



Website:

[www.Doctorharold.com](http://www.Doctorharold.com)

<https://youtu.be/cPAxgdpG7Kc>

## What is your preferred Jab?

Transcript:

People are confused these days, to choose the vaccine of choice available- Pfizer or AstraZeneca, in Australia.

The confusion starts with the publication of the efficacy of the respective vaccines. Pfizer and Moderna had the highest efficacy rates-95% 7 days after the second dose and 94% and 14 days after the second dose respectively.

AstraZeneca the vaccine the Australian Government recommends and available for over 60's is 67%, 15 days after the second dose.

Vaccine efficacy rate is calculated after giving the vaccine to 10s and thousands of people and they are broken into two groups.

Half of the people get the vaccines, and the other half gets a placebo.

After several months they are reviewed.

In this trial-170 people were infected with COVID-19.

If all 170 were evenly spread, i.e. 85 in the placebo group and 85 in the vaccine group, then the efficacy rate is zero percent.

If all the 170 placebo group got the infection and zero group in the vaccine got no infection, the vaccine would have an efficacy of 100 %.

In this trail 162 got infected with COVID-19 in the placebo group and 8 in the vaccine group. This means that those who have got the vaccine 95% is less likely to get COVID-19.

That means the vaccine had 95% efficacy.

This must be understood before we go further.

There is the efficacy related to the trials and this has nothing to do with the effectiveness of any vaccine.

This does not mean that if 100 people are vaccinated 5 of them will get COVID-19, and that 95% applies to the individual, repeating a single individual, meaning that the chances of catching the COVID-19 disease is 95% less per individual.

So, each vaccinated person is 95% less likely to get COVID-19 than a person without the vaccine.

What one should check is the effectiveness of the COVID-19 vaccine and not efficacy which applies to trials only.

Your choice of the jab should depend on the effectiveness and not efficacy of a vaccine.

Clinical trials for the Pfizer and AstraZeneca vaccines have shown that these 2 vaccines are effective in preventing:

- development of COVID-19 symptoms and.
- protecting against severe disease.

Pfizer doses are given three weeks apart.

AstraZeneca doses are spread 12 weeks apart.

Nearly all deaths from COVID-19 in the US now are among unvaccinated, a staggering demonstration of how effective the jabs have been and an indication that deaths per day-now down under 300- could be practically zero if everyone eligible got the vaccine.

An Associated Press analysis in the US. of available government data from May shows that “breakthrough” infections in fully vaccinated people accounted for fewer than 1,200 of more than 107,000 COVID-19 hospitalizations. That’s about 1.1%.

Earlier this month, Andy Slavitt, a former adviser to the Biden administration on COVID-19, suggested that 98% to 99% of the Americans dying of the coronavirus are unvaccinated.

What is important to know is which vaccine gives the least amount of side effects and protect you from any infection and keep you alive and keep out of hospital if you get the COVID-19

The second confusion is that you have no choice because the government doles out free vaccines to the public, and the big brother tells you which jab you should have.

The advice from the official vaccine watchdog, ATAGI, has changed multiple times over the past few months.

As it stands Pfizer is officially 'preferred' for under 60s, and AstraZeneca for over 60s.

That's because of the very rare chance of developing a blood clot due to risks associated with the AstraZeneca for those aged under 60.

Researchers at the University of Oxford have reported that the risk of the rare blood clotting known as cerebral venous thrombosis (CVT) following COVID-19 infection is around 100

times greater than normal, several times higher than it is post-vaccination or following influenza.

In over 480,000 people receiving a COVID-19 mRNA vaccine (Pfizer or Moderna), CVT occurred in 4 in a million.

CVT has been reported to occur in about 5 in a million people after first dose of the AZ-Oxford COVID-19 vaccine.

In spite, of being doled out free some people are forced to pay over \$100 for the vaccine in certain medical centres, and they get away by saying it is for the consultation and vaccine is free. Lots of non-English speaking migrants have been paying for their vaccine jabs.

The government dictates the eligibility for the Pfizer COVID -19 vaccine and AstraZeneca COVID-19 vaccine and the common man has no choice.

According to Government notification Pfizer vaccine is available if you are aged 16 to 39 and you have to be an Aboriginal, quarantine border worker, health care workers among others.

You are eligible for the AstraZeneca vaccine if you are aged 60 years or older.

If you are aged 18-59 years of age, you can choose to receive the AstraZeneca vaccine, if you had the 1st dose with that vaccine.

On 22 July 2021 the Therapeutic Goods Administration (TGA) granted provisional approval to Pfizer Australia Pty Ltd for its COVID-19 vaccine, COMIRNATY, in individuals aged 12 years and older.

Now can you mix and-match COVID vaccines, in giving the two jabs.

Because of safety concerns, several European countries are already recommending that some or all people who were given a first dose of the vaccine developed by the University of Oxford, UK, and AstraZeneca in Cambridge, UK, get another vaccine for their second dose. Researchers hope that such mix-and-match COVID-19 vaccination regimens will trigger stronger, more robust immune responses than will two doses of a single vaccine, while simplifying immunization efforts for countries facing fluctuating supplies of the various vaccines.

What this means to us is that you can have the first jab AstraZeneca and the second jab Pfizer for better immunization.

So, capitulating the situation, both Pfizer and Oxford AstraZeneca are equally effective against the COVID-19. And further you could mix and match the two jabs.

### **Vaccination alone won't counter rise resistant Variants.**

Vaccinations has now been rolled out at expedited rates in most countries to reach a tipping point short of herd immunity.

Meanwhile the chances of emerging of a resistant strain may naturally select, according to new findings of a model study published online on July 30 in Scientific Reports.

"We have become accustomed to thinking of the pandemic from the point of view of epidemiology, and advised to reduce transmission and the number of people getting sick and

the death rate. As the pandemic spreads across years, there will be a new dimension to our thinking, both for policymakers and the public. And that's the evolutionary perspective," said co-author Fyodor Kondrashov, PhD, an evolutionary biologist at the Institute of Science and Technology (IST), Klosterneuburg, Austria, at a press briefing Thursday.

So, viewers, we do not know what the future is for us with the end of this endemic. Resistant variants may arise and the vaccines, even the mRNA vaccines may not be able to fight against such resistant variants.

Meanwhile let's wear the protective mask and keep the social distance and pray for the best.

Hope this video talk was useful. My mission is to provide all latest developments of COVID-19 to you in the most simplified way.

Hope this video talk was useful.

Stay safe, logged in

Goodbye for now

888888888

More than 94% of Washington's recent COVID-19 cases, deaths and hospitalizations have been among not fully vaccinated people, according to a new report from the state Department of Health.

### **Unprecedented 'freedom-day' in the UK**

The highly transmittable variant of concern is swapping the UK with an accelerated wave of infection, and the government has removed all restrictions.

Mandatory mask wearing is gone, limits on the numbers of people who can mix indoor or outdoor have ended, social distancing is limited to people who have tested positive for the virus and airports, and venues like nightclubs and sports stadiums are free to open at full capacity.

Bhutan went from no jabs to being a world leader in COVID-019 vaccine rollout in three weeks

When the tiny Himalayan nation of Bhutan was gifted 150,000 doses of the AstraZeneca coronavirus vaccine in January, they decided to consult the stars before rolling them out.

Buddhist monks informed the government that the most auspicious time to begin the inoculation drive was late March, and a woman born in the Year of the Monkey was an ideal candidate.