

Hatchard Report

Dr. Guy Hatchard

In the 1980s, I bought a Casio handheld programmable calculator and amused myself writing routines that solved algebraic equations, but I soon realised that calculators turn off the thinking process.

The ubiquitous use of calculators in schools has since created generations of mathematically deficient graduates.

Predictive text, Al assisted writing, and the decline of reading is now doing the same for language. To some extent we have adapted to these concerning side effects of technology, but what if some technology could prevent us from thinking straight? What would be the consequences? Or more to the point, is it already happening?

In November last year we published an article "mRNA Vaccines, Cognitive Dissonance and our Future Prospects" in which we reported on rises in cancer incidence and the public warnings being sounded by leading UK oncologists about the role of mRNA vaccines. There has been some push back. Apparently some medical authorities are in denial, they say there is no cancer epidemic taking place. What does the latest data tell us: Yes or No?

Last night I wanted to know how many people were developing cancer in Sweden because there were no lockdowns in the country. It is an interesting question for us because recent media reports of sudden cancer tragedies have been blamed on lockdowns which, according to a widely reported narrative, delayed appointments for check ups and tests at hospitals. Let's be clear about it, delays could not actually 'cause' cancer, only, as the Lancet reports, complicate treatment and affect outcomes.

In our article "The Big Debate: How many new doctors will NZ need if the Gene Technology Bill is passed?", we reported official UK figures revealing a 50% rise in bowel cancer in 2022 among working age people. Despite this, Professor Pat Price, oncologist and chair of Radiotherapy UK, offered this blanket rebuke to those concerned enough to ask why: "Covid vaccines aren't causing cancer". Vaccinologist Helen Petousis-Harris here in New Zealand agrees. She wrote an article in October 2024 for the Global Vaccine Data Network, which she co-directs, entitled "'Turbo Cancer' and mRNA: The myth that defies biology and physics" which warns:

""Turbo Cancer" is a term loosely thrown around by conspiracy theorists to describe supposedly aggressive and fastdeveloping cancers seen post-vaccination, but remember it's a theory in search of facts, and the facts just aren't there."

Petousis-Harris' offers the same blanket argument as Professor Pat Price, "Vaccines protect against cancer, they do not cause it". Whilst acknowledging that COVID-19 vaccines employ a novel biotechnology, Harris dismisses any suggestion or theory that they could trigger cancer, instead saying "Vaccines of all kinds have been used for centuries and so far, none have been associated with an increase in cancer risk."

Harris' killer argument was supposedly contained in US data from NIH National Cancer Institute, Surveillance, Epidemiology and End Results (SEER) program which she presents in a graph. Deceptively, Harris' graph has the year 2022 tacked onto the x axis, but the SEER data actually ends in 2021. A clever trick straight out of the false advertising playbook. In common with a lot of other countries, including New Zealand which stopped publishing cancer data in 2020, the US has inexplicably delayed the publication of key health data. The Swedish data I found clarifies what is going on.

Cancer typically takes years to develop, so what happened in 2022?

Sweden didn't have lockdowns and they are continuing to publish annual cancer incidence data. Google AI Overview informed me that 69,621 new cases of cancer were diagnosed in Sweden in 2017 and then somehow got stuck and started imagining that there were also 69,261 cases in 2016 and 2015. It wasn't too much of a problem because I never rely on AI suggestions. I go back to the source data. Table 1 has the official numbers of new cancer cases in Sweden by year published by Socialstyrelsen, Sweden's National Board of Health and Welfare.

Table 1

YEAR	New Cancer Diagnoses in Sweden	Population	New cancers rate per thousand population
2023	80502	10540000	7.6
2022	78463	10490000	7.5
2021	68810	10420000	6.6
2020	68318	10350000	6.6
2019	71743	10280000	7.0
2018	68000	10180000	6.7
2017	69261	10060000	6.9
2016	65000	9923000	6.6
2015	65000	9799000	6.6

Compared to the average of the pre-pandemic years (2015-2019) when figures remained relatively stable, cancer incidence jumped by 10.9% in 2022 and pushed slightly higher in 2023. In all, it appears there were approximately 20,000 additional cases of cancer over the two years 2022 and 2023 more than you would expect from the historical trend. BUT it wasn't due to lockdowns, they didn't happen in Sweden. So what was the cause? The timing of the rapid increase is indicative and certainly favours COVID-19 vaccines. 87% of Sweden's population over the age of 12 received at least one COVID-19 vaccine in 2021. It is possible that COVID-19 infection also played a role but far less likely as COVID-19 had its most severe impact in 2020. In any case, the exact relative importance of these two possible factors doesn't influence an important implication of the figures, both COVID-19 vaccines and likely COVID-19 itself came out of biotechnology labs and exposed our internal cellular biology and immunity processes to novel bio-engineered genetic structures.

If COVID-19 vaccines are at fault, as some senior UK Oncologists like Dr Angus Dalgleish and Dr James Royle think, (who btw are not conspiracy theorists, a term that is often used to shut down legitimate discussion about valid concerns) the

I wonder whether Professor Pat Price, oncologist and chair of Radiotherapy UK, or Helen Petousis-Harris, associate professor in the Department of General Practice and Primary Health Care at the University of Auckland, have given any serious thought to the cause of rapidly rising cancer incidence? Causality is not rocket science. The gold standard involves identifying the timing of new elements or sudden changes in diet, behaviour, environmental exposure or medical interventions.

The Swedish data clears up one point, it wasn't lockdowns. In fact that explanation was never plausible. Delays in testing do not cause cancer, they merely delay treatments which might affect mortality, but not incidence. The figures for 2022 indicate a sudden very large unprecedented rise in cancer incidence. As a result, the list of usual cancer suspects doesn't apply. In 2021 over a short period of time whole populations did not suddenly begin to eat vastly more junk foods, avoid exercise altogether, ban breastfeeding, or purposely add pesticides to their meals, but almost everyone did get COVID-19 mRNA vaccinated in a hurry.

The Biotech paradigm is collapsing

Biotechnology knows next to nothing about the interaction between consciousness and genetic structures. Consciousness is a subject virtually excluded from biology. Yet there are sound reasons and a number of experimental results which suggest a deep connection that relies on the uniformity of genetic information and structure among our 37 trillion human cells. How gene therapy might affect that connection is the great unknown of the genetic era. It can only be ignored to our great peril, and make no mistake it is being ignored and denied by those anxious to save their skins

Denial is a rather concerning medical response to a cancer epidemic. Doctors are sworn to do no harm. They should be reaching for the emergency button. The right kind of research at this point would involve comparing the health outcomes of the vaccinated with the unvaccinated over the relevant time periods. Any doctor should know this, it is taught in medical science 101. Hiding the data seems criminal. The entirely false certainty projected by the so-called fact checking of social media, the complicity of mainstream media and the AI driven endorsement of widely held yet false opinions is only adding to the isolation of ideas from facts. As a result some among our tribe of experts have stopped thinking straight, clutching at straws rather than give up outdated paradigms and preconceptions from the pre-biotech era. Ultimately the data does not lie, but apparently some people have decided to sleep easily with deception.

Despite the difficulties, uncertainties and challenges of the last five years of the pandemic, incredibly, our government has decided to deregulate biotechnology experimentation. This course creates serious risks that will negatively affect us all including a risk of developing cancers. Find out more by viewing our YouTube video The Gene Technology Bill. What Kiwis Need To Know and then make a submission to the Health Select Committee by February 17th. There are many reasons to reject the Gene Technology Bill. We have published suggestions for a submission template. Write to your MP. They need to be quizzed on this egregious Bill. They are trying to get this fast tracked during the holidays.

We do not live in a country where people are willing to let others take away their food choices, their rights, their beliefs and increase exposure to serious long term environmental and health risks.

Dr. Guy Hatchard

23 January 2025