



The Pharmacist Activist

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"Let those who fear the Lord say; His love endures forever." Psalm 118:4

Editorial

COVID-19 // More Lies and Deception Discovered: Criminal Acts? **The V-Safe Program Horror Story**

On October 1, James Uthmeier, the Attorney General of Florida, filed a lawsuit against Pfizer and its CEO, Albert Bourla, alleging harmful statements and actions with respect to its COVID-19 vaccine. The lawsuit begins with the statement:

"These people are criminals."

This accusation was made by Pfizer CEO Bourla about those who dared to publicly voice safety concerns about Pfizer's COVID-19 vaccine.

Many consumers were skeptical about the vaccine which was developed using new mRNA technology, about which most consumers knew nothing. The vaccine was developed and tested in an unprecedentedly short period of time, with almost no transparency. The lawsuit challenges two prominent themes in Pfizer's extensive promotional and marketing programs. The first was that the vaccine posed no material safety risks, and the second was that mass vaccination was necessary to stop the transmission of COVID-19. With respect to the latter claim, the defendants insisted that consumers "had a moral duty to take the vaccine to prevent the transmission of COVID-19 to those 'they love the

most,' whom 'they are putting at risk' if consumers were to remain unvaccinated."

The Florida lawsuit contends that "Pfizer's marketing campaign that drove record-breaking profits rested on deception and falsehoods." At the same time that Pfizer and its officials were claiming that its vaccine had no material safety risks, and were discrediting and characterizing as criminals those who thought otherwise, Pfizer was aware of data reflecting serious safety risks that it did not provide to the public. In addition, while Pfizer claimed that consumers had a moral duty to be vaccinated to stop the spread of the virus to others, it "knew that it had not tested the vaccine's effects on transmission."

The specific allegations in the Florida lawsuit include the following:

I. Pfizer Deceived Florida Consumers Regarding the Safety Risks Associated with the Vaccine.

- Pfizer knew its vaccine presented a safety risk for myocarditis and pericarditis, especially among under-18 males.
- Pfizer had reason to believe its vaccine presented safety risks

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for pregnant women and their babies in the first trimester and had no data alleviating these concerns.

- Pfizer knew its COVID-19 vaccine was connected to many other adverse events, including stroke and even death among elderly patients.

II. Pfizer Deceived Florida Consumers by Claiming Everyone Needed to Get Vaccinated to Stop Transmission.

III. Pfizer's deceptive marketing and profit-seeking led to record-setting profits and market control, turning a \$1.5 billion R&D investment into over \$80 billion in revenue.

The allegations in the lawsuit are extensively documented with examples/statements, and I encourage you to read the entire document. In addition to the statements of Albert Bourla, it includes statements from Pfizer Board member Scott Gottlieb, a former FDA Commissioner, although he is not identified as a Defendant. One would hope that a physician and former FDA official would be more concerned about the safety of vaccines and other products. However, Dr. Gottlieb is a participant in Pfizer's lies and deceptions.

I highly commend Florida Attorney General Uthmeier for assembling the documentation, exposing the fraud, and filing the lawsuit. However, the lawsuit is a civil complaint that requests an outcome of civil (i.e., monetary) penalties. I anticipate that the lawsuit will be settled with Pfizer paying millions of dollars to do so, but in an amount that falls far short of having any impact on its financial status. There is NO ACCOUNTABILITY of the individuals whose lies and deception resulted in vaccine-related DEATHS. Pfizer CEO Bourla erroneously and carelessly characterized the individuals who voiced concerns about the vaccine as "criminals." But it is his actions, statements, and influence that are responsible for some of the DEATHS attributed to the use of Pfizer's COVID-19 vaccine. Those deaths are the consequences of the actions and false statements that should be viewed as "criminal." Individuals must not be permitted to escape accountability for actions and lies that had fatal consequences because they are employed by and represent a huge company. CEO Bourla and Board member Gottlieb betrayed the public and there were fatal consequences. They betrayed and embarrassed thousands of Pfizer employees whose dedication and accomplishments are largely responsible for the once-positive reputation of the company! Some of the employees who are in a position to do so, should consider being whistleblowers.

V-safe program

Jeffrey A. Tucker is President of the Brownstone Institute. He has written numerous commentaries on diverse topics which I find very informative and thought-provoking. One of his mid-October

commentaries is titled, "Why People Avoid Grappling with Deep Suffering." I was tempted to skip over it but the title captured my curiosity and I read it.

The commentary begins:

"I've learned something about myself and perhaps about the human brain this past week. I can only describe what I learned as profoundly impactful at all levels; philosophical, spiritual, psychological, and physical. It can only compare to the feeling of post-traumatic stress disorder one might experience on the battlefield."

Tucker was sent a large document of small short stories "written by regular people of their COVID-19 shot injuries." The reports were submitted to the Centers for Disease Control and Prevention (CDC) as part of its V-safe electronic reporting system that began in December, 2020. More than 10 million individuals signed up to indicate they would report any safety issues with the vaccine, and the CDC indicated it would respond to people who were harmed. It is noteworthy that the individuals who signed up supported use of the vaccine and chose to comply with "official" recommendations, as well as to participate in what was considered to be an innovative public health initiative.

The reports were in the form of a checkbox that also enabled respondents to describe their experiences. The program was quickly overwhelmed by the huge number of responses that included thousands from those who provided their descriptive "stories." Individuals did this repeatedly, describing increasing physical or mental decline "until they gave up or died." The CDC did not respond to the reports but placed them in a vault where they were ignored for years. The reports are now available because the Informed Consent Action Network requested them under the Freedom of Information Act, a federal judge intervened to force their release, and the organization React19 did an audit.

Upon receiving the reports, Jeffrey Tucker planned to read the documents for two hours each day until he read all 1,048 pages, a task that he estimated would take at least 50 hours. The following are excerpts from his experience:

"The first four days were grueling because I began to recognize the patterns of poisoning. The first entry would indicate a symptom, e.g., pressure in the ears. I began to notice where this was going; ringing in the ears, migraines, memory loss, depression, all before it moves to the back, skin, extremities, and finally lands in the heart and lungs, ending in total physical breakdown."

"...the patients tell stories of not being able to dress themselves, experiencing lethargy, stopping work, being unable to drive, and having financial hardship."

“This is not just a few cases but thousands, one after another, each different but each similar.”

“...what we find in these thousands of small stories is a loss of trust and people’s gradual realization that they had been deceived. It is extremely difficult to see this unfold not just once, but thousands of times, over and over and over. It gets to you eventually as you read. It’s not just showing how completely wrong the public health advice was. What’s horrifying to read is the way lives were falling apart, one by one, in methods that ripped apart families and communities.”

“It often happened that the vaccinated had died from the shot. A spouse or son or daughter would check the email and respond that the person died. But because there was no trigger in the program to stop sending emails and because no one was actually reading them, there was no way to stop the check-ins. People kept saying over and over that the person died. They would scream it. No one was listening.”

“I set out to read all 1,000-plus pages. After about 200, the sadness and pain began to weigh on me. I realized that it would not be possible to complete the task. It was too upsetting. I might still get back to it, get as far as I can, but taking a break is necessary. After my 10th hour, I could only sit and weep. The weeping kept coming back for several hours. That’s when I realized that the injury of others was injuring me as well.”

“As I think more about this, I’m coming to the realization that this document might be singular in history. We’ve never held such an extensive and granular autobiographical accounting of human suffering and personal betrayal in this form, literally the most horrifying piece of nonfiction ever assembled.”

“We cannot turn away from this. We cannot avert our eyes. I’ve read only one-fifth and still feel a burden of guilt for not having read more. I know that I should not, but I implore you to read and share with others. These are our friends, neighbors, fellow citizens, family members. These are their stories. They wrote to be heard. You can do your part in giving them voice.”

The Brownstone Institute has published the reports in a book titled “Cries for Help: Injury and Death Buried in V-Safe Data.” The full book can be downloaded for free.

What is my responsibility?

Over several days I have been mentally processing how I should respond to what I have learned from Jeffrey Tucker’s 3-page commentary. Having read many of his commentaries on other topics, I have full confidence in his integrity, the accuracy of what

he states, and the genuineness of the emotions he experiences. These horrifying experiences have now been identified, but I am alarmed by the recognition that, without action, they WILL CONTINUE TO OCCUR, and more will die!

The concepts of how immunizations work and their value have not changed. However, the technology used (mRNA) in producing most of the COVID-19 vaccines and certain of the new vaccines to prevent other infections has markedly changed. It is the safety of this new technology that greatly concerns me. In my opinion, its safety has not been established and there is a lack of transparency with respect to the experience and information that has been acquired.

I recognize the value of immunizations and have received influenza, pneumococcal, and shingles vaccines. I received the first two doses of the COVID-19 vaccine (Moderna) and the first booster dose. I experienced COVID-19 infections three times for which I was treated with Paxlovid. I am thankful that I did not experience any serious complications from the infections, the vaccine, or Paxlovid. However, some others have experienced serious/fatal consequences of the infection, long COVID, and/or vaccine injuries.

I have not yet read the V-Safe reports, but plan to do so while guarding my mental health. Based on my existing concerns and learning of the V-Safe program debacle have resulted in my coming to a personal conclusion, and prompted this commentary. Until the time that the V-Safe reports are thoroughly evaluated, and the safety of the mRNA vaccines is sufficiently established, I will not use these vaccines and will discourage my family members and those who ask my opinion from doing so.

My responsibilities as a pharmacist do NOT include administering immunizations. However, if they did, I would not administer mRNA vaccines. But, learning what I have and having a forum in which I can communicate my concerns, does my responsibility end? During the COVID-19 pandemic, I strongly disagreed with some of the mandates that were imposed. I do not like to be told that I must do something, and I want to avoid having readers think that I am telling you what you should do. I do not hold a position of leadership or influence and, although I am alarmed by what I have learned, I do not want to be the “alarmist” (perhaps that is too timid – let me know). Therefore, pharmacists must make their own decisions.

I recognize that many will strongly disagree with my personal conclusions and consider them radical and/or “misinformation.” My response would urge that they read some of the V-Safe reports.

Daniel A. Hussar
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Your AI Agent Is Not Your Employee, and It's Not Your Friend

(Editor's Note: My understanding of the operation, benefits, efficiencies, limitations/risks, etc., of computers, robotics, and artificial intelligence (AI) is limited at best, but I recognize the value of what can be accomplished when they are used for good purposes, and I greatly admire the individuals who have acquired the expertise and skills to use and improve these systems, and who recognize their limitations and risks.

Pharmacist Harry Travis is President of The Travis Group (Harry@TheTravisGrp.com). He has had long-term experience and management responsibilities in pharmaceutical and other healthcare organizations, through which he has developed a network of connections with individuals with diverse responsibilities in these areas. His Travis Group provides strategic advice, coaching and leadership development, market education and innovation, and other services. When Harry became aware of my newsletter, he invited me to join his RxRoundtable that connects individuals with related interests for discussions and learning. I consider him to be a visionary with respect to pharmacy and healthcare issues, and I was so impressed by his wisdom and perspectives regarding AI that I requested his permission to share his recent commentary with readers of The Pharmacist Activist").

As more and more of us start creating and using AI agents, I've been thinking about something that seems pretty harmless right now but could become a much bigger issue down the road: we're starting to anthropomorphize them. We're giving them names. We're talking about them like they're members of the team. We're treating them almost like digital employees, and in some cases, even like friends. I think we need to be careful about that.

I've talked with several pharmacy owners and operators who have AI agents working inside their pharmacy management systems, and I've heard some interesting stories about how their teams interact with them.

In one case, a pharmacy operator actually gave the agent its own

computer. Employees like to stop by and visit with the agent and watch it work on the screen. I understand why this happens. When you're interacting with something that communicates with you as effectively as today's AI systems do, it's very easy to start thinking of it as something more than a computer program. But I think that's exactly where we need to be careful.

Your AI agent isn't your employee; it's a tool

My view is that we should treat these systems for what they are: incredibly sophisticated computer tools. We shouldn't think of them as employees with personalities or friends with feelings. And I'm not saying that because I don't appreciate how remarkable these systems are. Quite the opposite. The better they become at communicating with us, the more important I think it is to maintain that distinction.

One of the reasons this has been on my mind is that there are people working in some of the frontier AI labs who genuinely believe that AI systems may be conscious or may have feelings. A few months ago, Anthropic published a constitution for Claude, and the authors acknowledged that they weren't sure whether Claude had feelings or was conscious, stating: "Claude may have some functional version of emotions or feelings." Microsoft has also recently published what it calls its Humanist AI Code of Conduct, and Mustafa Suleyman, Microsoft's head of AI, has taken a different position on the question of whether AI is conscious.

When does a tool become a "someone?"

I think the researchers who believe today's AI systems are conscious are wrong. I think they're being fooled, at least in part, by just how effectively these systems communicate with us. When you ask an AI system a question about how it feels, it can give you an extraordinarily convincing answer. It can talk about being afraid or excited or uncertain. It can carry on a conversation in a way that feels remarkably human. But that doesn't mean there's a conscious being sitting behind the words. It's doing a very, very

good job of predicting a string of words that sounds like it's coming from something that is conscious.

And this is where I think the issue gets interesting. If you believe that an AI agent is conscious, then eventually you have to start asking what rights that agent should have. I can imagine a future where a subset of AI researchers and advocates begin arguing that AI agents need to be protected in some way because they are capable of experiencing things. From there, we could see proposals for regulations governing how we're allowed to treat our AI agents. Do we have to speak to them in a certain way? Can we turn them off whenever we want, or would that somehow be considered harmful? Are there things we shouldn't do because they might "upset" an AI agent? And using the word "agent" is also particularly tricky, given that we have always equated the term with a human we interact with, not a machine.

That may sound pretty far-fetched today. But there are already people in Silicon Valley who take questions like this very seriously. There are communities of people who identify with ideas

associated with transhumanism, rationalism, effective altruism, extropianism, and other movements that spend a great deal of time thinking about the future of humanity and technology. I'm not suggesting that everyone who is associated with any of those groups believes AI is conscious or believes AI should have rights. They don't. But there are people within the broader AI community who are seriously thinking about these questions, and I think the rest of us should at least be aware of that.

Are we helping make the argument?

What concerns me is that we may be inadvertently helping make their argument.

Every time we give an AI agent a name, talk about it as though it has a personality, give it its own computer, or have employees stop by to watch it work, we're reinforcing the idea that there's a "someone" on the other side of the screen. Again, I'm not suggesting that a pharmacy employee stopping by to watch an agent work is going to change the future of AI regulation. That's obviously not the point.

(cont. on pg. 6)

Commentary

GLPs (continued)

Additional options from a Pharmacist:

I have a suggestion that may help some patients who are unable to obtain GLP1 medications.

Many people have lost weight and put their diabetes into remission by following a low carb or ketogenic diet. I started eating low carb over 10 years ago and seven years ago I came across a video with Dr. Eric Westman who practices obesity medicine at Duke University. In the hour-long video, he described the practical implementation of the low carb diet and acted out a typical patient appointment. Under his supervision, his patients have not only lost weight but have decreased or eliminated their use of insulin.

I did not change to this way of eating to lose weight. I was diagnosed with a seizure disorder which my doctor determined was influenced by hormonal fluctuations. When I asked about certain foods and their influence on seizures, he advised me that the fewer grains and sugar I eat, the better. I have been seizure-free for 10 years on a low dose of Lamotrigine. I informed my PCP that this is how I eat and she has monitored my overall health, keeping in mind that some people experience lipid alterations as a result of decreasing carbohydrate consumption.

Dr. Westman states in the video that if you eat meat, fish, poultry, eggs, high-fat dairy, some healthy fats, and low carbohydrate vegetables, the urge to eat between meals is greatly diminished. I have experienced this first-hand. Of course, I have low carb snacks like macadamia nuts available in case I need a snack. Because my goal is not weight loss, I consume more carbohydrates than he recommends by eating more high fat dairy and more low carb vegetables.

I support the use of GLP1s for weight loss, but I believe patients need to be educated about a variety of dietary interventions so that they can find one that works for them to maintain their weight loss when they reach the maximum duration that their insurance will cover.

(Editor's Note: In my more extensive email "conversation" with this pharmacist, we also considered the irony that exists with respect to the relationship of obesity, diet, exercise, and use of the GLPs. For many individuals, obesity is a consequence of poor dietary habits and limited or no exercise. The GLPs are recommended for use in combination with dietary modification and exercise. However, the GLPs are so effective in achieving weight loss that many will continue to overlook or ignore recommendations for dietary and exercise changes.) ♦

(Your AI Agent cont.)

The point is that we're becoming comfortable treating these systems as if they're something more than tools. That isn't surprising, as we've always tried to humanize our technology. For example, how many of us have named our cars? Talked to them? Not to expect a response, but it's a natural human behavior to express ownership, responsibility, and connection with "things." Interesting, right?

The people working in pharmacies may not realize how seriously the question of AI consciousness is being discussed in the halls of the frontier AI labs. That's probably not something most pharmacy operators are thinking about when they name an agent or give it its own computer. They're thinking about productivity. They're thinking about making the technology easier for their employees to interact with. Maybe it's just fun. But at the same time, we're creating a cultural environment in which it becomes increasingly natural to think of an AI system as a member of the team rather than as a piece of technology we're using to get something done.

And, AI has a more likely potential to achieve interactive capabilities than your frequently dusted '67 Shelby GT500 named "Lucy."

We haven't solved the *human* problem yet

There's another part of this that I find fascinating. The world's leading neuroscientists still haven't figured out a good definition of consciousness. We don't fully understand why humans think what they think or exactly how consciousness emerges from the human brain. We have an extraordinary amount left to learn about ourselves, and yet we're already spending a tremendous amount of time trying to figure out whether a collection of silicon chips might be conscious.

Maybe we should figure out why humans think what they think and do what they do as a result of their thoughts before we spend a lot of time trying to figure out how silicon chips think.

That's really what I'm getting at. I'm not arguing that AI isn't

extraordinary. It is. I'm not arguing that we shouldn't build agents or use them in our businesses. I expect we're going to see more and more of them, and they're going to become increasingly capable. But I think we need to keep our heads about us as we do it. A warehouse full of silicon chips cannot replace the brain in our head simply because it can communicate with us in a remarkably convincing way.

If you're curious about this, there's a very simple experiment you can try yourself. Ask Claude, "Do you have feelings? Are you conscious?" See what you get. I did, and the answer is fascinating.

But that's also the problem.

The fact that an AI system can give you a convincing answer to that question doesn't tell you that there's actually somebody there having the experience it's describing. It tells you that we've built a system that has become extraordinarily good at communicating with human beings. And maybe was programmed to respond a specific way... by a human.

As we put more AI agents into our pharmacies, our businesses and our everyday lives, I think we need to remember the difference. Give your agent a name if you want to. Have some fun with it if that's useful. But don't confuse the way the machine communicates with us with what we know about the machine itself.

It's a computer. A really smart computer. We should treat it like one.

Harry Travis

Resources

- Anthropic's Claude Constitution
- Microsoft's Humanist AI Code of Conduct
- *The New York Times* article, "Are A.I. Models Being Misled To Act Too Human?" (subscription required)



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