



Written by [Veronika Kyrylenko](#) on May 18, 2022

FDA Authorizes Pfizer Booster for Kids Aged 5-11

American regulators authorized a single Pfizer-BioNTech Covid booster shot for healthy five- to 11-year-olds in a bid to enhance their protection against the infection and severe disease. The additional dose, like the initial vaccination series for young Americans, is covered by the Emergency Use Authorization (EUA), which means that it remains “investigational,” e.g., experimental.

According to the Tuesday [press release](#) of the U.S. Food and Drug Administration (FDA), the said age group could take a third dose at least five months after completion of a primary series with the Pfizer-BioNTech shots.



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Claiming that vaccination “continues to be the most effective way to prevent COVID-19 and its severe consequences, and it is safe,” FDA Commissioner Robert M. Califf said that children have been getting infected and hospitalized at a higher rate with the arrival of Omicron. He added that children “may also experience the longer term effects, even following initially mild disease,” and urged parents and caregivers to vaccinate their children.

Conversely, Peter Marks, director of the FDA’s Center for Biologics Evaluation and Research, did not mention that the vaccination protects against infection — because it does not — and instead claimed that it is “effective in helping to prevent the most severe consequences of COVID-19.”

But there’s a caveat: “Since authorizing the vaccine for children down to 5 years of age in October 2021, emerging data suggests that vaccine effectiveness against COVID-19 wanes after the second dose of the vaccine in all authorized populations,” noted Marks. He then concluded that the agency determined that the “known and potential benefits” of a booster dose for children outweigh its “known and potential risks.”

The decision was made without holding a traditional meeting of the FDA’s Vaccines and Related Biological Products Advisory Committee (VRBPAC), which evaluates vaccines’ safety, efficacy, and appropriate use by reviewing and verifying the data provided by the vaccine’s manufacturer.

The meeting was skipped, explained the FDA, because “the agency previously convened the committee for extensive discussions regarding the use of booster doses of COVID-19 vaccines and, after review of Pfizer’s EUA request, the FDA concluded that the request did not raise questions that would benefit from additional discussion by committee members.

In other words, the federal body did not identify any information that should have been discussed in more detail by the experts on additional doses of the experimental biological product for children that started being used in humans only last year.

While the FDA said that it would post the documents it used to conclude that the booster was “safe and



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effective” later, the decision left many wondering if the third dose is indeed necessary for children.

For example, is there a “medical emergency?” As appears on the U.S. Centers for Disease Control and Prevention (CDC) website, Covid deaths in the age groups of 5-11 and 12-17 [are not even reflected](#) in its Covid tracker “due to low numbers.”

While that alone should be enough to end the discussion on experimental gene therapeutics for children, the media and non-establishment experts point to efficacy and safety concerns.

It appears that the overwhelming majority of American children may not need any Covid shots, let alone additional doses, since they have already recovered from Covid.

As reported by the [Associated Press](#),

Adding to public confusion, the CDC estimates 3 out of every 4 U.S. children of all ages have been infected with the coronavirus since the pandemic’s start — many of them during the winter omicron wave. Still, health authorities urge vaccination even in people who’ve previously had COVID-19, to strengthen their protection.

Is natural immunity, which one acquires after recovering from infection, worse than “vaccine immunity”? [Eighty-one research studies](#) published in reputable medical journals confirm that natural immunity to Covid is equal or superior to any immunity provided by the shots due to the fact that the latter do not form mycotic immunity, which is crucially important to guard off the respiratory infection.

But the matters get even worse, since the efficacy of shots turn negative over time.

Writes renowned vaccinologist and bio-expert [Dr. Robert Malone](#),

The CDC recently the CDC recently [reported](#) higher COVID-19 case rates have been recorded among fully vaccinated children than unvaccinated in the age group 5-11 since February 2022. That’s the first time CDC recorded a higher case rate among fully vaccinated young children since data was first collected in December 2021.

That means that vaccinated children are more likely to get infected with Covid than their unvaccinated peers.

How about the “safety” part? Apparently, it is extremely disturbing. What is even more disturbing is that America’s top regulatory body is informed on the data.

While the FDA says that it had “no questions” in regard to Pfizer documents, Pfizer — and the FDA — is fully aware that the shot is associated with significantly elevated death rates in the vaccinated trial participants compared to those who received a placebo.

Calling the vaccination of children “child sacrifice,” Malone notes,

Research shows that there is no benefit to children receiving a COVID shot, and in fact, the shots can cause [potential harm](#), [adverse](#) effects and death. According to Pfizer’s own [study](#) trial data, the chance of death in children from the shot is 107 times [higher](#) than death from COVID.

The deadly ramifications of the Pfizer shots were also observed by the Office for National Statistics,



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which revealed that children are up to 52 times more likely to die following the Covid injection than children who have not received it, added the doctor.

The final decision on recommending children aged of five to 11 to get a third dose of Pfizer shot will be made by the CDC on Thursday.

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