Massive Korean Study Confirms Elevated Risk of Heart Disease Among Young People

Hatchard Report

Dr. Guy Hatchard

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A study of 3.4 million health records in the Korean national health database entitled "The impact of COVID-19 status and vaccine type following the first dose on acute heart disease: A nationwide retrospective cohort study in South Korea" reveals that individuals receiving mRNA vaccines are at higher risk of heart disease. Notably, younger people have an even higher risk profile than older adults.



The study analysed the health records of individuals for just 21 days following either their first COVID-19 vaccine dose and/or any COVID-19 infection. In both cases, there was an elevated risk of heart disease, including acute cardiac injury, acute myocarditis, acute pericarditis, cardiac arrest, and cardiac arrhythmia. This supports the findings of our recent reports:

Firstly, "Staggering New Data From Health New Zealand and Others" reported official Health New Zealand data obtained via an Official Information Act request (OIA), documenting a massive increase in admissions to Accident and Emergency among individuals under 40, rising from 2,000 per year to over 20,000 per year.

Secondly, "Breaking: 188% Rise in Mortality Risk Among New Zealand Teens Following Covid-19 Vaccination" reported official Health New Zealand data released under OIA showing that teens and people in their twenties had a disproportionately elevated risk of death in the 90 days following a COVID-19 vaccination.

Taken together, these findings show an ongoing risk of serious illness following mRNA vaccination that especially affects younger age groups. Significantly, this risk continues for months and years subsequent to COVID-19 vaccination.

Please note these are official New Zealand government figures. In other words, the conclusions are indisputable. Scepticism and accusations of misinformation are untenable. The figures show that Health New Zealand has been vigorously pursuing a universal mRNA vaccination policy that is known to damage the health of young people over the short and longer term. These official figures show that the consequences of this policy are very serious indeed.

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An article from the Scottish Daily Mail covering an unrelated situation presents some salutary lessons. The article examines the case of Portland Oregon, where authorities decriminalised the use of hard drugs in November 2020. By 2022, the streets of downtown Portland were littered with discarded needles and comatose addicts. Serious crime rose. Portland reversed its policy when faced with the evidence.

Glasgow, however, has decided to copy Portland's mistake and decriminalise hard drugs. They are making policy not based on evidence but on a social theory known as the *harm reduction movement*. This theory says that drug addicts will gradually emerge from their addiction when they no longer face prosecution but are rather assisted and counselled, including the provision of clean needles and pure drugs. In the modern context, the theory isn't working, but the liberal Scottish government *believes* it should and will. They are rejecting the evidence of their own eyes, in favour of their social beliefs..

They are planning to give drugs to people that they know will cause harm.

When you believe that you are pursuing a social good, sometimes it can result in harm. As the evidence of harms from mRNA vaccines has accumulated, the theory that mRNA vaccines are *safe and effective* is no longer tenable, but the authorities are stuck in a do or die mode. Having gone so far down one road, they appear unable to turn back or even contemplate that a mistake has been made. They are psychologically dependent on a theory that has been disproved.

It is never too late to learn. We now know that a mistake has been made, and the mRNA vaccine policies are misguided. Even at this late hour, everyone will only feel relief if the facts are squarely faced and the appropriate corrections made to policy that reflect the official data.

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