

CAEFISS ANALYSIS - Jasmine & Zak Gilani - July 2021

The Canadian system that documents vaccine adverse events continues to be plagued by reporting that is inaccessible and inaccurate. The undoing of vaccine reaction reporting in Canada began with the inception of the Canadian Adverse Events Following Immunization Surveillance System (CAEFISS) in 1987. CAEFISS is a computerized database. This database is under the control of regional health authorities. When juxtaposed to the former adverse events reporting system, the 'Canada Vigilance database' of the 1960's, there is a noticeable difference in accessibility. The public has two primary channels of access to the CAEFISS, both equally onerous. The public has access to vague reports released by CAEFISS, and information requests.

Over its 34 year span, numerous gaps in CAEFISS reporting data can be found. The reports can be accessed through the CAEFISS [web site](#). With the Canadian Vigilance database, over a 22 year span of operation, 8000 vaccine reports had been filed. Once the change had been made to CAEFISS, under 600 reports had been filed, from 1987 onward. Ronald Reagan signed the National Childhood Vaccine Injury Act in 1986. This protected pharmaceutical companies from liability. As a result, the mandate for childhood vaccination increased exponentially. Therefore, one might argue there would likely be an increase in adverse events reported. The diminished amount of reports is not a result of fewer adverse events. The gaps in reporting are linked to low reporting rates. CAEFISS has demonstrated scant regard for access to reporting and reporting in and of itself.

The "Vaccine Adverse Event Reporting System" or VAERS is the system for adverse events reporting in the United States. In terms of filing an adverse event, the VAERS system is geared towards both the public and health officials. Essentially anyone can file a report with VAERS. According to a study conducted by Harvard Pilgrim Health Care, the reporting average for vaccine adverse events is below 1 percent in the United States. CAEFISS is managed and operated by Canadian health officials according to the Government of Canada website. The term is general and undefined, though one may assume this refers to physicians. In fact, only Canadian physicians, nurses and pharmacists can file an adverse event report. Bear in mind, there is no financial compensation for the physician filing a report. Also, the filing of an adverse event is a lengthy process in and of itself. One may then conclude, the reporting average for CAEFISS is even lower than that of VAERS.

Substandard reporting and incomplete data has rendered the CAEFISS system both misleading and harmful. Inaccessibility and low reporting rates have made for a deceptive system. At a superficial glance, the CAEFISS system shows the uninformed viewer that substantially fewer adverse events are taking place. One may argue that the system itself has been poised to paint this erroneous picture. Before delving into the harm/benefit analysis of vaccination, one must take note, that the CAEFISS reporting system is far from accurate. Without the ability to gauge exactly how many adverse reactions are taking place, it is seemingly impossible to make an informed decision as to the safety of vaccines, including these latest Covid synthetic gene therapy injections.