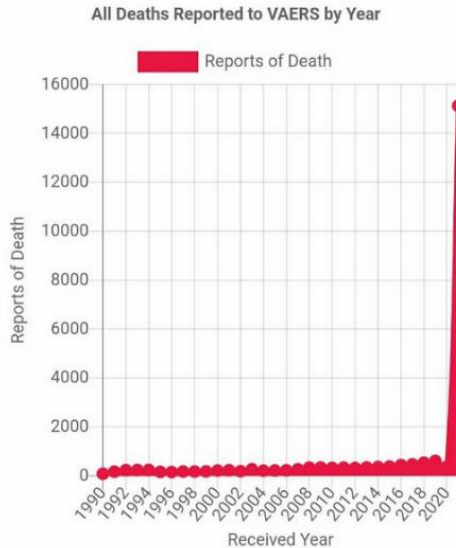
—the failure of the injection is starting to become evident in nations across the world,⁵⁷ and

—tens of thousands of deaths are being reported after the injections, while the true amount is multiple times more,

—alongside millions upon millions of adverse reactions beyond what is reasonably expected for a traditional injection,

—and there is an unknown potential of massive future chronic illness,

—and the fact that the injection is multiple times more likely to put children in hospital with permanent heart damage, multiple organ failure and other conditions, more so than the illness itself,



⁵⁷ See: “News-channel fishing for stories of unvaccinated dying from Covid-19 gets over 182,000 responses of Vaccine injuries and deaths instead... and the list is still growing” at <http://cv2020.s3.amazonaws.com/vaccine-injury-backfire.pdf>.

—and the injection is now being shown to kill more people that it can allegedly save in some nations,⁵⁸

... can individuals in health authorities who continue to promote these injections without full disclosure of these facts, and failing in their duty, be held liable for any death, harm and injury caused?

May Allāh reward King Salmān:

Citizens in Saudi Arabia can file a lawsuit against even the King, the Crown Prince or any royal family member unlike many other countries where the heads of state have immunity, Custodian of the Two Holy Mosques King Salman said here on Wednesday. The King was addressing senior officials and those concerned with combatting corruption in the public and private sectors.⁵⁹ Giving the example of a case between a citizen and the late King Abdul Aziz, King Salman said the citizen wanted a Shariah verdict so the two went to Sheikh Saad Bin Atiq who was the judge in Riyadh at that time. “If you see anything harming a citizen or an individual⁶⁰ or a tribe or a town, our doors and ears are open for you,” the King said. “I am more concerned about the rights of citizens than my rights,” King Salman said. The King said that there is consensus to fight corruption. The biggest fighters of corruption are Allah’s Book and Prophet’s Sunnah.⁶¹

⁵⁸ See: “FDA experts reveal the Covid-19 Vaccines are killing at least 2 people for every 1 life they save as they vote 16 – 2 against the approval of booster shots” at <http://cv2020.s3.amazonaws.com/fda-meeting-boosters.pdf>.

⁵⁹ Healthcare has been privatized in many countries, leading to the implementation of private health insurance policies coupled with foreign and private investment into healthcare with profit-driven objectives. This leaves the arena open to abuse, exploitation and corruption and one of the main drivers of the alleged pandemic, after fake science and fake numbers, is money.

⁶⁰ Forced medication against a person’s will and instruction, contrary to his personal preference is harming a citizen.

⁶¹ **Among the people are those who if you call to and repeat the very same thing that King Salmān himself calls to they will say this is calling to opposition to the ruler, is disobedience to him and amounts to “khurūj”!**

<https://english.alarabiya.net/News/middle-east/2015/06/04/King-Salman-Even-the-King-not-above-law>
<https://www.arabianbusiness.com/-we-re-not-above-law-king-salman-vows-595044.html>

So, given the fact that these types of questions based on an accurate depiction of the realities have not been posed:

Then:

Those who are misusing fatwās of scholars like Shaykh Ibn Bāz on **the mere permissibility of preventive medicine as a matter of personal choice** in other than their proper contexts, you do not have the saying of any senior scholar that addresses the above pertinent questions.

These questions have been posed to make clear to you that you either need to produce evidence from an Imām in religion with appropriate evidence that addresses these factual realities or remain silent and not agitate and confuse things further and accuse people of sin, when they have the free choice to take or refuse the injection in their country.

Thus, I exonerate the senior scholars of the Muslims from that they are the ones who have given fatwā for such things, for placing burdens of sin where it does not belong, for Allāh’s servants to be put to trial in this manner.

Rather, the scholars have simply explained the permissibility and commendability of medicinal treatment, preventive and curative, and at the same time, in a more general sense, spoken with the broad principle of obeying the authorities.⁶² and this is what we call to also.

⁶² As for the view that taking the experimental injection—which is proven to be neither safe nor effective—becomes obligatory if a ruler requires it from the subjects, then this is not a matter agreed upon by all the scholars of the Muslims in each and every nation. Using broad texts that enjoin obedience to the rulers is not sufficient evidence for this claim, and further, factual realities must be considered, and the realities have demonstrated, in the early part of 2021 that these injections are neither safe nor effective.

However, obedience to the authorities itself is not absolute but conditional, it must be in what is deemed “ma’ruf”, and devoid of harm and injury. Important, safeguarding conditions in this matter of the injection have not been stated or made clear by the people of knowledge after an accurate depiction of the factual realities has been presented to them.⁶³ The claim that these injections are

⁶³ And they include:

a) That the disbelievers have an established history of faking pandemics or grossly exaggerating in them in order to sell injections as occurred in 1976 and 2009 and many times in between and after.

b) That the Darwinian Malthusian Eugenicists have a large hand to play in this pandemic and they have explicitly stated designs and goals through mass vaccinations, they wish to reduce the world’s population.

c) That this pandemic is simply a rebranding of known, existing illnesses, this being achieved through fraudulent PCR tests which the world has been deceived by.

d) That the overall case fatality rate is around 0.15%, and even this is with falsified, manufactured data through the PCR test and its high cycle rates. If these affairs are accounted for the entire thing dissolves and beomes nothing.

e) That the manufacturers of these injections are criminals, liars, fraudsters, they have been convicted in courts of law many times and fined to the tune of billions.

f) That there is a clear trail of death, chronic illness and injury behind these injections and there is a concerted effort to cover this up through censorship, and other affairs that have been described earlier in this article.

g) That these injections are failing, creating more illness, prolonging the pandemic itself and are way inferior to the “natural immunity” (vitality, healing potential) that Allāh placed in His servants, alongside the fact this is a very mild illness with an overall survival rate of around 99.85%.

h) That these injections are deliberately designed to be of therapeutic value only upon a well-planned and coordinated agenda to establish permanent markets and never-ending profits.

i) More importantly, this injection program is a stepping stone for the implementation of a global form of technocratic Communism across nations, as it exists now in China, posing a grave threat to religion, particularly for Muslims in non-Muslim nations. It is founded upon the superstition of contagion as the starting point and will morph into the climate agenda, that of “carbon credits”.

Whatever is taking place today has clear ideological foundations, and unfortunately, many are oblivious to these ideological foundations and think

“safe and effective” is evidently false and nothing but marketing propaganda, since they are still in clinical trial.

As a result of the lack of satisfying answers in the face of these realities, the people have been left to dispute and contend with each other in these matters, leading to much confusion and with false accusations being made against those who are hesitant with very good reason and who—living in lands where their remains free choice—have decided not to take these injections.

Thus, whoever claims that taking an **unproven experimental, injection**⁶⁴ that is in **clinical trial**—carrying risks both known and unknown, short term and long term, **and is already killing tens of thousands**—**is an obligation in religion**, such that the one who declines it due to religious, scientific and medical convictions or opts for other than it is sinful in the sight of Allāh, deserves penalties and exemplary punishment in this life, and to whom is applied the threat of punishment in the hereafter for abandoning this alleged obligation, in an affair in which mankind has greatly differed, then let him provide evidence from the Qur’ān, Sunnah and Ijmā‘ or let him cite the speech of an Imām in religion who has preceded him in it.

He will not find a single one.

This requires a specific fatwā from a senior scholar with evidence, upon disclosure of all the factual realities as described earlier.

this is just an unfortunate event that mankind has to deal with, similar to an earthquake or a flood that will be over in a few weeks, when the reality is otherwise (“two weeks to flatten the curve”).

The architects have already made it clear through their frontmen, that there will never be a return to the “old normal” which is permanently gone, and that we must readily embrace “the new normal” or have no place in the future.

⁶⁴ From the greatest of travesties is that many of these opinions and views are based upon the false perception that these are proven, safe and effective injections, when they are experimental, under clinical trial, and their failure is all but evident.

They have nothing from any senior scholar regarding this, and nor will they get anything from a scholar if they are brave enough to convey the realities after having the honesty and courage to acknowledge them in the first place.

Texts pertaining to “obeying the rulers” are not sufficient for this claim **in the absence of safeguarding conditions** and this requires a specific fatwā with evidence, it has to come from senior scholars, not lesser mashāyikh.

Allāh (عَزَّوَجَلَّ) said:

□ □ □ □ ين

“And do not throw yourselves towards destruction” (2:195).

Imām al-Sa’dī mentions examples of the types of dangers a person should not subject himself to, thereby putting his life at risk. Given that the survival rate of this illness [which is overwhelmingly a rebranding of the cold, flu and other illnesses through fraudulent PCR tests] is a minimum 99.5% for those under 70 with no underlying health conditions, and given that this is an experimental injection in clinical trial with a trail of death, debilitation and injury behind it, and is multiple times more likely to put children in hospital and give them permanent heart damage and other illnesses than the actual illness itself, then this verse is relevant as evidence in this matter.

Further, Shaykh Ibn ‘Uthaymīn (رَحْمَةُ اللَّهِ) explained the issue of benefit and risk in medicine:

“That when the two affairs are equal (i.e. the benefit and the risk), then it is better to abandon it, so that a person does not throw himself to destruction (i.e. bring more harm upon himself) without perceiving it.”⁶⁵

For the vast majority of people who are healthy, the risk far outweighs the benefit, let alone them both being equal as occurs in Shaykh Ibn ‘Uthaymīn’s statement.

⁶⁵ See Sharḥ al-Mumti‘ (5/232-235).

This is aside from the fact that what is called “natural immunity” has now proven to be far superior⁶⁶ than the dubious injection, it being better for generally healthy people to have the illness and recover from it and thereby develop long term natural immunity than to have the injection for declining short term immunity which malforms natural immunity at the same time, and then require ongoing, repeat booster injections, as recommended by its makers. Obviously, a very lucrative outcome for the manufacturers and investors.

Likewise, the Messenger (صَلَّى اللهُ عَلَيْهِ وَسَلَّمَ) said: “*Verily, obedience is in that which is ma’rūf.*” He also said: “*There is no harm and no reciprocating harm.*” And as has preceded in the questions, the Sunnah establishes retaliation (qiṣāṣ) for being medicated against one’s will and instruction. So whoever claims that one must willingly subject himself to an empirically proven, actual risk of death, harm or injury, or otherwise be guilty of “disobeying the ruler” and “making khurūj” and “opposing the Sunnah” other such claims, then he must first provide evidence from an Imām in religion that addresses these factual realities with evidences.

For those in whose hearts there maybe a desire for tribulation, none of what has been raised and discussed above means that the hand of obedience is removed from the ruler in the present circumstances.

This is not what has been said above or anywhere else for that matter, and whoever claims or portrays otherwise is either ignorant, unable to comprehend what he reads, a liar or a person of mischief and tribulation.⁶⁷

However, the point is that we do not know of any scholar past or present who has stated that an unproven, experimental injection in clinical trial and empirically proven to kill, harm and

⁶⁶ <https://brownstone.org/articles/79-research-studies-affirm-naturally-acquired-immunity-to-covid-19-documented-linked-and-quoted/>

⁶⁷ It appears that there are people with grievances, motives and agendas who will try to stir in murkey waters by misrepresenting what has been said.

injure is **an obligation in religion**, above and beyond mere permissibility for whoever freely chooses to take it, without compulsion—let alone that a man’s livelihood should be made conditional upon it, and that whoever chooses not to take it is sinful in the sight of Allāh.

Upon that, no one should accuse anyone of sin, treachery, disobedience and the likes until they provide the ḥukm of Allāh and His Messenger on this matter or bring the saying of an Imām in religion with evidence.

If evidence is brought that coerced⁶⁸ and risky, unproven experimental injections—[upon which livelihood is made to depend for an illness with a worldwide 99.5% survival rate, with known, effective and numerous alternative preventive and curative treatments, with a real risk of death and injury]—is from the maʿrūf that demands obedience and compliance or is an obligation upon Muslims no matter which country they are in, we will speak with it and certainly encourage people towards that. Until then, for people in these Western lands, where there remains a choice, we will continue to exercise caution and advise people to do so, out of concern for their life, limb and livelihood.

In the absence of such evidence, one should not misuse any texts or any existing fatwās and apply them to scenarios, situations and contexts they cannot be applied to and to vilify and criminalize those who have justifiable concerns.

These types of general fatwas on treatments such as that of Shaykh Ibn Baz (رحمته الله) do not answer the controversy and confusion that is present, nor address the current circumstances and nor provide a resolution for them.

⁶⁸ While these injections are not being forced physically on people, it is clear that the policies are meant to disadvantage people in their livelihood and general ability to work and subsist, making it an indirect form of coercion, despite being presented as a matter of choice.

Once more, dismissing this issue with claims of “misinformation” and “conspiracy theory” is an evident sign of ignorance, wilful or otherwise, and oblivion to reality.

People who continue upon this way will risk losing their credibility in future, because they are operating on the assumption that tens of thousands of doctors, scientists and professors—some of them highly credentialed, highly respected and world renown prior to the alleged pandemic—are all ignorant and stupid and cannot recognise what is taking place around them, especially in non-Muslim⁶⁹ nations such as Australia, Canada and elsewhere, of very obvious, overt, brutal medical tyranny, and that all they are bringing are mere “conspiracy theories” and “fake news” and other terms which they blindly regurgitate while choosing to remain oblivious to factual realities.

Finally, we repeat what we have mentioned over and over again since March 2020, this is a trial from Allāh (عَزَّوَجَلَّ) whose reasons and causes are many. It is not permissible to call to marches, demonstrations or protests against the rulers as is happening in non-Muslim and/or democratic countries, and that even if one is compelled against his will in doing something he considers incorrect and harmful, he should have patience and invoke Allāh humbly for relief, whilst seeking forgiveness for sins and taking lawful means of redress permitted in the Shari‘ah, without removing the hand of obedience.⁷⁰

⁶⁹ Alḥamdulillāh, the Muslim leaders are unlike the non-Muslim leaders and we do not see from them what we see in the Western lands, may Allāh reward them and protect them and grant them tawfiq.

⁷⁰ As we have stated earlier, there are some nations that are not forcing vaccinations on people as a condition of earning a livelihood and participating in society. And other nations make both medical and non-medical exemptions available to people, and this can be pursued by those wishing to do so, those who have objections and concerns about the experimental injections. They can use lawful avenues and whatever the Shari‘ah allows them to do in the likes of this particular situation.

However, before hastily accusing people of sin, treachery, deceit and opposing the methodology and other such accusations, one must address the actual realities as outlined above, and provide evidence-based Islamic rulings from senior scholars for the situation presented in the above questions, not those less than them.

All that has come from the major scholars, as is apparent until now, is that it is **permissible** to take preventive medicine, since taking the means is legislated, and preventive medicine is from the means, **thus it is permissible or commendable** making it a matter of personal choice.⁷¹

As for those less than them, they are giving fatwās⁷² and rulings, making emotional statements, and making judgements of sin against people, such things that have not yet come from the most senior scholars in this particular subject matter, and this only adds layers of confusion on top of those that already exist.

Abu ‘Iyaad

2 Muḥarram 1443 / 10 August 2021—v.1.24—updated

⁷¹ And if a scholar decides to take the injection, **that is his personal choice in a worldly matter**, it does not now become the basis for a ḥukm in religion (that it is obligatory), with people criticised for not following a scholar in his private, personal worldly choices related to health and medicine.

⁷² Such as the fatwā that it is **wājib in religion** to get the injection if one wishes to mingle and participate in society, the only exception being if you are excused from having the injection for a medical reason, or that it is “arrogance” to refuse the injection. The contradiction in this is evident, why should even a person with an excuse be allowed to mingle and participate in society because this person can allegedly acquire and then transmit the alleged virus. And further, how can an injection that only reduces severity of symptoms **and does not prevent illness and its alleged transmission**, be made obligatory to participate in society, when the reason for which it is being declared obligatory—the claim that it prevents transmission—does not even exist and is plainly false and rejected by observed, factual reality?

Note: While the ḥadīth of the Messenger (صَلَّى اللهُ عَلَيْهِ وَسَلَّمَ) establishes the principle of preventive medicine with ‘ajwā against magic and poison, there is still a great difference between eating ‘ajwā dates and injecting foreign, synthetic substances into the body with known short-term effects, both fatal to life and detrimental to health, and also hidden and unknown long-term effects.⁷³

For no one has died or become sick from consuming an odd number of ‘ajwā dates on a daily basis, whereas the same cannot

⁷³ Traditional vaccines are made by taking diseased matter from sick people which is then cultured through various mediums which include: monkey kidney tissues, chick embryos, dissected organs of human aborted fetuses, pig pancreatic hydrolysates of casein, calf blood serum, and others. Harmful proteins and residual genetic materials remain in these cultures and their removal by filtration and the likes is **impossible** and this has been discreetly acknowledged, but kept hidden from public awareness. These materials can lead to tumours and other harmful outcomes and this is why vaccine inserts always state that the vaccine has not been tested for tumorigenic (cancer) potential and likewise, infertility. Poisonous substances such as formaldehyde, mercury (in the form of thimerosal) and aluminium are also added as adjuvants and they can pass into the brain leading to inflammation and the disease conditions which are related to that. Likewise, antibiotics such as neomycin are also included in vaccines, and they can interfere with absorption of important vitamins such as B₆, thereby affecting vital functions in the brain and elsewhere. Concerted efforts to conceal these affairs have always existed from the very beginnings of the practice of “cow-poxing” and today tremendous **financial, political** and **legal power** is used to defend this lucrative business model based upon poisoning the blood and tissue of healthy individuals. As for the new mRNA vaccines, then this is simply a case of the atheists, materialists, Darwinian eugenicists and others playing with something they do not understand, they are filled with pride and arrogance and think they can tinker with Allāh’s creation, upon the premise that it is a flawed creation, having arisen through evolution, through mutation and selection, and is inherently flawed. Thus, by “hacking into its software”, they believe they can create and mould a better human of their liking and they call this “self-directed evolution”. The “mRNA-platform” will be expanded to include other illnesses and all of this is simply a bluff, it is a marketing ploy to get the world’s entire population injected in order to hasten death and disease to reduce the population and its rate of growth. You have been warned.

be said about unnatural, direct repeat injections of synthetic substances and foreign genetic material into the body which poison the blood, tissue, organs and nervous system, and which can be fatal for some people who lack vitality or have hidden underlying issues.

One should note that when smoking tobacco appeared and its harms were either not known or kept hidden, the attitude of Muslim scholars would have been either to say that there is no known ruling for this practice or to defer to specialists on the subject. Those specialists, including Muslims, would have simply gone by the consensus of that time, that there are no health implications, especially considering that doctors were themselves smoking and were being used by the tobacco companies to advertise cigarettes and smoking.

However, fast-forward a few decades to half a century later and we have a completely different picture.

This shows that Muslim scholars may defer to “specialists” at a time when the realities are hidden and when a consensus might exist but which is based upon incorrect [or even fraudulent] science. This was the case with the tobacco companies⁷⁴ and is certainly the case with vaccination in general, and most certainly is the case with the snake-oil mRNA nanolipid injections of the **Darwinian, Malthusian Eugenicists** such as **Bill Gates** and those above him. They are extremely desperate to inject 7 billion people, and its not because they want to “defeat a virus” and save lives, and they, of all people, know full well that this is a blatant lie which they have fabricated to enable the pursuit of their other real agendas.

May Allāh grant tafwīq to all in arriving at what is true and correct and may He raise this tribulation from the people of the

⁷⁴ Refer to our article: “**On Smallpox and Injecting Impure, Harmful Substances into the Body: Verdicts From Scholars of the Da‘wah**” here: <http://cv2020.s3.amazonaws.com/aimma-smallpox-vaxx.pdf>

earth, expose the criminals and their schemes, and protect the rulers and subjects of the Muslim nations from their evil.

Addendum:

The FDA already knew of all possible adverse outcomes in October 2020, before any vaccine rollout started, but glossed over them. These outcomes began to appear in early January after the vaccine rollout had commenced, and tremendous attempts are being made to hide the true extent of death and injury from the general public.

FDA Safety Surveillance of COVID-19 Vaccines : DRAFT Working list of possible adverse event outcomes *Subject to change*****

- Guillain-Barré syndrome
- Acute disseminated encephalomyelitis
- Transverse myelitis
- Encephalitis/myelitis/encephalomyelitis/meningoencephalitis/meningitis/encephalopathy
- Convulsions/seizures
- Stroke
- Narcolepsy and cataplexy
- Anaphylaxis
- Acute myocardial infarction
- Myocarditis/pericarditis
- Autoimmune disease
- Deaths
- Pregnancy and birth outcomes
- Other acute demyelinating diseases
- Non-anaphylactic allergic reactions
- Thrombocytopenia
- Disseminated intravascular coagulation
- Venous thromboembolism
- Arthritis and arthralgia/joint pain
- Kawasaki disease
- Multisystem Inflammatory Syndrome in Children
- Vaccine enhanced disease

The above is page 17 of an FDA presentation given on 22 October 2020 to the “Vaccines and Related Biological Products Advisory Committee”. The presentation deals with monitoring systems for vaccine adverse events.

The full PDF can be viewed here:

<https://www.fda.gov/media/143557/download>

There are now thousands of reports and videos of injured people showing these very outcomes, including death. There is also a concerted effort to conceal this from the public eye.

Doctors have been warned against linking death and injury to the injections and the true scale of death and injury is hidden through organised, calculated censorship by the media and big tech in collusion with regulatory agencies.

As for the those who claim that taking the injection is only an “imaginary destruction”, then they are advised to consult the adverse reaction reporting systems of the US, UK and EU and to pay attention to what is being raised and discussed in the parliaments of these Western nations and what is happening in their law courts and the rioting that is taking place in their streets because the public have awakened to the scam after tasting its tyranny and pseudoscientific nature, after their children are collapsing and dying from these injections, and after their loved ones are being debilitated or killed by these injections within hours or days. Likewise, to investigate the Swine Flu Scam of 1976 and the Swine Flu Scam of 2009—people seem to find it hard to learn from history, if they are first aware that it even exists—and all the scams in between and after. Thereafter, it will not be so easy to express these types of ill-informed statements and opinions so recklessly.

Preliminary myocarditis/pericarditis reports to VAERS following dose 2 mRNA vaccination, Exp. vs. Obs. using 7-day risk window (data thru Jun 11, 2021)

Age groups	Females			Males		
	Doses admin	Expected* [†]	Observed*	Doses admin	Expected* [†]	Observed*
12–17 yrs	2,189,726	0–2	19	2,039,871	0–4	128
18–24 yrs	5,237,262	1–6	23	4,337,287	1–8	219
25–29 yrs	4,151,975	0–5	7	3,625,574	1–7	59
30–39 yrs	9,356,296	2–18	11	8,311,301	2–16	61
40–49 yrs	9,927,773	2–19	18	8,577,766	2–16	34
50–64 yrs	18,696,450	4–36	18	16,255,927	3–31	18
65+ yrs	21,708,975	4–42	10	18,041,547	3–35	11
Not reported	—	—	1	—	—	8



* Assumes a 7-day post-vaccination observation window (i.e., symptom onset from day of vaccination through Day 6 after vaccination)

[†] Based on Gubernot et al. U.S. Population-Based background incidence rates of medical conditions for use in safety assessment of COVID-19 vaccines. Vaccine. 2021 May 14;39(26):410X(21):00578-8. Expected counts among females 12–29 years adjusted for lower prevalence relative to males by factor of 1.7 (Fairweather, D. et al, *Curr Probl Cardiol.* 2013;38(1):7-46).

The above image shows the increase in heart damage, especially to the lower age groups, and particularly among males. This becomes a life-long condition, with increased risk of early mortality.

In a live broadcast conducted on the 17th September the Food and Drug Administration vaccine advisory committee met to debate and vote on Pfizer and BioNTech's application to offer booster shots to the general public. The meeting lasted over 8 hours and contained some shocking revelations.

This article provides some information:

<http://cv2020.s3.amazonaws.com/fda-meeting-boosters.pdf>

And these are some video clips from the meeting itself:

<http://cv2020.s3.amazonaws.com/video/fda-meeting-boosters-video.mp4>

<http://cv2020.s3.amazonaws.com/video/fda-meeting-vaers-data-deaths.mp4>

While much more can be provided in this regard, the above suffices.