



Justice Centre for Constitutional Freedoms

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Dear Dr. Yiu,

We write to you on behalf of numerous Alberta Health Services (“AHS”) non-unionized employees and workers under threat of unpaid suspension and ultimately dismissal from their employment (collectively, the “Workers”) for deciding they cannot take one of the experimental COVID-19 vaccines (the “Mandate”).

As is their constitutional right, the Workers considered the data regarding the Covid shots and weighed said data against their own personal circumstances. They have determined that they cannot give informed consent to the Covid shots.

While the Mandate includes a possibility for exemptions, such exemptions are so narrowly defined by AHS as to exclude the Workers, who have legitimate concerns regarding the safety and efficacy of the vaccines. We put you on notice that the Mandate is both unscientific and unethical, and must be reversed immediately, for the reasons cited below.

If the Mandate is not reversed, we will be forced to take legal action against AHS.

No Proof the Vaccines Are Safe

According to the Vaccine Adverse Event Reporting System (“VAERS”), the adverse events reporting database operated by the Food and Drug Administration (“FDA”) and the Center for Disease Control (“CDC”), COVID-19 vaccines have resulted in 7,920 deaths in the United States during a period of only eight months.¹ The number of deaths has since doubled.² In addition, VAERS reports that the vaccines are associated with 9,446 life-threatening events, 8,958 permanent disability events, 36,894 hospitalizations, 298 hospitalization prolongations, and 75,926 emergency room visits. Adverse events associated with the COVID-19 vaccines total 589,185.³ These numbers are much larger

¹ <https://wonder.cdc.gov/vaers.html>

² <https://openvaers.com/covid-data/mortality>

³ <https://wonder.cdc.gov/vaers.html>

than the death and other adverse events numbers for all other vaccines combined, over a period of 31 years.

A 2011 study in which Pilgrim Health Care and Harvard University collaborated,⁴ as well as a 2021 study published in the *Journal of the American Medical Association*,⁵ disclose that actual adverse events occur at approximately 100 times the rate VAERS indicates, placing total adverse events at 58.9 million. If the 2011 and 2021 studies are applied, the Covid vaccines may have resulted in nearly 1 million life threatening events, 900,000 cases of some variety of permanent disability, 3.7 million hospitalizations, 30,000 prolonged hospital stays, and emergency room visits at nearly 7.6 million. The 2011 study indicates that due to non-reporting, the actual deaths from the experimental Covid shots are likely much higher than reported in the VAERS.

As you are undoubtedly aware, all of the vaccines currently in use have been linked with debilitating side effects, which the FDA has acknowledged.⁶ All but one of the shots are under “Emergency Use Authorization” in the US; all but two are under “Interim Authorization” in Canada.⁷ Various studies are required to continue for even the approved vaccine with the final report due in mid-2027.⁸ The FDA’s approval document discloses that the results of the study determining risks to pregnant women and their unborn will not be known until the last day of December 2025.⁹

In fact, women may be at unique risk for adverse events following administration of the vaccines generally. According to the CDC, as of April 23, 2021, all US cases of life-threatening blood clots following administration of the Johnson & Johnson vaccine occurred in women.¹⁰ The vast majority of cases of anaphylaxis also occurred in women.¹¹ In addition, “women are reporting having irregular menstrual cycles after getting the coronavirus vaccine,”¹² and 165 miscarriages have been reported to VAERS since the vaccines were introduced.¹³

Recent research by a prominent Canadian immunologist with a specialty in vaccinology, Dr. Byram Bridle, demonstrates a possibility that the mRNA vaccines (Pfizer and Moderna) could cause infertility in women of child-bearing years.¹⁴ According to Dr. Bridle, once injected, the vaccine contents appear to travel extensively throughout the body, including the brain and other sensitive tissues, such as bone marrow, the spleen,

⁴ [Harvard Pilgrim Health Care, Inc. Electronic Support for Public Health-Vaccine Adverse Event Reporting System \(ESP:VAERS\), online: https://digital.ahrq.gov/ahrq-funded-projects/electronic-support-public-health-vaccine-adverse-event-reporting-system.](https://digital.ahrq.gov/ahrq-funded-projects/electronic-support-public-health-vaccine-adverse-event-reporting-system)

⁵ [Blumenthal KG, Robinson LB, Camargo CA, et al. Acute Allergic Reactions to mRNA COVID-19 Vaccines. JAMA. 2021;325\(15\):1562–1565. doi:10.1001/jama.2021.3976.](https://doi.org/10.1001/jama.2021.3976)

⁶ [https://www.fda.gov/media/151710/download.](https://www.fda.gov/media/151710/download)

⁷ [https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html#wb-auto-4.](https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html#wb-auto-4)

⁸ *Supra* note 4 at p. 8.

⁹ *Supra* note 4 at p. 10.

¹⁰ [https://www.cdc.gov/media/releases/2021/fda-cdc-lift-vaccine-use.html.](https://www.cdc.gov/media/releases/2021/fda-cdc-lift-vaccine-use.html)

¹¹ [https://jamanetwork.com/journals/jama/fullarticle/2776557.](https://jamanetwork.com/journals/jama/fullarticle/2776557)

¹² [https://www.ajc.com/life/women-reporting-irregular-menstrual-cycle-after-vaccination/XRN2P4FOWRAV7DIPYTU2MO67VA/.](https://www.ajc.com/life/women-reporting-irregular-menstrual-cycle-after-vaccination/XRN2P4FOWRAV7DIPYTU2MO67VA/)

¹³ *Supra* note 1.

¹⁴ [https://www.canadiancovidcarealliance.org/wp-content/uploads/2021/06/2021-06-15-children_and_covid-19_vaccines_full_guide.pdf.](https://www.canadiancovidcarealliance.org/wp-content/uploads/2021/06/2021-06-15-children_and_covid-19_vaccines_full_guide.pdf)

liver, adrenal glands, ovaries, et cetera.¹⁵ Damage to the ovaries or testicles *may result in infertility*, a consequence not apparent until attempting to become pregnant.¹⁶

Recent research suggests that it is possible that the spike protein present on the SARS-CoV-2 virus and reproduced by the vaccines is the primary cause of disease, infirmity, hospitalization, and death.¹⁷

The numerous studies calling into question the safety and efficacy of these shots renders your and AHS' threat against the employment of the Workers particularly morally repugnant and ethically reprehensible. Your threats against the Workers' livelihoods vitiates any possibility of informed consent.

Further, the Mandate is an insult to the inherent dignity and human rights of the Workers, each of whom have a right to weigh the evidence and make personal medical decisions for themselves free of duress.

No Proof the Vaccines Are Effective

As you know, or ought to know, the vaccines do not prevent COVID-19 infection, nor do they prevent the spread of COVID-19; vaccinated and unvaccinated alike contract COVID-19 and spread it to others¹⁸. Consistent with these facts, the vaccines are marketed as useful only for reducing the severity of COVID-19 symptoms. However, even the latter claim is suspect; as far back as October 2020, it was known that "COVID-19 vaccines designed to elicit neutralising antibodies may sensitise vaccine recipients to more severe disease than if they were not vaccinated."¹⁹

The Vaccine Mandate Is Unethical

The ostensibly "safest" version of these vaccines, the Pfizer shot, was approved after just three months and two clinical trials. It took just three months from drug application to full approval for a shot utilizing mRNA technology that has never been used in a successful vaccine in history, for a virus that has never been successfully treated by a vaccine in history. As you know that timeline is unheard of, and the lack of long-term testing raises a host of issues.

More generally, the FDA and Health Canada have acknowledged that administration of the EUA (US) and IA (Canada) versions of these vaccines is accompanied by grave health risks.

¹⁵ *Ibid.* at p. 2.

¹⁶ *Ibid.* at p. 28.

¹⁷ <https://www.qeios.com/read/26GTOD.2/pdf>.

¹⁸ Morbidity and Mortality Weekly Report (MMWR) Weekly/August 6, 2021/70(31); 1059-1062 (<https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e2.htm>); Nosocomial outbreak caused by the SARS-CoV-2 Delta variant in a highly vaccinated population, Israel, July 2021 (<https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2021.26.39.2100822>)

¹⁹ [Cardozo, T. and Veazey, R. \(2021\), Informed consent disclosure to vaccine trial subjects of risk of COVID-19 vaccines worsening clinical disease. Int J Clin Pract, 75: e13795. https://doi.org/10.1111/ijcp.13795.](https://doi.org/10.1111/ijcp.13795)

On June 23, 2021, the FDA announced its intention to place a heart inflammation warning on fact sheets for the Pfizer-BioNTech and Moderna vaccines.²⁰ According to the CDC as of June 23, 2021, the cases of heart inflammation appear to be notably higher in males and in the week after the second vaccine dose, although by no means nonexistent after the first. The CDC identified 309 hospitalizations due to heart inflammation in persons under the age of 30.²¹ We request that AHS provide us with the same kind of breakdown provided by Ontario Health Services in footnote 22 herein regarding the incidents of pulmonary embolisms, strokes, deep vein thrombosis, heart attacks, etc.

On April 26, 2021, **Health Canada announced its intention to place a *warning label*** on the Johnson and Johnson vaccine due to reports of blood clotting following vaccination.²²

On June 30, 2021, **Health Canada announced its intention to place a *warning label*** on the Pfizer and Moderna vaccines due to reports of myocarditis and pericarditis following vaccination.²³ Health Canada stated that industry professionals should “consider the individual’s clinical circumstances...when deciding whether to administer the Pfizer-BioNTech or Moderna COVID-19 vaccine to an individual with a history of myocarditis or pericarditis.”²⁴

Note that myocarditis and pericarditis are side effects of the vaccines themselves, that may result from the first dose alone, the implication of which is that a healthy employee with no such condition may acquire it upon receiving the first dose, after which a second dose would be contraindicated. The conundrum such a scenario produces is that the employee would be suspended without pay or dismissed for both complying and then not safely being capable of complying with the mandate. Moreover, the employee would be saddled with a life-threatening or life-shortening condition.

It is unethical for AHS to coerce or mandate a vaccine on an employee who already enjoys natural immunity as a result of having contracted and recovered from the virus, particularly since recent evidence suggests that the vaccines tend to diminish the protection natural immunity provides.^{25 26} We note that in the past few days, **Pfizer’s own scientists** have stated that natural immunity is superior to the Pfizer shot’s immunity.²⁷

The Right to Bodily Integrity Applies to All Canadians

AHS’ vaccine mandate is inherently oppressive because it imposes the vaccine on individuals who otherwise would be entitled to medical exemptions based on pre-existing

²⁰ <https://www.reuters.com/business/healthcare-pharmaceuticals/us-panel-review-heart-inflammation-cases-after-pfizer-moderna-vaccines-2021-06-23/>; https://www.publichealthontario.ca/-/media/documents/ncov/epi/covid-19-myocarditis-pericarditis-vaccines-epi.pdf?sc_lang=en

²¹ *Ibid.*

²² <https://healthycanadians.gc.ca/recall-alert-rappel-avis/hc-sc/2021/75479a-eng.php>

²³ <https://healthycanadians.gc.ca/recall-alert-rappel-avis/hc-sc/2021/75959a-eng.php>.

²⁴ *Ibid.*

²⁵ <https://www.nature.com/articles/s41577-020-00436-4>.

²⁶ <https://www.nih.gov/news-events/nih-research-matters/lasting-immunity-found-after-recovery-covid-19>.

²⁷ <https://m.youtube.com/watch?v=On5RYFbcxWY>

conditions, natural immunity, or religious objections or who would be entitled to decline vaccination based on the principle of informed consent. That principle, expressed in the Nuremberg Code, which was established as a safeguard against the horrific abuses associated with Nazi medical experimentation on prisoners during WWII, maintains that everyone has the right to decide whether to submit to experimental treatment without being subjected to “any element of force.”²⁸ Clearly, in the present case, the Mandate introduces an element of force since the Workers will be obliged to comply or face losing their jobs. Even the FDA’s Pfizer factsheet for healthcare providers indicates deference to the principle of informed consent, for it states: “The recipient or their caregiver has the option to accept or refuse (Pfizer-BioNTech) vaccine.”²⁹

Furthermore, the vaccine mandate is unconstitutional as it unjustifiably violates sections 2, 7 and 8 of the *Canadian Charter of Rights and Freedoms*, which protects the right to a religious exemption based on the guarantee of “freedom of conscience” and “freedom of religion,” and the right to informed consent based on the guarantee of “right to life, liberty and security” and the “right to be secure against unreasonable search and seizure.” AHS’ mandate also discriminates against an identifiable group, the “Covid unvaccinated”, contrary to section 15 of the *Charter*.

Upon acceptance of their offers of employment with AHS, none of the Workers agreed to any condition of employment involving participation in medical experimentation of any sort, let alone subjection to an inoculation which bears a Health Canada warning and is linked to the death and injury of many recipients.

We reiterate the critical points: **The vaccines are experimental and not fully authorized in Canada; the vaccines remain subject to ongoing clinical trials; the vaccines bear a Health Canada warning label, and the vaccinated and unvaccinated are both able to spread Covid to others.** In short, each of the Workers has determined they are unable to provide informed consent to the Covid vaccines. It is their constitutional right to make this decision free of coercion, threats and duress from AHS.

The Mandate requires the Workers to choose between providing for themselves and their families, against their right to avoid suffering and death as unwilling subjects in what amounts to a mass clinical trial. Further, your aggressive threat against the Workers occurs against the backdrop of government data which confirms that their overall risk of death by COVID-19 remains exceedingly low, even without any medical intervention whatsoever. Over 60% of the Albertans dying with Covid are 80 or older,³⁰ 96% are people with pre-existing conditions,³¹ and 75% are people with three or more serious health conditions such as cancer and diseases of the heart, kidney, liver and lungs.³² AHS data justifies targeted protection of the vulnerable, not a Mandate imposed on all employees, including the Workers.

These shots ought to be treated by AHS as an optional therapy for which an employees’ informed consent is required, and no penalty issued should such consent be withheld. No

²⁸ <http://www.cirp.org/library/ethics/nuremberg/>.

²⁹ <https://www.fda.gov/media/144413/download>.

³⁰ <https://www.alberta.ca/stats/covid-19-alberta-statistics.htm#severe-outcomes>

³¹ <https://www.alberta.ca/stats/covid-19-alberta-statistics.htm#pre-existing-conditions>

³² <https://www.alberta.ca/stats/covid-19-alberta-statistics.htm#pre-existing-conditions>

person in a free country should face financial ruin, the inability to provide for their children, or censure from society, simply for refusing to submit to an experimental medical procedure that has injured or killed many recipients the world over. AHS' threat against the employment of the Employees and Non-Unionized workers, and its attempt to override their lack of informed consent using coercion and fear, is reprehensible, immoral, and unconstitutional.

If the Mandate is not rescinded, we have instructions to sue AHS.

We look forward to hearing from you imminently.

Sincerely,



Jay Cameron, B.A., LLB
Litigation Director

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