

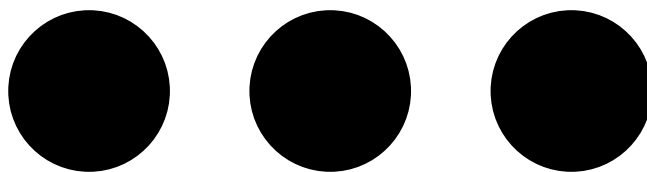


Written by [Selwyn Duke](#) on December 19, 2023

# Number of “Excess” Americans Dying Young Now Exceeds ALL Post-Vietnam War Losses

“I’d describe it as catastrophic.” So said Food and Drug Administration commissioner Robert Califf in a recent series of tweets about a troubling but ignored problem: the major decline in life expectancy among young, working age people.

In fact, the number of “unexpected or, ‘excess,’ deaths, which claimed 158,000 more Americans in the first nine months of 2023 than in the same period in 2019 ... exceeds America’s combined losses from every war since Vietnam,” [wrote The Hill](#) last week.



Some people want this problem to remain ignored, too. Just consider that “America’s chief health manager, the Centers for Disease Control and Prevention, opted in September to archive its excess deaths webpage with a note stating, “these datasets will no longer be updated,” *The Hill* also informs.

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The entities reporting this phenomenon, however, insurance companies, can’t play ostrich because they have to pay out on death claims. As to this, “In 2021, the most recent year for which data is available, the industry distributed a record \$100.28 billion in total death benefits, according to BestLink,” [related Life Insurance News](#) (LIN) in late October. “The higher-than-normal payouts began in 2020, the first year of the pandemic when insurers saw death benefits rise 15.4%, the biggest one-year increase since the 1918 Spanish Flu epidemic. The 2021 increase was 10.8%, but fell during the first nine months of 2022, from \$74.27 billion in the same period in 2021. But that’s still higher than the \$59.18 billion paid out during the same period in 2019 before the pandemic hit.”

As to the mortality’s precise magnitude, LINCited an authority who said that “generally, we’re at 13.9 deaths per 100,000, which is up perhaps 7% from where it should have been.” Yet this doesn’t truly illuminate the problem because this factors in mortality for those over 65, which actually *declined* six percent. Younger adult death rates, however, have increased more than *20 percent* in 2023, [according](#) to the CDC.

The article at *The Hill*, written by Dr. Pierre Kory, president and chief medical officer of the Front Line COVID-19 Critical Care Alliance; and Mary Beth Pfeiffer, an investigative reporter, breaks the numbers down further.

“Mortality was 26 percent higher among insured 35-to-44-year-olds,” they write, “and 19 percent higher for 25-to-34-year-olds, continuing a death spike that peaked in the third quarter of 2021 at a staggering



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101 percent and 79 percent above normal, respectively.” And what are the causes of death?

Data “show increased cardiac mortality in all ages,” writes LIN. “And even as COVID-related causes declined in 2022, others rose, particularly stroke, diabetes, kidney and liver diseases.” (To be precise, “COVID-19 deaths dropped 84 percent from the first three quarters of 2021 to the same period in 2023,” *The Hill* tells us. Yet even this statistic may be suspect, as stories abound about flu-induced and other deaths being labeled as “COVID” morality.)

As for what sparked this news story, here are FDA commissioner Califf’s initial tweets:

JAMA Internal Medicine published earlier this month that our overall life expectancy has dropped to 76 years, and remarkably, that male life expectancy in the U.S. has dropped to 73 years.

— Dr. Robert M. Califf (@DrCaliff\_FDA) [November 30, 2023](#)

As we all know, life expectancy is far from uniformly distributed. Disparities as a function of race, ethnicity, wealth, education and geospatial location are profound and widening.

— Dr. Robert M. Califf (@DrCaliff\_FDA) [November 30, 2023](#)

We expect to lose over 450K Americans due to tobacco related illness this year - we need to change that. We have a very important and ambitious agenda to tackle in our work on tobacco. We’ve made some important advances in that area recently, but there is still much to be done.

— Dr. Robert M. Califf (@DrCaliff\_FDA) [November 30, 2023](#)

Califf mentions tobacco use in the last tweet, but this couldn’t help account for mortality *increases* because smoking rates have *declined* for many years now.

You can read all the official’s posts [here](#). There is something, however, Califf *didn’t* mention — but that X respondents were quick to (example below).

[pic.twitter.com/QzXRtlWUoa](https://pic.twitter.com/QzXRtlWUoa)

— Liberty Tom (@Libertylover95) [December 15, 2023](#)

Another tweeter, who identifies herself as someone affected by “Vax Injury,” provided more detail:

Since the COVID-19 Vaccine rollout, cancer deaths have skyrocketed in young people.

Study: cancer deaths in ages 15-44 in the U.K. included:

- A 28% rise in fatal breast cancer rates in women.
- An 80% increase in pancreatic cancer deaths among women and a 60% increase among...

[pic.twitter.com/7fpk2t66Sv](https://pic.twitter.com/7fpk2t66Sv)

— Health Freedom UnMuzzled (@majja\_hahn) [December 1, 2023](#)

In reality, though, this isn’t the first time insurance company figures have sounded an alarm. In January



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2022, for example, I [wrote about](#) information provided by OneAmerica CEO Scott Davison at a December 30, 2021 virtual news conference. “We are seeing, right now, the highest death rates we have seen in the history of this business — not just at OneAmerica,” he related.

“And what we saw just in third quarter, we’re seeing it continue into fourth quarter, is that death rates are up 40 percent over what they were pre-pandemic,” Davison added.

“Just to give you an idea of how bad that is, a three-sigma or a one-in-200-year catastrophe would be 10 percent increase over pre-pandemic,” the insurance head continued. “So 40 percent is just unheard of.”

Note here that that this “third quarter,” age-18-to-64 death wave roughly coincides with when the COVID “vaccines” were pushed on people under 65.

As a consequence of all this, Kory and Pfeiffer call for accountability. They write:

In the United Kingdom, where post-pandemic excess deaths in similar demographics also persist, a government-funded independent inquiry is underway. “With each passing week of the COVID inquiry,” the BBC reported recently, “it is clear there were deep flaws in the way decisions were made and information provided during the pandemic.”

The United States needs such an examination of the measures taken to fight the pandemic. This probe — by a high-level, unbiased commission — should focus on what worked and what did not.

Lockdowns limited access to education, social interaction and health care with documented harm to childhood development, mental health and the economy. Treatment protocols dictated how doctors should deliver COVID care — primarily in hospitals and with expensive medicines — and limited early access to generic drugs that might have helped.

Also mentioning the 270 million Americans coerced into taking the “vaccines,” the writers state that “in light of more than 1 million reports of possible harm to the Vaccine Adverse Events Reporting System and a new Yale University study validating a chronic post-vaccination syndrome,” the government’s “warp speed” emergency use authorization must be scrutinized.

Then there are the pseudo-elites who encouraged widespread, un-American censorship of dissent; Kory and Pfeiffer call for them to be held accountable.

But there’s the issue: The Covid-19 response was a tragedy of epic proportions, causing untold death, economic destruction, and undermining of rights and freedoms. And that many (including at *The New American*) warned of this folly early on means the culpable officials *could have known better* — and this means that confessing guilt could end countless careers. The consequence?

Just as with so many victims of these pseudo-elites’ bad policies, the issue gets buried and, by most, forgotten.



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