



Joint Open Letter from:

6 February 2024

HART – Health Advisory and Recovery Team
UKMFA – UK Medical Freedom Alliance
CCVAC – Children's Covid Vaccines Advisory Council

To: The Right Hon Victoria Atkins, MP, Secretary of State for Health & Social Care
Cc: Dame Jenny Harries, UKHSA
Professor Sir Christopher Whitty, CMO

Dear Ms Atkins

Re: Urgent Review of Excess Deaths

Firstly, congratulations on your recent appointment as Secretary of State at the DHSC.

Your three months in office has given you time to see for yourself how much the NHS is struggling; with rising waiting lists, low staff morale and the devastating strike action. You will also be aware of the ongoing and concerning excess deaths in the UK, recently debated in Parliament.¹ The fact that this is occurring in many Western countries and across all age groups, particularly younger adults for whom there were no excess deaths during 2020, should trigger alarm bells and prompt an urgent investigation.

In addition, in parallel with increased deaths, there has been a significant rise in levels of sickness and disability recorded throughout the working age population.² This has resulted in not only increased demands on the health service, but also has impacted the health and resilience of NHS staff themselves, with resulting high levels of staff sickness and absence, causing additional strain on an already struggling system.

The causes of excess mortality and morbidity are likely multifactorial, including the physical and mental impacts of lockdowns, delays in accessing treatment and long-term effects of Covid-19 itself. However, a fourth potential factor appears to be being deliberately ignored: that is, any possible role of the mRNA Covid-19 vaccines. The timing of the rise in disabilities and deaths should make the vaccinations a definite suspect. As early as November 2020, many scientists and doctors, including those in UKMFA, were highlighting the potential risks of a rushed vaccine.³

Until this question has been thoroughly investigated, it is premature and reckless to be talking of using mRNA technology for future prophylactic vaccines (we take no view on the development of mRNA vaccines for their previously-intended role as *therapeutic* anti-cancer agents). We are concerned that the Government is focused on the business opportunity for the UK, offered by the expansion of use of these technologies, but are ignoring potential risks to public health from these products, particularly to the immune and cardiovascular system. The failure of COVID vaccines to

stop viral circulation is obvious to all. Worse, the obviousness of this failure, along with growing concern about the products' safety - evidenced by poor uptake among those eligible - is undermining public trust in vaccination more generally, including where it is indubitably useful. We have written repeatedly to the regulators and to your predecessors, regarding the risks of rolling these vaccines out to children.^{4,5,6,7,8} Members of the Pandemic Response All Party Parliamentary Group also wrote a letter in January 2022, over two years ago, regarding increased all-cause mortality in 15-19-year-old males.⁹

The first three signatories on this letter were all asked by Baroness Hallett to provide Witness Statements for Module 4 of the UK Covid-19 Public Inquiry; these we have recently submitted, only to learn that the date for the Module 4 hearings has been inexplicably and disappointingly postponed, likely until after the general election.

In the interim we therefore call upon you to suspend the booster programme, pending an immediate review into all aspects of Covid vaccine safety, as outlined in our letter to the MHRA¹⁰ a year ago.

The health of the nation's citizens is of paramount concern and must surely be a high priority for an incoming Minister. We entreat you to apply the precautionary principle regarding the use of these products, which have been linked (in published scientific literature, adverse event databases and real-world epidemiological data) to numerous short and long-term safety issues, particularly after multiple doses. Pausing their use is now becoming widely recognised to be the only rational, responsible and morally justifiable course of action.

We wish you well in the challenging job you have ahead.

Yours sincerely

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¹ <https://hansard.parliament.uk/Commons/2024-01-16/debates/152B485D-812D-43CC-9D25-C2B651564810/ExcessDeathTrends?highlight=andrew%20bridgen#contribution-FAE24B68-4677-48A9-9D44-90F31C3179E3>

² <https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/labourproductivity/articles/sicknessabsenceinthelabourmarket/2022>

³ 23rd November 2020 <https://www.ukmedfreedom.org/open-letters/ukmfa-open-letter-to-mhra-jcvi-and-matt-hancock-re-safety-and-ethical-concerns-of-proposed-covid-19-vaccine-authorisation-and-rollout>

⁴ 17th May 2021: <https://www.hartgroup.org/open-letter-to-mhra-17-05-2021/>

⁵ 6th September 2021: <https://www.hartgroup.org/open-letter-to-the-chief-medical-officers/>

⁶ 14th November 2021: <https://www.hartgroup.org/open-letter-to-mhra-14-11-2021/> re myocarditis

⁷ 14th February 2022: <https://childrensunion.org/ccvac-pause-covid-roll-out/>

⁸ 6th July 2022: <https://www.hartgroup.org/open-letter-to-the-secretary-of-state-for-health-social-care/>

⁹ January 2022: <https://dailysceptic.org/2022/01/08/end-covid-vaccination-of-children-because-the-risks-outweigh-the-benefits-government-told-by-mps-and-scientists/>

¹⁰ 31st January 2023: <https://www.hartgroup.org/an-independent-review-of-vaccine-safety-is-urgently-required/>