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From 'miracle' to lawsuit: AstraZeneca vaccine quits market

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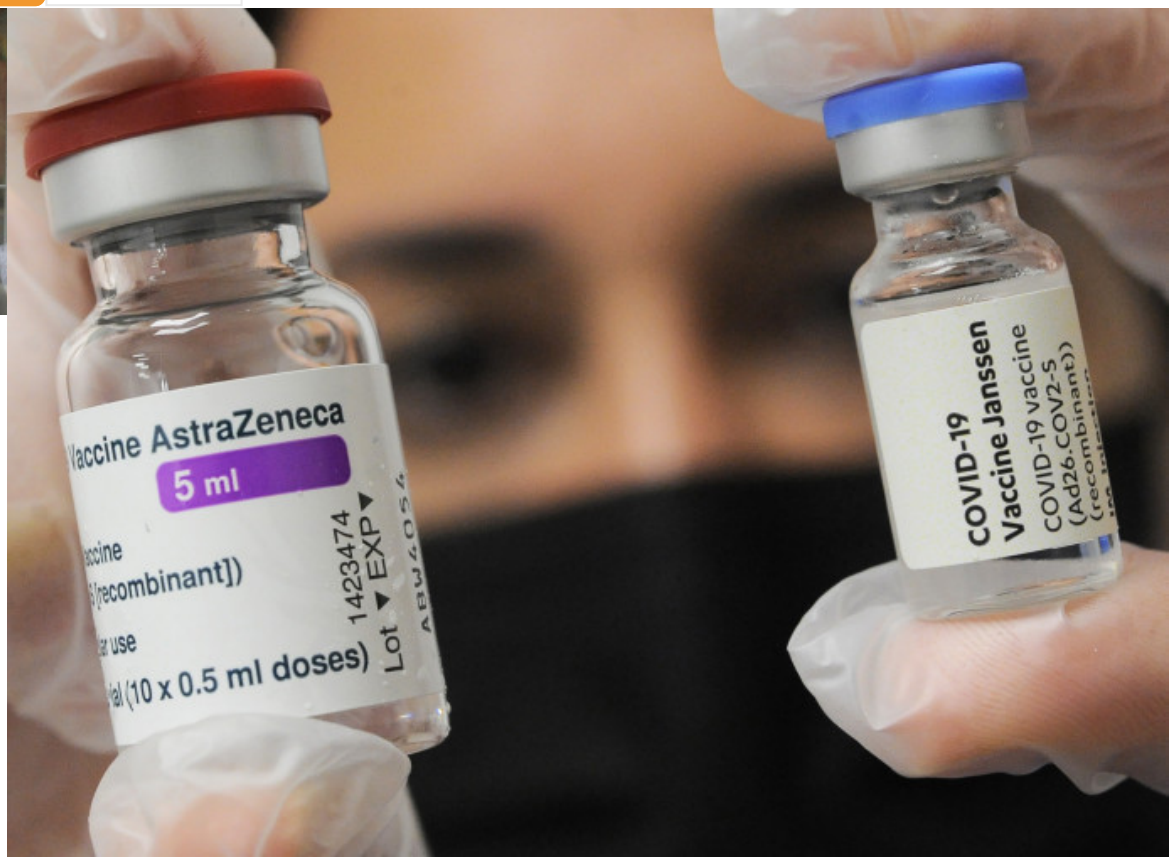

Pfizer, AstraZeneca and Moderna: this was the vaccine 'holy triad' that arrived at Christmas 2020 to save humanity from Covid. Developed within a few months, instead of a few years as was the normal practice for any vaccine, its absolute efficacy and

almost total absence of side effects was guaranteed: experts' words. What little documentation was made available on the studies that had led to the product's realisation, to the attentive eyes of true vaccinology scholars, seemed to present several criticalities, but the voices of dissent were crushed by the dominant media narrative, and the great trial began. Today, 40 months later, it has come to an end, with the withdrawal of the drug.

What happened? For some time in Great Britain, AstraZeneca's Covid-19 vaccine, developed by the Anglo-Swedish giant in collaboration with Oxford University and produced by the Serum Institute of India, has been in a legal storm. A class-action lawsuit has been filed against AstraZeneca by aggrieved citizens and family members of people who have died as a result of serious consequences attributed to the vaccine, claiming damages of up to GBP 100 million. Most of the reported damages are attributed to the clinical phenomenon known as TTS, or 'thrombosis syndrome with thrombocytopenia', characterised by blood clots and low blood platelet levels.

While contesting the accusation, in one of the court documents filed, as revealed by the British newspaper *The Independent*, AstraZeneca acknowledged that the vaccine can cause TTS in rare cases. Until now, however, the pharmaceutical group had always denied it.

The World Health Organisation, recalls *The Independent*, had confirmed that thrombosis with thrombocytopenia had been reported as an adverse event after vaccination with the AstraZeneca vaccine, but the vaccination's benefit in protecting against Covid-19 was considered to outweigh the risks, and so it was widely administered in over 150 countries, including Great Britain and India.

In Italy, it had been chosen to vaccinate teachers and members of the police force, without any scientific criteria. Quite simply, the Ministry had bought shares of the three main vaccines (there was also a fourth, Johnson&Johnson, which had a very short life) and it was necessary to establish to whom it should be administered. Faced with the emergence of cases of serious reactions among young people, it was decided to reserve its use for the elderly. Then, without much ado, the Anglo-Swedish product disappeared from the vaccine hubs, and we moved towards a monopoly of mRNA vaccines.

The final farewell to this product came in the last few days, with a statement by a leading official of EMA, the European Medicines Agency, the Italian Marco Cavaleri, who at the European Medicines Agency is in charge of Health Risks and Vaccine Strategies and chairs the Emergency Task Force (ETF).

"Given the amount of available and effective vaccines for the new Covid-19 variants, there was no longer demand for the Vaxzevria vaccine (AstraZeneca's trade name), which consequently was no longer produced or distributed. Since this means there no future demand for the product, AstraZeneca has therefore decided to withdraw the marketing authorisation for Vaxzevria within the EU'.

The authorisation of the anti-Covid vaccine will therefore be withdrawn, and the process has already officially started with the European Commission. This is also in line with the EMA's recommendations that vaccines that are no longer used and up-to-date be withdrawn, also with a view to the coming autumn-winter 2024-25. The Covid vaccination, in the intentions of the supranational health bodies, such as WHO and EMA, must be continued to the bitter end, annually, with updates adapting them to new sub-vaccines as they emerge. The Covid vaccination will definitely complement the seasonal flu vaccination, but AstraZeneca will not sit at the table. Its trial has ended. Regardless of what the outcome of the class actions brought against the company will be, its lost the challenge. Not only with the virus, but also with the competition. No alternatives to mRNA gene products containing new spike proteins are currently being offered.

AstraZeneca's exit from the scene should finally lead those who at its arrival and that of the other vaccines cried out for a scientific miracle, idolising these harbinger of salvation products, to serious reflection. In fact, they were only drugs, experimental, and consequently with efficacy and safety yet to be verified.