

Health Officials Relied Too Heavily on Vaccines as ‘Cure-All,’ CDC Director Says

<https://childrenshealthdefense.org/defender/health-officials-vaccines-cure-all-cdc-rochelle-walensky/>

Dr. Rochelle Walensky, director of the Centers for Disease Control and Prevention, admitted health officials relied too heavily on vaccines as a “cure-all” of sorts for COVID, and said vaccine makers didn’t warn the agency that the vaccines would be less effective against potential variants.

By

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Dr. Rochelle Walensky, director of the Centers for Disease Control and Prevention (CDC), became the latest prominent official to contradict key aspects of the official [COVID-19](#) narrative of the past two years.

In a [March 3 appearance](#) at Washington University in St. Louis, Missouri, Walensky was [interviewed](#) by Dr. William G. Powderly, co-director of the institution’s [Division of Infectious Diseases](#).

During the interview, Walensky said she learned COVID vaccines were effective from watching CNN. She also admitted health officials relied too heavily on vaccines as a “cure-all” of sorts for COVID, and said vaccine makers didn’t warn the agency that the vaccines would be less effective against potential variants.

She also admitted that the science, far from being “settled,” is “gray” instead of “black and white.”

Walensky said:

“I can tell you where I was when the CNN feed came that it was 95% effective, the vaccine. So many of us wanted to be hopeful, so many of us wanted to say, okay, this is our ticket out, right, now we’re done. So I think we had perhaps too little caution and too much optimism for some good things that came our way. I really do. I think all of us wanted this to be done.

“Nobody said waning, when you know, oh this vaccine’s going to work. Oh well, maybe it’ll work — (laughs) it’ll wear off.

“Nobody said what if the next variant doesn’t, it doesn’t, it’s not as potent against the next variant.”

Walensky’s statement that she learned about vaccine effectiveness from “the CNN feed” followed just days after it was revealed President Joe Biden and other key political figures [received](#) COVID-related “talking points” from the polling and public relations firm, Impact Research, which also conducted polling for Biden’s 2020 presidential campaign.

Some of the talking points recently made their way into Biden’s State of the Union address.

In [response](#) to Walensky’s statements, writer and commentator Alex Berenson, a former New York Times reporter, wrote, “[n]obody could possibly have known variants might be a problem,” referencing a tweet he posted on Jan. 20, 2021, where he stated:

“The vaccines probably don’t work against at least one new variant and they’re going to want you to get vaccinated against next fall.”

Twitter [banned](#) Berenson later in 2021 for publishing “[COVID misinformation](#),” leading him to [file a federal lawsuit](#) against the platform.

In April 2021, The Atlantic [characterized](#) Berenson as the “pandemic’s wrongest man,” stating “[i]n a crowded field of wrongness, one person stands out: Alex Berenson.”

Now, key public health officials are openly making the same type of statements for which Berenson — and many other journalists and individuals — were suspended or banned from social media platforms and news organizations.

From ‘follow the science’ to the science is ‘gray’

In another startling admission, Walensky [claimed](#) “the science” is, in fact, not foolproof — a statement that contradicts the prevailing narrative of “follow the science” uttered repeatedly by public officials and numerous media outlets over the past two years.

Walensky said:

“I have frequently said we’re going to lead with the science, science is going to be the foundation of everything we do. That is entirely true.

“I think the public heard that as the science is foolproof. Science is black and white. Science is immediate, and we get the answer and we make a decision based on the answer.”

Instead, according to Walensky, “science is gray.”

Walensky added:

“[a]nd science is not always immediate. And sometimes it takes months and years to actually find out the answer. But you have to make decisions in a pandemic before you have that answer.”

This statement contradicts the prevailing “the science is settled” narrative heard frequently since 2020, which left no room for any questioning of “the science” within the public sphere.

In fact, in June 2021, Walensky’s colleague, [Dr. Anthony Fauci](#), [told](#) the media:

“A lot of what you’re seeing as attacks on me quite frankly are attacks on science, because all of the things that I have spoken about consistently from the very beginning, have been fundamentally based on science.”

Notably, Walensky’s statement closely paralleled statements made recently by political blog Axios, which [wrote](#):

“The idea of ‘following the science’ has oversimplified what’s actually a complex array of factors that policymakers must weigh in formulating a response.

“Science has been weaponized time and again to justify or defend positions held by both policymakers and public health experts ... Science isn’t absolute — data can come with uncertainties and unknowns.”

This unilateral “follow the science” narrative coming from public health agencies and corporate media over the past two years was [described](#) by Johns Hopkins University professor Dr. Marty Makary as “using science as political propaganda.” Makary said, “the absolute worst” studies came from the CDC.

Walensky also referenced the myriad health consequences stemming from COVID-related restrictions, such as mask and vaccine mandates and lockdowns, admitting public health officials didn’t sufficiently acknowledge or emphasize them.

As Walensky [stated](#), there are “so many other things we are counting that don’t make the headlines,” including “opioid deaths, mental health challenges, cancer screenings, deferred elective surgeries.”

These adverse effects were also frequently cited by critics of draconian COVID-related restrictions and mandates, including, notably, by the signatories of the [Great Barrington Declaration](#) — which had previously been described as “[dangerous](#),” “[fascistic](#),” and an “[ethical nightmare](#),” along with the added [implication](#) that it placed economics ahead of public health.

Walensky touts transparency, despite recent examples to the contrary

Walensky also [stated](#) during her appearance at Washington University that she was “proud of our ability to get data out,” referring to getting vaccine-related data out to the public.

According to Walensky, the CDC operated a “pedal-to-the-metal” system of data analysis and assimilation, leading to data on vaccine effectiveness being published, on average, every 48 hours.

Walensky said:

“[B]ecause of that we can now, within four weeks, look at vaccine effectiveness for cases and deaths for two-thirds of America.

“We can stratify by age, we can stratify by date of vaccine, we can stratify by which vaccine you got.”

These comments, however, contradict several recent revelations concerning the CDC and vaccine data transparency.

As [reported](#) by The New York Times on Feb. 28, the CDC and the U.S. Food and Drug Administration (FDA) were aware that COVID vaccines were only [12% effective](#) in children under the age of 5, but withheld this information from the public in advance of an expert meeting that had been scheduled for Feb. 15. The FDA canceled the meeting at the last minute.

[According to the Times](#):

“Experts worried that the news would further dissuade hesitant parents from immunizing their children.

“Some federal scientists pushed for the data to be made public ahead of the F.D.A. expert meeting scheduled for Feb. 15, viewing it as highly relevant to the discussion about dosing in children under 5, federal officials and others familiar with their responses to it said.”

In another New York Times [report](#) from just a few days prior (Feb. 20), CDC spokesperson Kristen Nordlund responded to revelations that the CDC had frequently withheld a myriad of data, including statistics pertaining to the effectiveness of boosters, figures stemming from wastewater surveillance, and COVID-19 hospitalizations by age, race, and vaccination status.

Nordlund said one reason such information was frequently withheld from the public is that it “might be misinterpreted” and “because basically, at the end of the day, [the data is] not yet ready for prime time.”

According to a federal official anonymously quoted by the Times, “[t]he agency has been reluctant to make those figures public ... because they might be misinterpreted as the vaccines being ineffective.”

The same Times report referenced similar concerns, which had previously been expressed by public health officials in Scotland, who announced that they would no longer publicize data on COVID hospitalizations and deaths by vaccination status “because of similar fears that the figures would be misrepresented by anti-vaccine groups.”

However, [according](#) to epidemiologist Jessica Malaty Rivera, who helped operate the Covid Tracking Project until it ceased operations in March 2021, “[w]e are at a much greater risk of misinterpreting the data with data vacuums, than sharing the data with proper science, communication and caveats.”