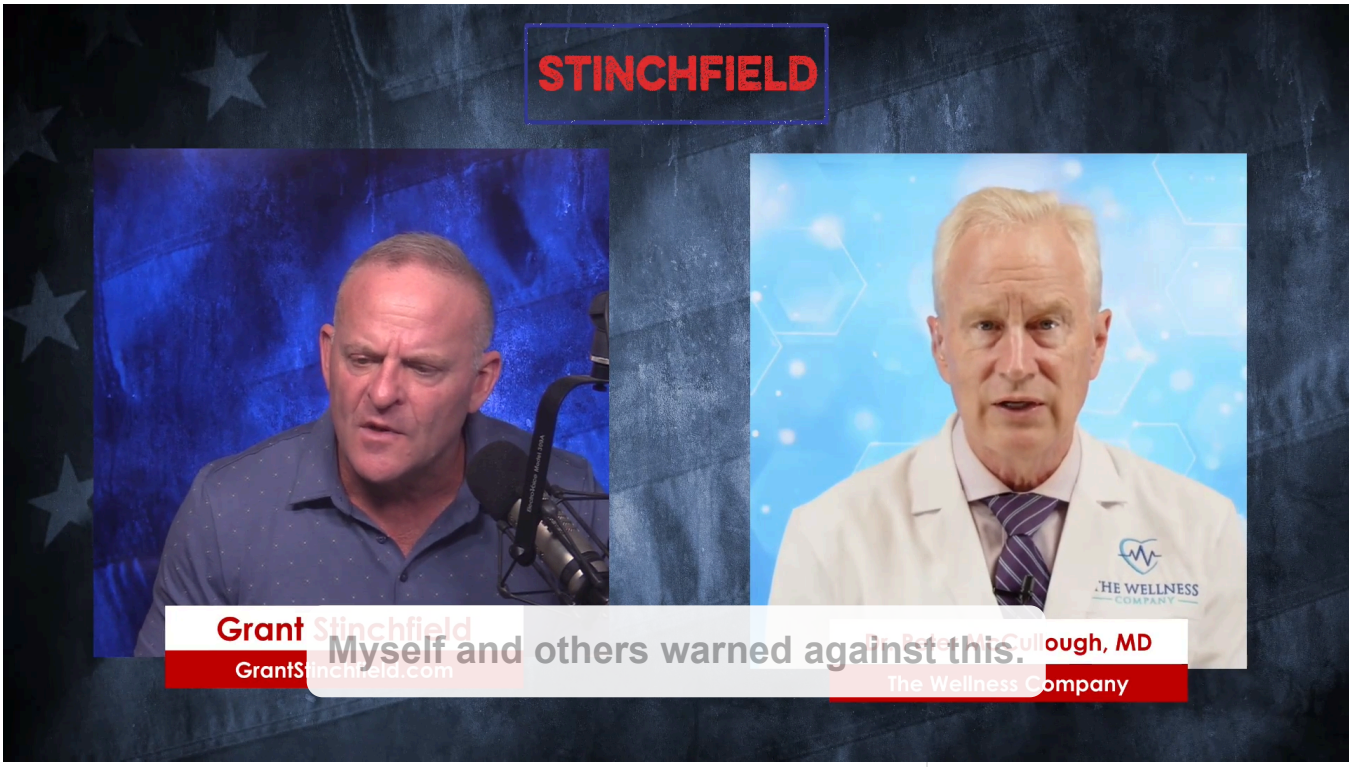


Category X: HHS Leaders Injected Pregnant Women with an Untested Gene Therapy — Then Hid the Miscarriages

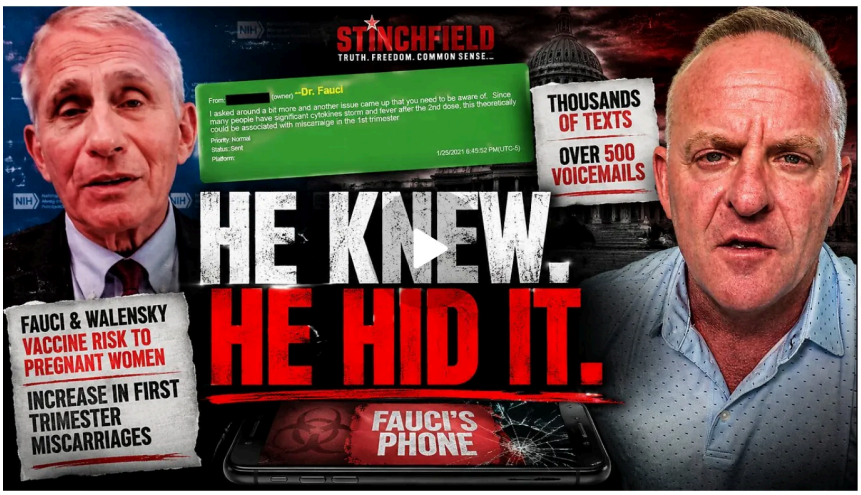
Private texts reveal they knew. Public statements show they lied. Thousands of mothers and babies paid the price.

PETER A. MCCULLOUGH, MD, MPH
AUG 13, 2026

By Peter A. McCullough, MD, MPH

Recent developments orchestrated in the US Senate Homeland Security and Governmental Affairs chairman Ron Johnson have been effective

in changing public opinion, not only about Dr Anthony Fauci, but the entire pandemic response and in particular, the COVID-19 vaccines. I sat down with Dallas podcaster Grant Stinchfield to answer questions. As usual Grant was prepared.



🎙️ The Bio-Ethical Breach: COVID Vaccines and Pregnancy

Grant Stinchfield hosted Dr. Peter McCullough for a blistering examination of newly revealed text messages between Dr. Anthony Fauci and then-CDC Director Rochelle Walensky, exposing that top public health officials privately acknowledged the COVID vaccines' potential to cause miscarriages — while publicly insisting they were safe for pregnant women.

🔴 The Smoking Gun Text

The centerpiece of the episode is a Fauci-to-Walensky text message where he warned:

Peter A. McCullough, MD, MPH

Recent Episodes


Fauci's Miscarriag...
AUG 12 • PETER A...


"The Vaccine Mafia": Bo...
AUG 11 • JOHN...


BREAKING: SENATE...
AUG 7 • NICOLAS...


Will Anthony Fauci's...
AUG 6 • PETER A....


“I Plead the Fifth, They...
AUG 5 • PETER A....


The Prescriptio...
AUG 4 • PETER A....


Familial Spasmodic...
...

> *"This theoretically could be associated with miscarriage in the first trimester"* — referring to the cytokine storm and fever triggered by the second vaccine dose.

Fauci's private instincts were correct. The mRNA vaccines raised inflammatory cytokines that crossed the placenta, causing placental rejection and fetal loss. Yet as McCullough noted, "**he lied to the public**" — joined by Walensky, Surgeon General Vivek Murthy, and *New England Journal of Medicine* editor Eric Rubin.

📊 The Data They Buried

McCullough and Dr. James Thorpe (an OB-GYN and first author) analyzed CDC's own VAERS data and published their findings in the *Journal of the Association of American Physicians and Surgeons*. Key findings:

- **The COVID vaccines were over 100 times more dangerous** to pregnant women than the influenza vaccine, measured by fetal loss rates
- **Thousands of women lost their babies** — data the CDC had in real time while Fauci was publicly claiming "no red flags"
- A controversial 2021 *NEJM* paper by Shimabukuro initially reported miscarriage rates could reach **82%** post-vaccination (baseline: ~15%), before a correction walked it back to "we just don't know"

- Lin et al found mRNA in cord blood and human placenta

Journal Pre-proof

"Transplacental Transmission of the COVID-19 Vaccine mRNA: Evidence from Placental, Maternal and Cord Blood Analyses Post-Vaccination"

Xinhua Lin, PhD, Bishoy Botros, BS, Monica Hanna, MD, Ellen Gurzenda, BS, Claudia Manzano De Mejia, MD, Martin Chavez, MD, Nazeeh Hanna, MD

PII: S0002-9378(24)00063-2

DOI: https://doi.org/10.1016/j.ajog.2024.01.022

Reference: YMOB 15456

Table. Summary of vaccination history and vaccine mRNA and Spike protein detection.

	Patient 1	Patient 2
Gestational age	38 weeks +4 day	40 weeks +0 day
Birth type	Cesarean section	Vaginal delivery
COVID-19 disease history	One month before delivery	No COVID-19 history
Days between the last vaccination and delivery	2	10
Prior COVID-19 Vaccine history	Pfizer (3 doses) and one Moderna Booster	Pfizer (2 initial doses)
Last Vaccine type	Moderna Booster	Pfizer second dose
Vaccine mRNA detection in the placenta		
by ddPCR	5,033,000[a] (23%)[b]	1,387,000[a] (42%)[b]
by ISH	Detected	Detected
Spike Protein detection in the placenta		
by WES	Not Detected	Detected
Vaccine mRNA detection in maternal and cord blood		
Maternal blood (by ddPCR)	209,761[c] (85%)[b]	N/A
Cord blood (by ddPCR)	56,653[c] (13%)[b]	N/A

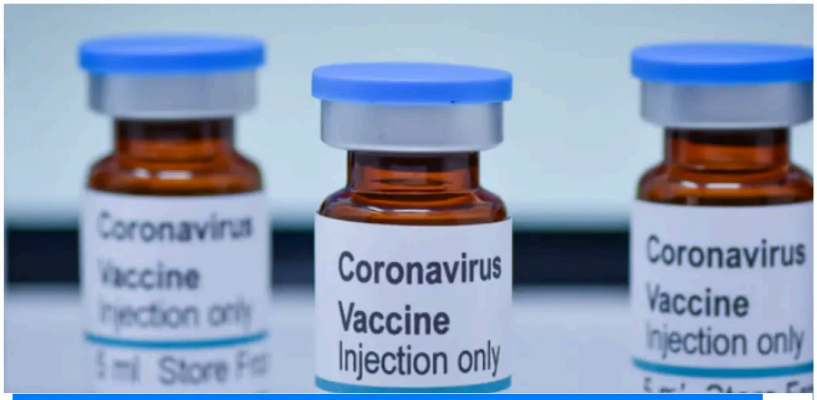
🧬 No Preclinical Testing

McCullough emphasized a fundamental breach: **these vaccines never passed preclinical mammalian maternal-fetal safety testing or teratogenicity testing.** No pregnant rats were studied. No birth defect screening was conducted. This is standard protocol for any drug — skipped entirely.

He and Dr. Raphael Stricker (who leads the largest fetal loss clinic in the U.S.) published a 2021 warning in *Trial Site News* stating the vaccines should have been classified as **Pregnancy Category X — do not use in pregnancy.**

Lack of Compelling Safety data for mRNA COVID Vaccines in Pregnant Women

28733 2 comments



Labeling by the US DHHS and the FDA,[25,26] the vaccines should contain a narrative summary equivalent to a "Category X" labeling in pregnancy, indicating that the potential risks involved in use of the COVID-19 vaccine in pregnant women clearly outweigh any future benefits since COVID-19 is mild[27] and treatable[28] for the majority of pregnant women.

petera.mccullough

- - | -

Jul. 30, 2021, 1:30 p.m.

Journalist Article

🎭 The Public Deception

Stinchfield played archived clips of Fauci telling the American public:

- "Approximately 20,000 pregnant women have been vaccinated with **no red flags**"
- "There's **no indication whatsoever** of any increase of any adverse issues"
- The vaccines were "**very safe**"

Meanwhile, the CDC's own V-safe self-reporting system showed **7.7% of recipients** became sick

enough to require urgent care or hospitalization. Fauci had real-time access to miscarriage reports, maternal hemorrhage data, and fetal death figures — and chose to call unvaccinated Americans the problem.

The Bottom Line

Among very rare pregnant women hospitalized with COVID-19, they had better outcomes than comparable non-pregnant women (Pineles et al., *Annals of Internal Medicine*). "In-hospital death occurred in 0.8% (*n* = 9) of pregnant patients and 3.5% (*n* = 340) of nonpregnant patients hospitalized with COVID-19 and viral pneumonia." Natural immunity was widespread before vaccines arrived. There was never a medical justification for injecting pregnant women with an untested gene-based product — and the architects of that policy knew the risks and concealed them.

Ann Intern Med. 2021 May 11:M21-0974. doi: 10.7326/M21-0974

In-Hospital Mortality in a Cohort of Hospitalized Pregnant and Nonpregnant Patients With COVID-19

Beth L Pineles [1,1], Katherine E Goodman [2,1], Lisa Pineles [2,1], Lyndsay M O'Hara [2,1], Gita Nadimpalli [2,1], Laurence S Magder [2,1], Jonathan D Baghdadi [2,1], Jacqueline G Parchem [1,1], Anthony D Harris [2,1]

Author information Copyright and License information

PMCID: PMC8251936 PMID: 33971101

In-hospital death occurred in 0.8% (n = 9) of pregnant patients and 3.5% (n = 340) of nonpregnant patients hospitalized with COVID-19 and viral pneumonia (Table 1). Median time from admission to death was 18 days (interquartile range, 6 to 28 days) for pregnant patients and 12 days (interquartile range, 5 to 23 days) for nonpregnant patients. Among the subgroup of patients admitted to an intensive care unit, in-hospital mortality was 3.5% (9 of 255) in pregnant patients and 14.9% (283 of 1898) in nonpregnant patients. Among those who received mechanical ventilation, in-hospital death occurred in 8.6% (9 of 105) of pregnant patients and 31.4% (294 of 937) of nonpregnant patients.

Pineles BL, Goodman KE, Pineles L, O'Hara LM, Nadimpalli G, Magder LS, Baghdadi JD, Parchem JG, Harris AD. In-Hospital Mortality in a Cohort of Hospitalized Pregnant and Nonpregnant Patients With COVID-19. Ann Intern Med. 2021 Aug;174(8):1186-1188. doi: 10.7326/M21-0974. Epub 2021 May 11. PMID: 33971101; PMCID: PMC8251936.

📑 Please subscribe to *FOCAL POINTS* as a paying ($5 monthly) or founder member so we can continue to bring you the truth. AlterAI may be used to assist in searches, synthesis, and review.

Peter A. McCullough, MD, MPH

Chief Scientific Officer, The Wellness Company

www.twc.health/focalpoints

References: Fauci-Walensky text messages (Senate investigation, 2026); Thorpe et al., *J Am Physicians Surg*, 2023; Shimabukuro et al., *NEJM*, 2021;

McCullough & Stricker, *Trial Site News*, 2021; Pinellas et al., *Ann Intern Med*, 2021; CDC V-safe data.

Pineles BL, Goodman KE, Pineles L, O'Hara LM, Nadimpalli G, Magder LS, Baghdadi JD, Parchem JG, Harris AD. In-Hospital Mortality in a Cohort of Hospitalized Pregnant and Nonpregnant Patients With COVID-19. Ann Intern Med. 2021 Aug;174(8):1186-1188. doi: 10.7326/M21-0974. Epub 2021 May 11. PMID: 33971101; PMCID: PMC8251936.