Assessment of Causality for COVID 19 Vaccines

Using the Naranjo Algorithm

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Naranjo algorithm is widely used as a means of assessing drug causality of adverse events.

It is a questionnaire designed to assess the likelihood of whether an ADR is actually due to a specified drug rather than the result of other factors. It contains 10 questions to test the causality relationship based on four basic principles, which are

- 1. temporal eligibility,
- 2. de-challenge,
- 3. re-challenge and
- 4. confounding factors.

Here are the 10 questions are

Question	Yes	No	Don't know or not done
Are there previous conclusive reports on this reaction?	+1	0	0
Did the adverse event appear after the suspected drug was given?	+2	-1	0
Did the adverse reaction improve when the drug was discontinued or a specific antagonist was given?	+1	0	0
Did the adverse reaction appear when the drug was readministered?	+2	-1	0
Are there alternative causes that could have caused the reaction?	-1	+2	0
Did the reaction reappear when a placebo was given?	-1	+1	0
Was the drug detected in any body fluid in toxic concentrations?	+1	0	0
Was the reaction more severe when the dose was increased, or less severe when the dose was decreased?	+1	0	0
Did the patient have a similar reaction to the same or similar drugs in any previous exposure?	+1	0	0
Was the adverse event confirmed by any objective evidence?	+1	0	0

Lets apply these 10 questions to the COVID 19 vaccine!

1. Are there previous conclusive reports on this reaction?

YES: Published Science Database - React19

SCORE: +1

2. Did the adverse event appear after the suspected drug was given?

YES: Time until onset (Howbad.info)

SCORE: +2

Did the adverse reaction improve when the drug was discontinued or a specific antagonist was given 3.

> YES: Those who discontinued taking the doses are less prone to the ADRs: <u>Dose dependent effects</u> (howbad.info)

SCORE: +1

4. Did the adverse reaction reappear when the drug was readministered?

YES: Israeli Study (Howbad.info), knockout.pdf (howbad.info)

SCORE: +2

Are there alternative causes that could have caused the reaction? 5.

NO: many were young and healthy before

NO: some adverse reactions were UNIQUE to the vaccine – amyloid clots: Amyloid clots

(Howbad.info)

SCORE: +2

Did the reaction reappear when a placebo was given? 6.

NO: Placebo = unvaccinated; unvaccinated = no ADR: Unvaxed showed least effect (howbad.info)

and eyestosee.pdf (howbad.info)

SCORE: +1

7. Was the drug detected in any body fluid in toxic concentrations?

YES: Autopsies (Howbad.info)

SCORE: +1

Was the reaction more severe when the dose was increased, or less severe when the dose was decreased? 8.

YES: Dose dependent effects (howbad.info)

SCORE: +1

Did the patient have a similar reaction to the same or similar drugs in any previous exposure? 9.

YES: knockout.pdf (howbad.info)

SCORE: +1

10. Was the adverse event confirmed by any objective evidence?

YES: Troponin levels, D-Dimer, Thrombosis, cardiac arrest etc

SCORE: +1

SUMMARY

- 1. 3500 independent studies show that the COVID 19 vaccine causes harm.
- 2. The median time till onset < 24 hours.
- 3. Those who discontinued doses were harmed less than those who continued.
- 4. Re-administration of the doses produced a relapse of adverse effects.
- 5. Many victims were young and healthy before administration.
- 6. The vaccine caused unique effects (amyloid clots) that could not be attributed to any other cause.
- 7. Un-vaxed (placebo) showed least effect.
- 8. Autopsies reveal toxic concentrations of the spike protein at the site of inflammation and injury
- 9. Effects are dose dependent
- 10. The effects are not "in your head" but very real and evidenced by objective organ damage, disability, death and bodily responses to damage such as troponin, d-dimer etc

NOTE

This is a brief summary of how the Naranjo Algorithm applies to COVID 19 vaccines. Please decide for yourself if the scoring is correct.