

# 70 Per cent of Deaths from Pfizer Vaccine in Japan Reported Within 10 Days of Jab: Study

**By Naveen Athrappully - 12/12/2023 Updated: 12/12/2023**

Around 70 percent of people who died in Japan after receiving a Pfizer COVID-19 vaccine lost their lives in the first 10 days following the jab, according to a recent study.

The peer-reviewed Japanese study, [published in the Cureus journal](#) on Dec. 7, looked at the association between Pfizer COVID-19 vaccination and deaths within 10 days of vaccination.

The risk period was defined as within 10 days of vaccination, with vaccination day being Day 1, and the control period defined as 11 to 180 days after vaccination.

The analysis was divided into two groups: Group 1 representing individuals aged 65 and above and Group 2, which included people aged 64 and below.

The researcher identified 1,311 deaths in Group 1, which included 662 males and 649 females. In Group 2, the team identified 247 deaths—155 males and 92 females.

“The percentage of reported cases that experienced death within 10 days after vaccination was 71 percent in Group 1 and 70 percent in Group 2,” said the study results.

## **Over-65s**

In Group 1, more women than men died overall from various medical conditions in the first 10 days of vaccination. Following the 10 days, there were more deaths reported of men.

Most of the post-vaccine deaths happened on the second day, followed by the third and fourth days.

Other than “unexplained deaths,” the biggest cause of death in this group was ischemic heart disease (119 deaths), followed by heart failure (92), and aspiration pneumonia/asphyxia (72). Autopsies were performed in eight of the 239 unexplained death cases.

## **Group 2**

In Group 2, over two times more men died than women from various medical conditions during the first 10 days of vaccination. Overall deaths after the initial 10 days were only slightly higher among men.

The highest number of post vaccination deaths were registered on the third day, followed by the fourth, second, and fifth days.

After “unexplained deaths,” the biggest cause of death in this group was ischemic heart disease (27 deaths), cardiac arrhythmias (24), subarachnoid hemorrhage (20), and myocarditis/pericarditis (17). Autopsies were conducted in nine out of the 51 unexplained deaths.

There was an outsized difference in male–female deaths owing to myocarditis/pericarditis during the “risk period,” with eight men dying compared to just one woman. Heart failure resulted in the deaths of nine men compared to two women.

“Some myocarditis/pericarditis cases may be included within the unexplained deaths category. Myocarditis is a complication of vaccination, especially in young adults and adolescent males,” said the study.

One contributing factor for higher deaths of men during the first 10 days is “thought to be the high number of myocarditis/pericarditis deaths including undiagnosed cases.”

For both groups, the other death causes were: cardiac arrhythmias, aortic aneurysm/dissection, intracerebral hemorrhage, subarachnoid hemorrhage, cerebral infarction, respiratory failure, interstitial lung diseases, pulmonary embolism, pneumonia, sepsis, anaphylaxis, thrombocytopenia, and marasmus.

In short, many more older Japanese women and men below 64 faced a higher risk of death immediately within the first 10 days of Pfizer vaccination.

### **Male–Female Differences, Study Limitations**

The author, Yasusi Suzumura, calculated sex ratios for all-cause deaths and each outcome by dividing the number of males by that of females and multiplying by 100. That is, the higher the sex ratio, the greater the number of male deaths.

The author found notable differences between the number of deaths of men and women in both groups, impacting the study’s sex ratio.

“If there is no effect on the occurrence of death, there should be no difference in sex ratios by period. Thus, this finding indicates that vaccination may influence the occurrence of death during the risk period and might be associated with death,” the study stated.

The data on death numbers for the study were sourced from Japan’s Ministry of Health, Labour, and Welfare (MHLW).

Specifically, cases involving only the BNT162b2 (Pfizer-BioNTech) mRNA vaccination reported between Feb. 17, 2021, and March 12, 2023, were included.

The study does not directly link the deaths with the vaccinations. "The results indicate that the BNT162b2 mRNA vaccination may influence the occurrence of death during the risk period," said the study.

The author pointed to some of the limitations of the study including that the number of days from vaccination to death may vary depending on treatment, and that the study did not consider the effects of the vaccination after 11 days.

Besides this, the author said the sex-based reporting could have only been performed by a few doctors, and that the mortality rates could not be calculated because the analysis was performed only for deaths after vaccination.

The study had a limited sample size, and hence should be "carefully" interpreted. "Finally, the analysis results should be carefully interpreted because not all deaths reported to the MHLW were related to vaccination. Incidental deaths may be included in the reported deaths."

The study author stressed that since vaccines are administered to mostly healthy individuals, it should have a "higher level of safety than pharmaceuticals used for treatment and should have an exceptionally low vaccination mortality rate."

Therefore, even when the vaccination mortality rate is exceptionally low, vaccine safety must be analyzed with statistical methods.

"On this occasion, it is difficult to determine whether a post-vaccination death is incidental or vaccine-related," said the study. However, the author concluded that this approach can offer valuable insights into assessing vaccine safety.

The Epoch Times reached out to Pfizer for comment.

### **'Similar to Vaccine Deaths in US'**

Commenting on the study, cardiologist Dr. Peter McCullough said that the data on "COVID-19 vaccination and death in Japan is very similar to vaccine deaths in US/Domestic cases in VAERS," according to a Dec. 9 X post. "Strongly supports causality for the nearly 1150 immediate deaths observed."

VAERS has reported 18,188 deaths from COVID-19 vaccination through Sept. 29, 2023, with 1,150 deaths occurring on the same day as the vaccination.

In addition, 2,040 miscarriages, 9,053 heart attacks, 17,433 permanent disabilities, 5,057 myocarditis/pericarditis cases, and 36,184 severe allergic reactions were also reported.

The Association of American Physicians and Surgeons also shared the Japanese study on X.

The study author clarified that they have received "no financial support" from any organization for their submitted work.

Multiple other studies have also linked COVID-19 vaccines with higher mortality rates. A Sept. 17 report by [Correlation Research in the Public Interest](#) found that in the 17 nations analyzed, all-cause mortality increased when COVID-19 vaccines were distributed.

Nine out of these 17 nations had no detectable excess deaths following the March 2020 WHO declaration of the pandemic. Excess deaths only began with the vaccination campaign.

In 15 of the 17 nations, there were unprecedented peaks in all-cause mortality in January and February 2022, which coincided with or followed the rollout of booster shots.

The study estimated 1.74 million excess deaths in the 17 nations during the vaccination period, which comes to roughly 1 per 800 injections.

Meanwhile, Japan has approved the world's first self-amplifying mRNA COVID-19 vaccine, although the manufacturer has not published safety or efficacy data for the shot.

The latest iteration of the [mRNA vaccine](#) is even more potent than the present version, as it generates more spike proteins in the human body.