



# The Delta Variant

## Covid Update August 2021

By Gary E. Foresman, MD

With so much conflicting evidence, changes in masking guidelines from the CDC, worry about breakthrough, and just plain frustration with the pandemic it is time for a dedicated article that tries to make sense of it all!

Please note that science is supposed to be mobile, recommendations are supposed to change as the evidence mounts and the virus mutates. If it all feels confusing then *you're probably doing it right!* Those who think they've got this figured out are to be avoided!

*Align yourself with those seeking the truth; avoid those who've found it!*

Furthermore, none of us have gone through a pandemic before, let alone a pandemic where the virus was politicized, masks were politicized, and the faction that clings to the lies that killed hundreds of thousands of Americans continues to lie to the public. This makes uniform recommendations in the *only* developed country in the world without universal healthcare a near impossibility.

In this article in the *New England Journal of Medicine* :

[https://www.nejm.org/doi/full/10.1056/NEJMOa2108891?query=featured coronaviruses](https://www.nejm.org/doi/full/10.1056/NEJMOa2108891?query=featured_coronaviruses) “Effectiveness of Covid-19 Vaccines Against the Delta Variant” we find solid evidence that the Pfizer vaccine in real life studies was 94% effective against alpha while still 88% effective against delta, The Oxford vaccine (not in America) had 75% and 67% effectiveness against alpha and delta. Although not studied we expect similar numbers between Moderna and Pfizer as well as J&J and Oxford-AstraZeneca. This is UK data and did emphasize how important getting two shots was for the Pfizer vaccine. These numbers are quite reassuring!

Well, Gary, how about that *Morbidity and Mortality Weekly Report (MMWR)* detailing the Cape Cod outbreak?

([https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e2.htm?s\\_cid=mm7031e2\\_w](https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e2.htm?s_cid=mm7031e2_w))

I was hoping you would ask that! What this survey of 469 Covid-19 cases occurring between July 6-July 25, 2021 documented was that summer “events” in Cape Cod can spread SARS-Cov-2 while the country reels from a pandemic. 87% of the cases occurred in males, average age 42, and 74% were fully vaccinated with a fairly typical distribution

of the big three American vaccines. No deaths were reported and the majority of cases were mild to moderately symptomatic.

What I found interesting is that reports in prominent newspapers indicated that vaccinated individuals carried the same viral load as unvaccinated individuals. What the actual report shows was that there was *no quantitative assay used, thus no conclusions about viral loads can be drawn!* Thus no conclusions at all can be made about whether the vaccines prevent transmission to others! What this report tells us is don't do stupid things with middle-aged men in the middle of a pandemic, even while vaccinated!

One last article from the same MMWR:

[https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e1.htm?s\\_cid=mm7031e1\\_w](https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e1.htm?s_cid=mm7031e1_w)  
“Covid-19 Vaccine Safety in Adolescents...” didn't get the press that the Cape Cod article got, but should have. Following the Pfizer vaccine for 7 months in this age group has provided bone-chilling results. Despite validated, albeit rare, cases of myocarditis (heart muscle inflammation) and 14 deaths reported, 6 still pending investigation, the CDC finds “no causal link” between the vaccine and the known complications and deaths.

The problem with the CDC being a vaccine promoting subsidiary of Big Pharma is this kind of cover-up. There have been no proven mortality benefits in preventing Covid-19 in this age group, substantial morbidity including 25% unable to perform their normal daily activities the day after dose 2, 0.04% hospitalized due to side-effects, and now mounting evidence of myocarditis and death. Meaning absolutely no benefit to the vaccinated group at profound morbidity and a mortality risk that is being covered up.

Why would we sacrifice our children? To improve vaccination rates and to protect those that refuse to protect themselves. I cannot recommend this vaccine now to those under 18, as the risks simply outweigh the benefits in this age group, yes, even in the face of the delta variant. Exceptions would include children with medical conditions that would put them at higher risk such as diabetes, moderate to severe asthma, and many others where the conclusion of the discussion with the adolescent, the parents and the pediatrician all agree that the benefit of getting the vaccine outweighs the risk of what amounts to a cold/flu in this age group.

Conclusions to be drawn from the science on the delta variant:

1. **mRNA vaccines** provide great protection still, but it is not yet time to do prolonged exposures with those who might not be vaccinated; it turns out there are limits that can be pushed.
2. Keep an **ivermectin Rx** on hand, even if vaccinated, especially if you are hanging out unmasked with unvaccinated individuals. Follow the recommendations in the previous article (Link)
3. **Vaccinate adults over 17**, with Moderna or Pfizer, get two doses as the delta variant has been clearly shown to require this.
4. **Masks** should be worn with prolonged indoor exposures with unvaccinated individuals.

Live life fully and without fear, yet with intelligence. If your personal instinct is to wear a mask, do so, but most of the advice to go back to masks is about fear. 99.9% of the breakthrough cases are self-limited and will not lead to hospitalization. If an unvaccinated person gets Covid 19 at this point they are simply choosing to risk the infection vs. risk the vaccine, which is their choice!

This virus and all its mutations will be with us for years to come. Adapt and thrive.

Your Journey to Health and Healing,

Gary E Foresman MD