Women’s Health Topics

FLCCC

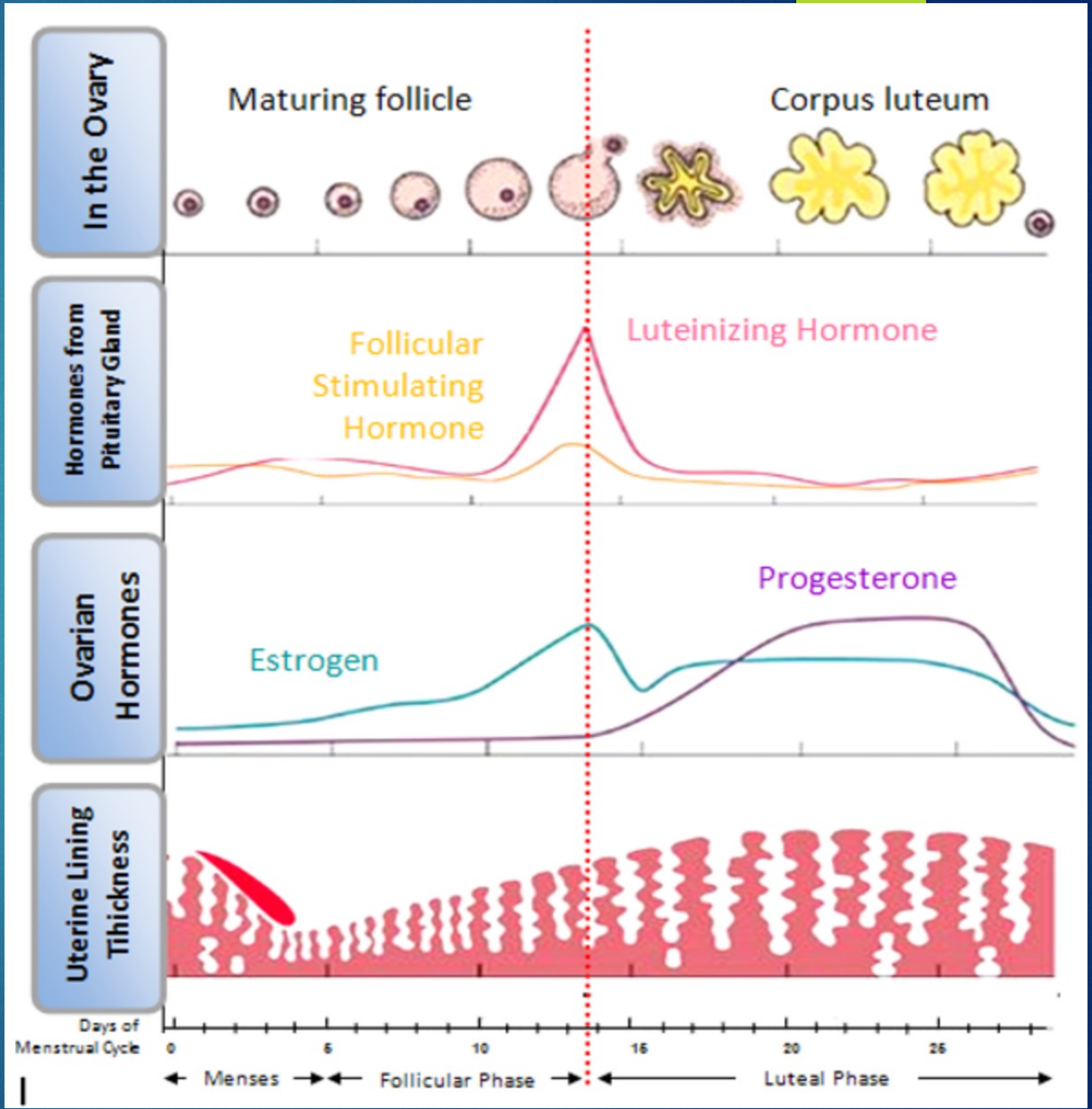
DRS. LINDLEY AND BISS CHAT

Dr. Biss:

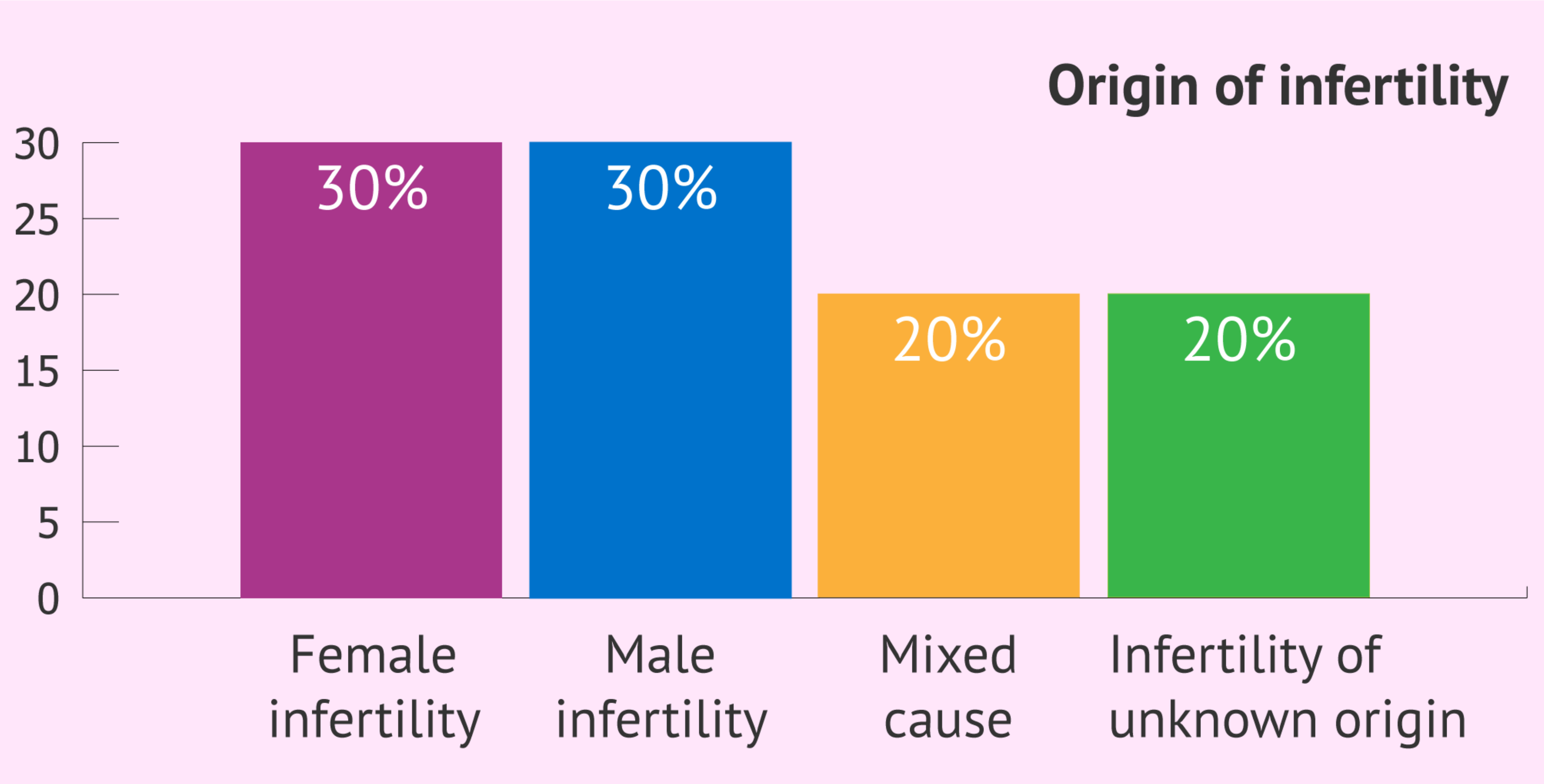
- Educational
  - BA Biology, Mount Holyoke College, 1989
  - MD, Tufts U. School of Medicine, 1993
  - Surgical Internship, Emory School of Medicine, ’93-’94
  - OBGYN Residency, Bayfront Medical Center, St. Petersburg, Fl, graduated 1998
- Professional
  - Private Practice, Bay Gynecological Associates, ‘98-’06
  - WomensCareFl, New Beginnings OBGYN, ‘07-present
  - Medical Leadership ‘06-’23 Orlando Health, Bayfront Hospital, last role Chief of Staff from ‘20-’23
  - Fellow for FLCCC spring 2024
- I am speaking to you on my own behalf; I do not represent my employer nor the hospital of which I am on staff in good standing.
- I have no financial conflicts of interest

The Menstrual Cycle

- Four Phases
  - **Menses** – Days 1-7 (ave. 5 days)
    - Cycle Day #1 = First Day of the Menses or Period
  - **Follicular Phase** (Proliferative endometrium)
    - Estrogen dominant, building up the endometrial lining
  - **Ovulation** (Day 14)
    - LH surge
    - Egg (arrested in Meiosis) is released into the fallopian tube
  - **Luteal Phase** (Secretory endometrium)
    - Progesterone is secreted to stabilize the uterine lining
- Normal Cycles occur every 21-42 days, average 28

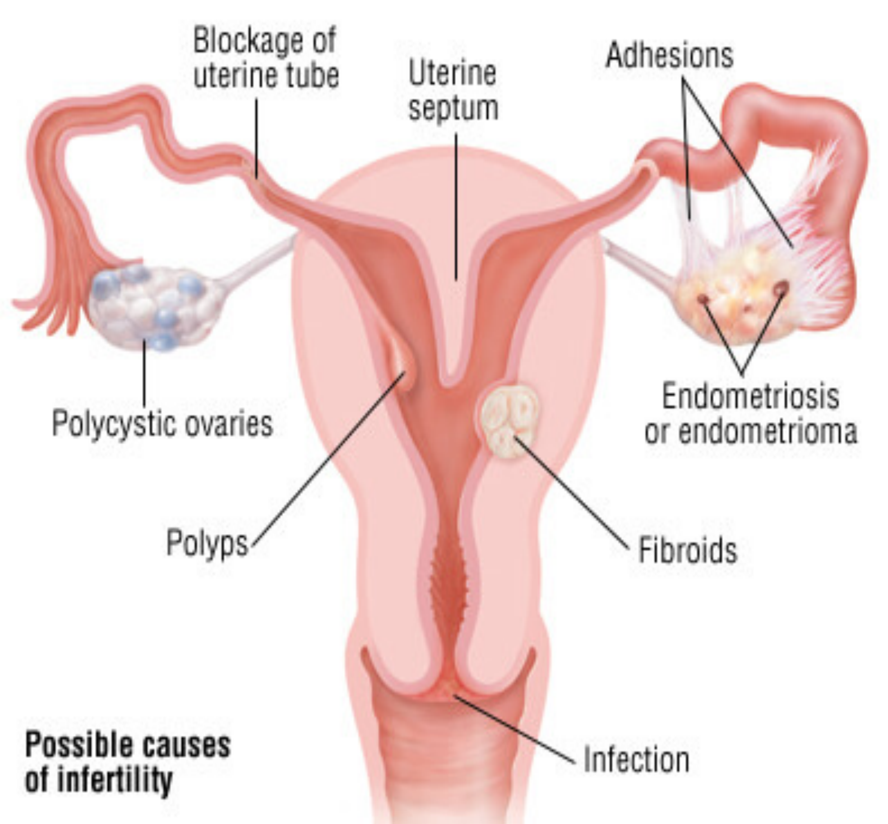


Causes of Infertility



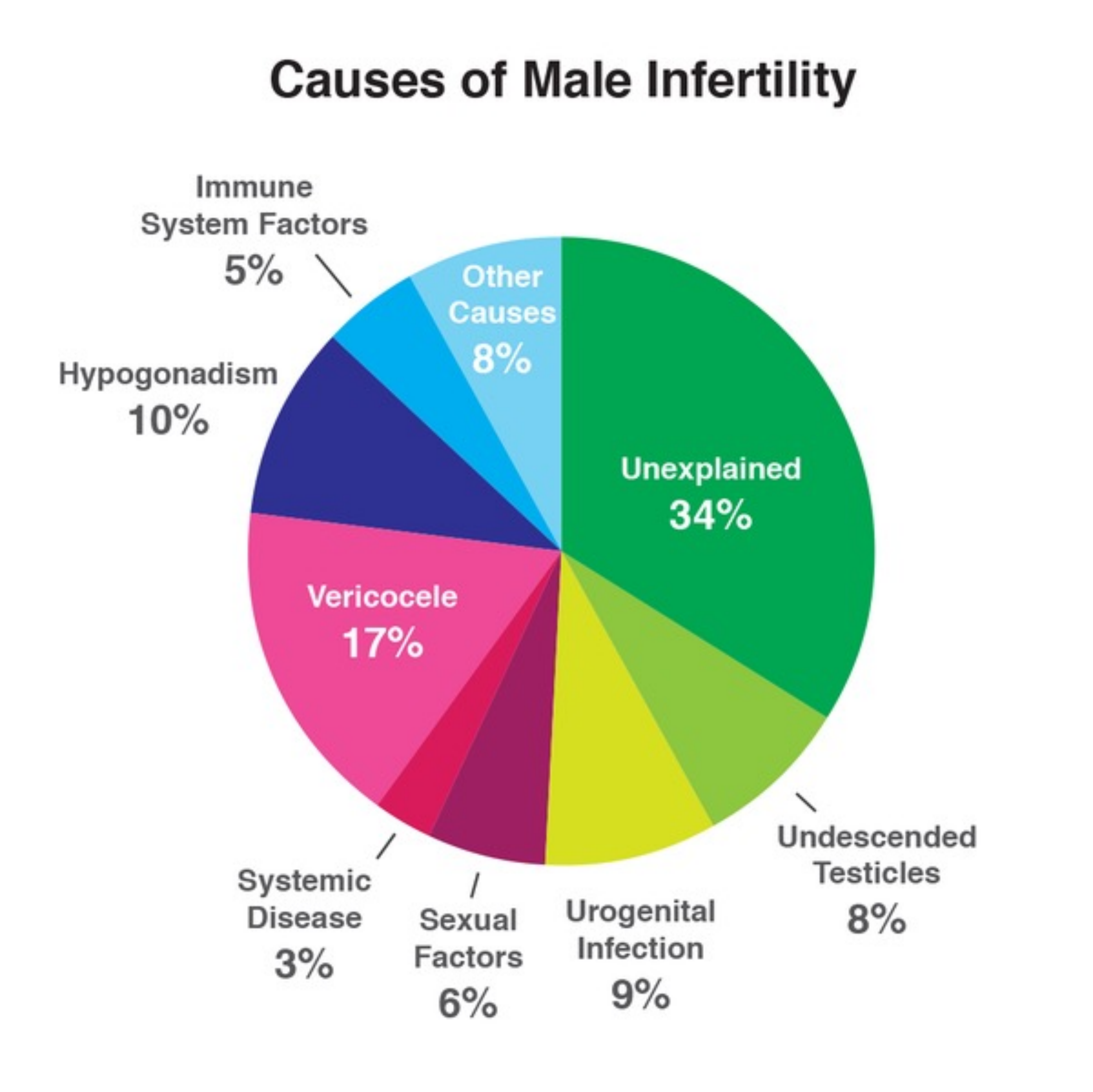
Infertility

- Primary / Secondary / Unexplained
- Female
  - Structural Causes
    - Adhesions from infection (PID), endometriosis, surgery, cervix procedures
    - Fibroids, polyps, septum, uterine anomalies
  - Endocrine
    - Hypothalamus / Pituitary disorders
    - Thyroid
  - Eggs
    - PCOS / anovulation
    - Decreased reserve (chemo, surgery, autoimmune)
    - AMA 35+/ old eggs
  - Autoimmune
    - Anti-Phospholipid Syndrome, SLE, Multiple Sclerosis, RA, Type 1 DM, Hashimoto's Thyroiditis, Crohn's Disease
  - Weight / Chronic diseases

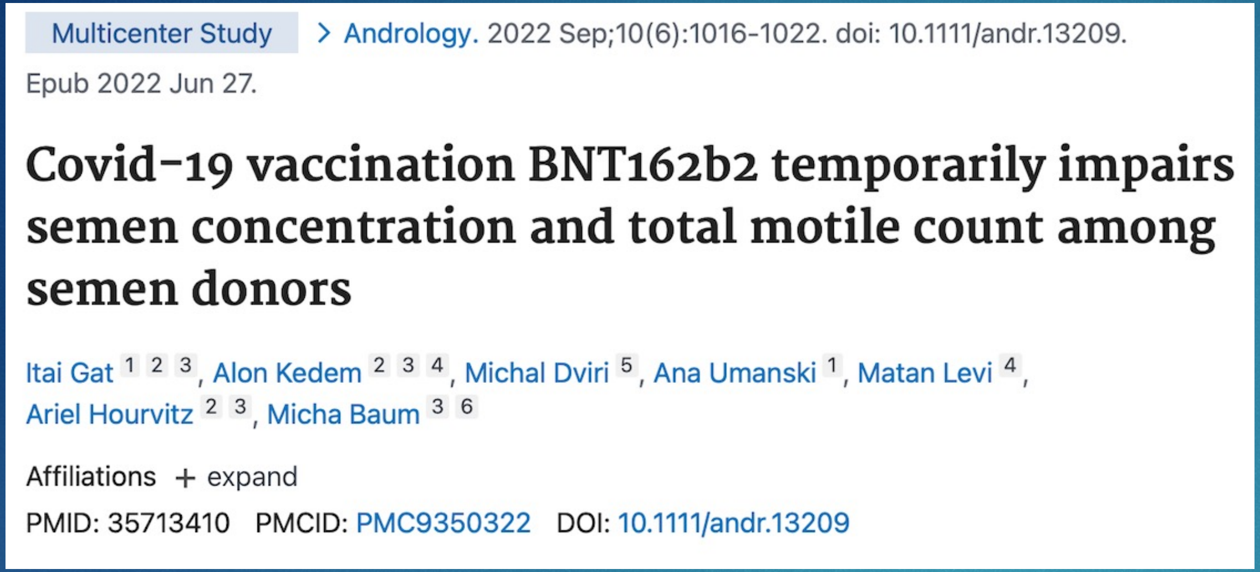


Infertility

- Male
  - Genetic
    - Cystic fibrosis (CBAVD), Klinefelter (XXY)
  - Sperm counts
    - High heat (bike shorts, varicocele)
    - Injury to testes
    - Infection (epididymitis, orchitis, STIs GC and HIV)
    - Surgery
    - Anti sperm antibodies
  - Endocrine / pituitary
  - Medical
    - APA = 50+
    - Weight
    - Sleep Apnea
    - Chronic liver / Kidney Disease
    - Tobacco/Alcohol



mRNA Injections affects on Sperm



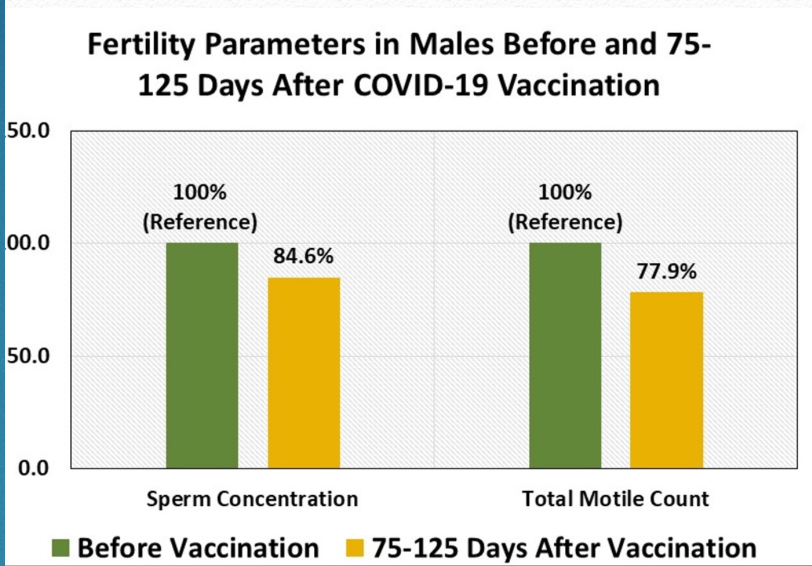
Multicenter Study > Andrology. 2022 Sep;10(6):1016-1022. doi: 10.1111/andr.13209. Epub 2022 Jun 27.

Covid-19 vaccination BNT162b2 temporarily impairs semen concentration and total motile count among semen donors

Itai Gat [1] [2] [3], Alon Kedem [2] [3] [4], Michal Dviri [5], Ana Umanski [1], Matan Levi [4], Ariel Hourvitz [2] [3], Micha Baum [3] [6]

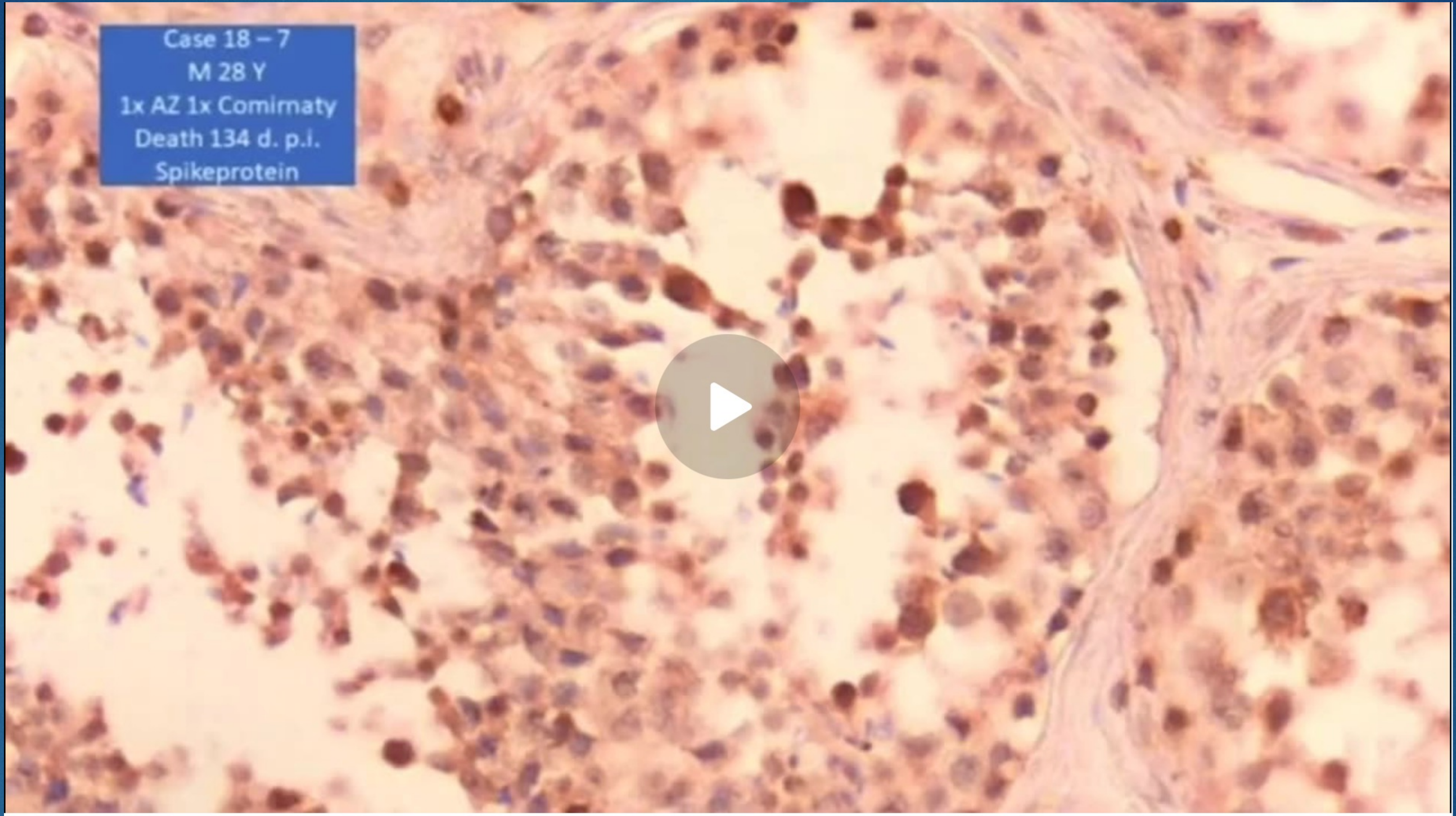
Affiliations + expand

PMID: 35713410 PMCID: PMC9350322 DOI: 10.1111/andr.13209



- Andrology Unit at Shamir Medical Center in Tzrifin, Isreal
- Sperm concentration decreased by 15.4% 75-125 days after vaccination
- Total Motile Sperm count decreased by 22.1% 75-125 days after vaccination

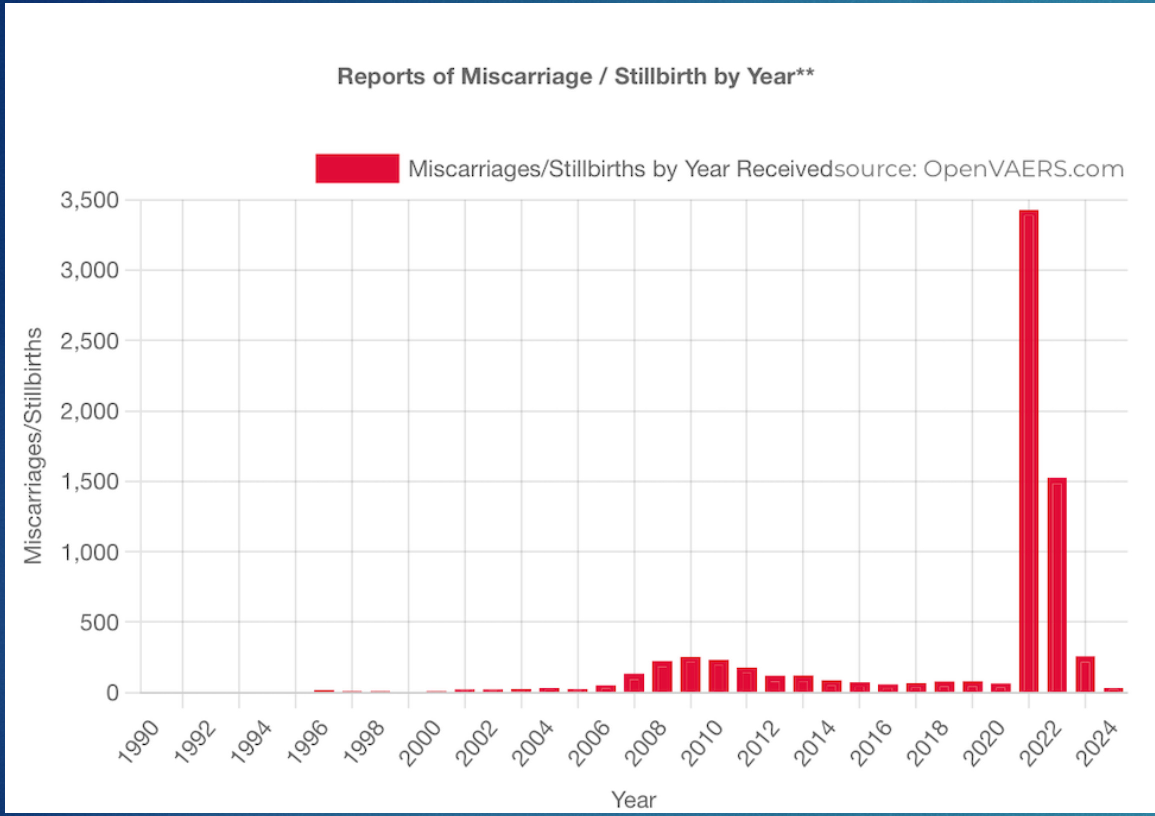
mRNA and Sperm



Dr Arne Burkhardt Confirms Sperm Has Been Almost Entirely Replaced By Spike Proteins

Post-Mortem Testes 134 days post Comirnaty Injection

Miscarriage after mRNA



Year of Vaccination	Count	Percent
2013	315	3.56%
2014	278	3.15%
2015	207	2.34%
2016	190	2.15%
2017	219	2.48%
2018	274	3.1%
2019	265	3%
2020	575	6.51%
2021	5,519	62.45%
2022	583	6.6%
2023	412	4.66%
TOTAL	8,837	100%

My Data Presented to Congress

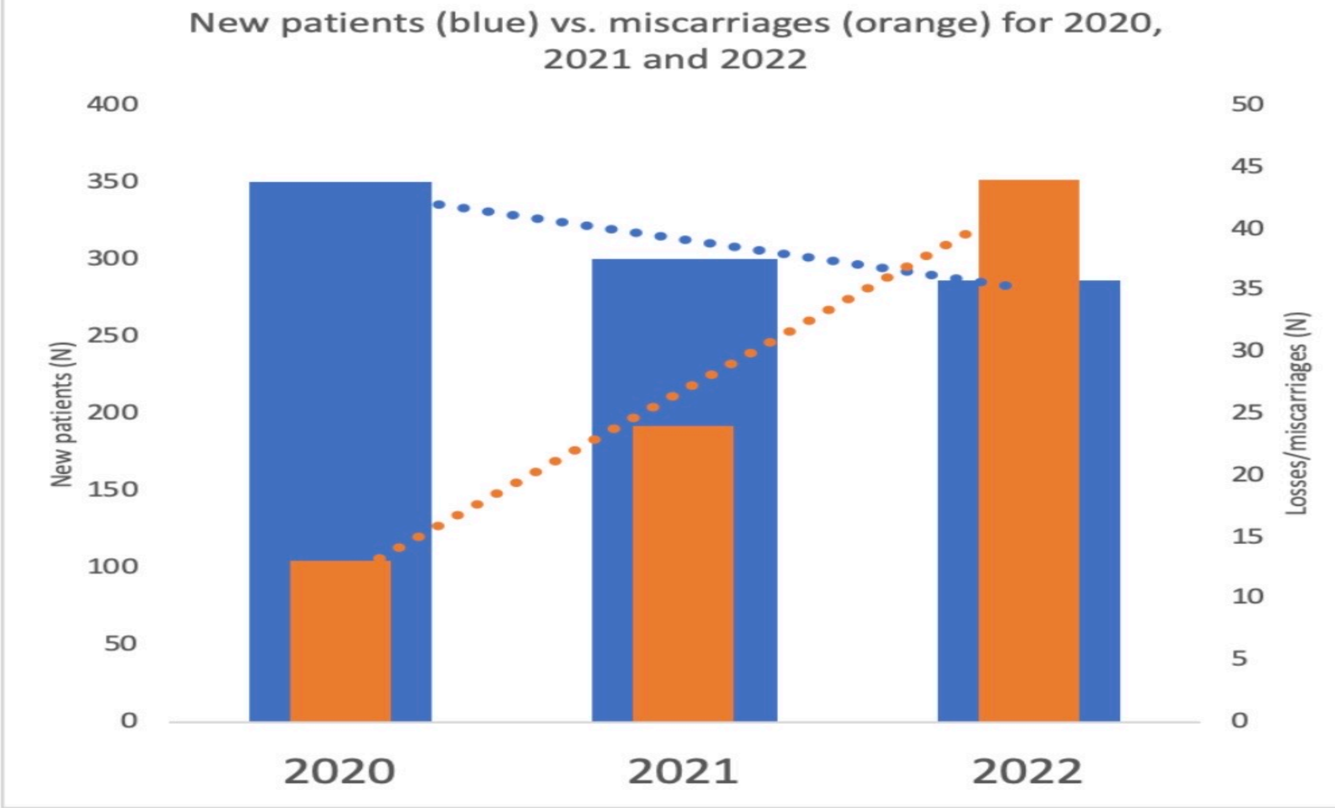
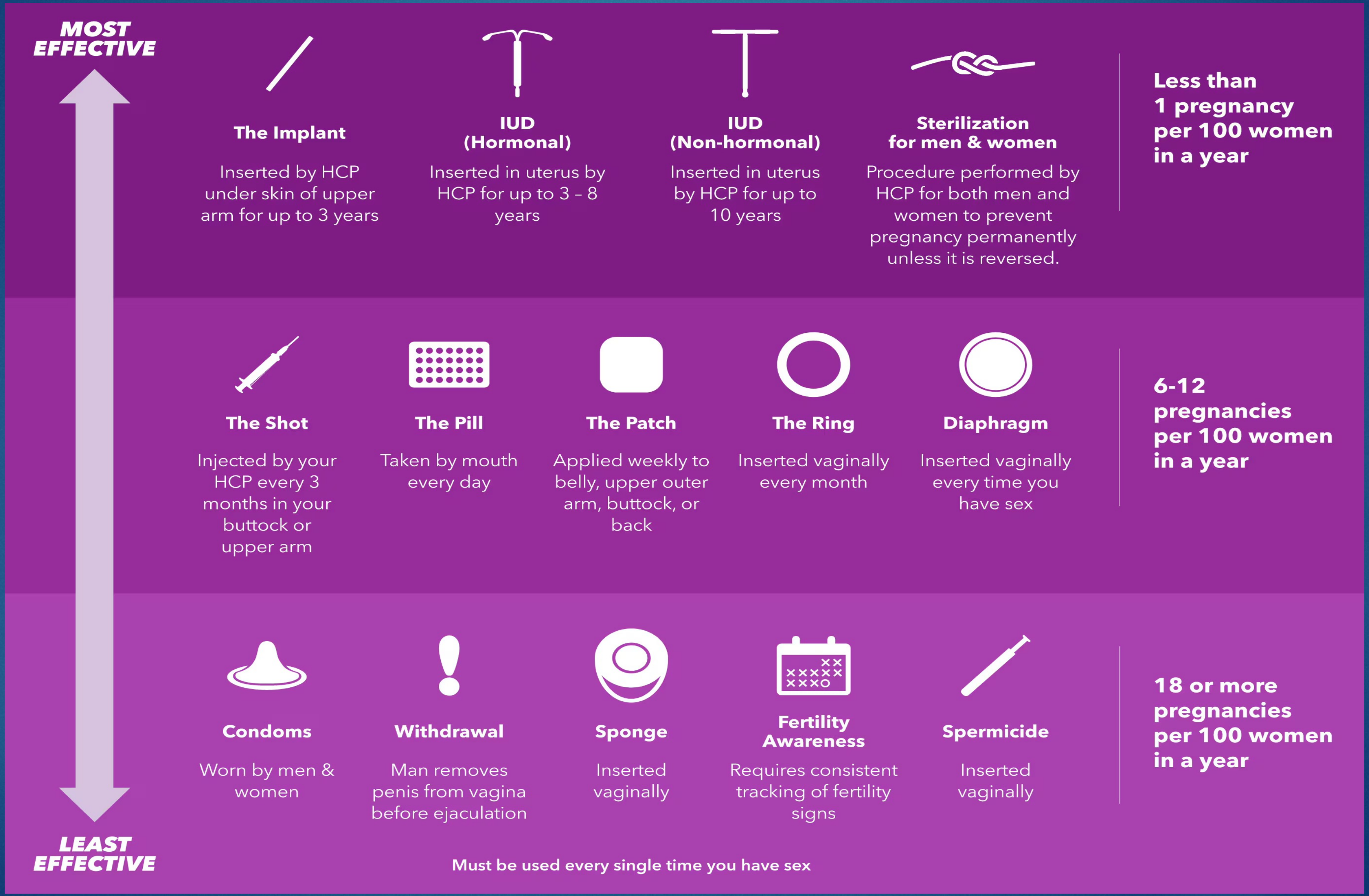


Figure i: New patients versus miscarriages for 2020, 2021 and 2022.

Types of Birth Control

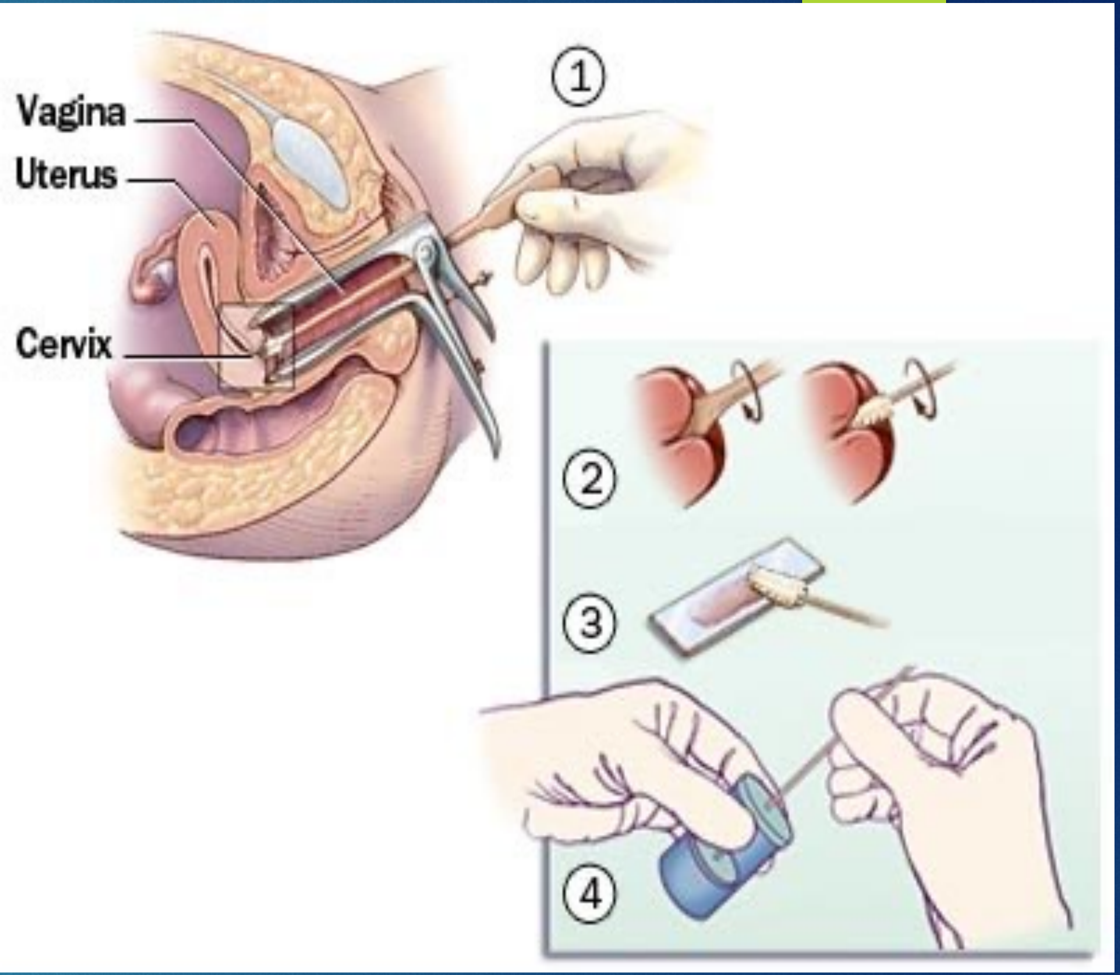


Menopause

- Defined as the absence of menses for one year
- The ovary no longer has any eggs left
- Average age 51-52, range age 45-55
- Symptoms (from low E and T)
  - Vasomotor (hot flashes / night sweats)
  - Sleep disturbances
  - Psychiatric : Moodiness, anxiety, depression
  - Physical: Vaginal Dryness, skin changes, joint pain, decreased muscle tone, weight gain (central)
- Cardiac risk increases
- Treatment
  - Hormone Replacement Therapy
  - Other: antidepressants, SleepMe pads, vaginal therapy

Pap Smear

- George Papanicolaou 1940's
  - Cervical Cancer #1 killer of women at that time
- Current Guidelines
  - Kaiser 2011
  - Begin age 21 q 3 years until age 30
    - Reflex to HPV test
  - Every 5 years ages 30 – 65
    - Cotest
  - Stop after age 65
    - DES, prior dysplasia, pelvic malignancy
- My abnormal Pap smear rates increased 15%
- Gardisil

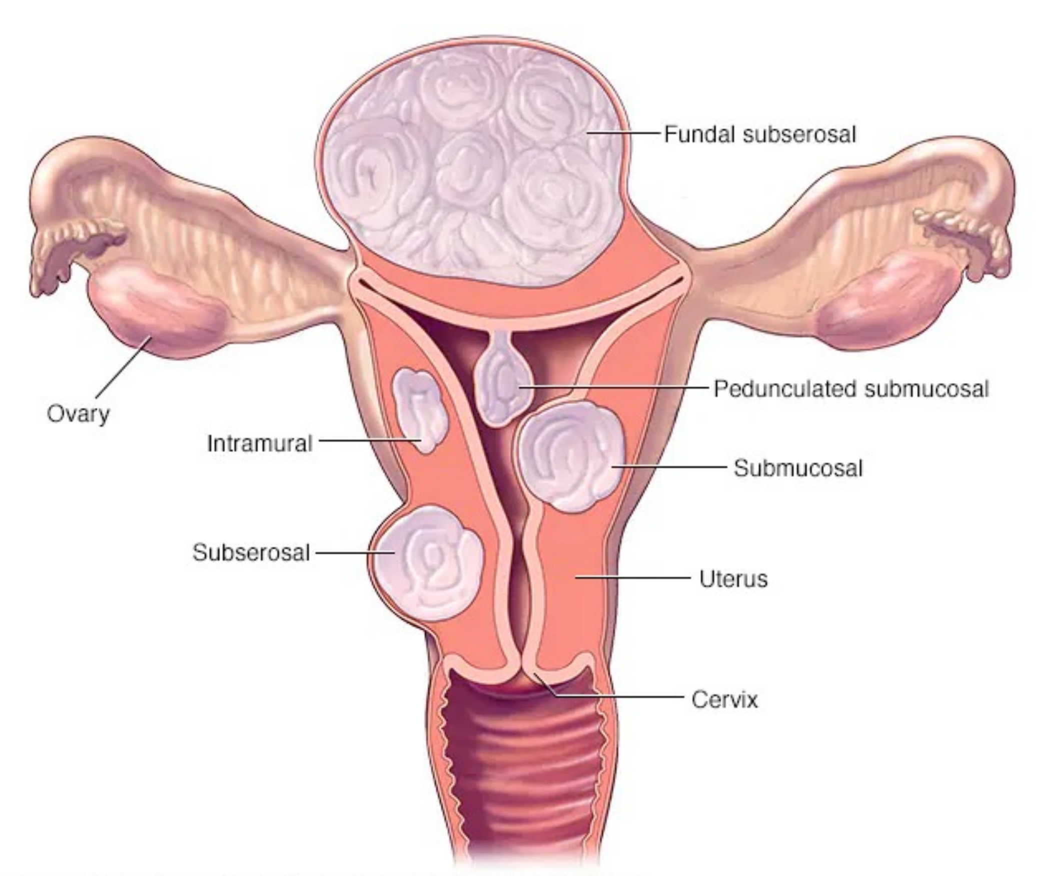


Mammograms

- Considered “Gold Standard” for breast cancer screening
  - Detects microscopic findings (masses, calcifications)
  - Affordable and accessible
- Adjuncts
  - MRI
  - Sonograms
- Thermograms
- Recommendations from ACOG
  - Annual mammograms starting age 40
- Other populations
  - Family history (mom or sister)
  - Genetic mutations (BRCA, PALB)

Fibroids

- Muscle cell in blood vessel duplicates
- Can occur anywhere but most common in uterus
- Some are hormone dependent
- Less than 1% malignant
- Treatment
  - Surgical
    - Myomectomy or Hysterectomy
  - UAE
    - Radiologic Procedure
  - MRgFUS (MRI focused US)
- Medical
  - IUD, OCPs, Depo Provera
  - Lupron



Are Covid Vaccines Safe for Pregnant Women

Should I get a COVID-19 vaccine?

Yes, you should get a COVID-19 vaccine. The American College of Obstetricians and Gynecologists (ACOG) strongly recommends vaccination if you are pregnant, breastfeeding, or planning to get pregnant. The vaccines are effective at preventing infection, severe illness, and death from COVID-19, including from new variants.

Getting a vaccine during pregnancy could also help your newborn. When you get vaccinated, the antibodies made by your body may be passed to your fetus. These antibodies may help protect your baby from the virus after birth.

Covid "Vaccines" and Pregnancy

- EUA granted– 12/11/2020
- ACOG guidance: defer to ACIP's guidelines 12/31/2020 (link to ACIP)
- Pfizer Trial published in NEJM 12/31/2020 (link to NEJM)
  - 43448 randomized to BNT162b2 30mcg or placebo – Table 3 Results
    - **18198** vaccinated had **8** C19 infections – Risk = 0.04%
    - **18325** placebo with **162** C19 infections – Risk = 0.88%
  - "95% efficacy at prevention of Covid 19" is the **RRR**
    - This number simply states 0.04% is 95% less than 0.88%
  - **ARR** was 0.84% (0.88 – 0.04) = overall risk of the infection reduced by the vaccine was 0.84% in this study = LESS THAN 1%
    - Per FDA: *Patients are unduly influenced when risk information is presented using a relative risk approach…an absolute risk format should be used. (link to FDA document)*
  - "This report does not address the prevention of Covid-19 in other populations, such as younger adolescents, children, and *pregnant* women."

Covid "Vaccines" and Pregnancy

- Post marketing data (FOIA required to access) (post marketing link)
  - 12/1/2020 – 2/28/2021 (published)
    - 126,212,580 doses provided worldwide with 42,086 AEs
    - 1223 deaths in 10 weeks
    - 274 pregnancy cases (238 cases with no outcome provided)
- On April 16, 2021 CDC Director Rochelle Walensky MD MPH, Eric Rubin PhD and Stephen Morrissey, PhD had public discussion published in the NEJM (NEJM audio link)
  - Safe and effective in pregnant women
- Official SMFM/ACOG statement July 30,2021
  - Vaccinate pregnant women

- All of my patients received products granted EUA
  - Pfizer (80%), Moderna (19.5%), J&J (0.5%)
- Comirnaty (Pfizer) (First to receive FDA approval August 2021) package insert states:
  - "[a]vailable data on COMIRNATY administered to pregnant women are insufficient to inform vaccine-associated risks in pregnancy"

Covid Vaccines and Pregnancy

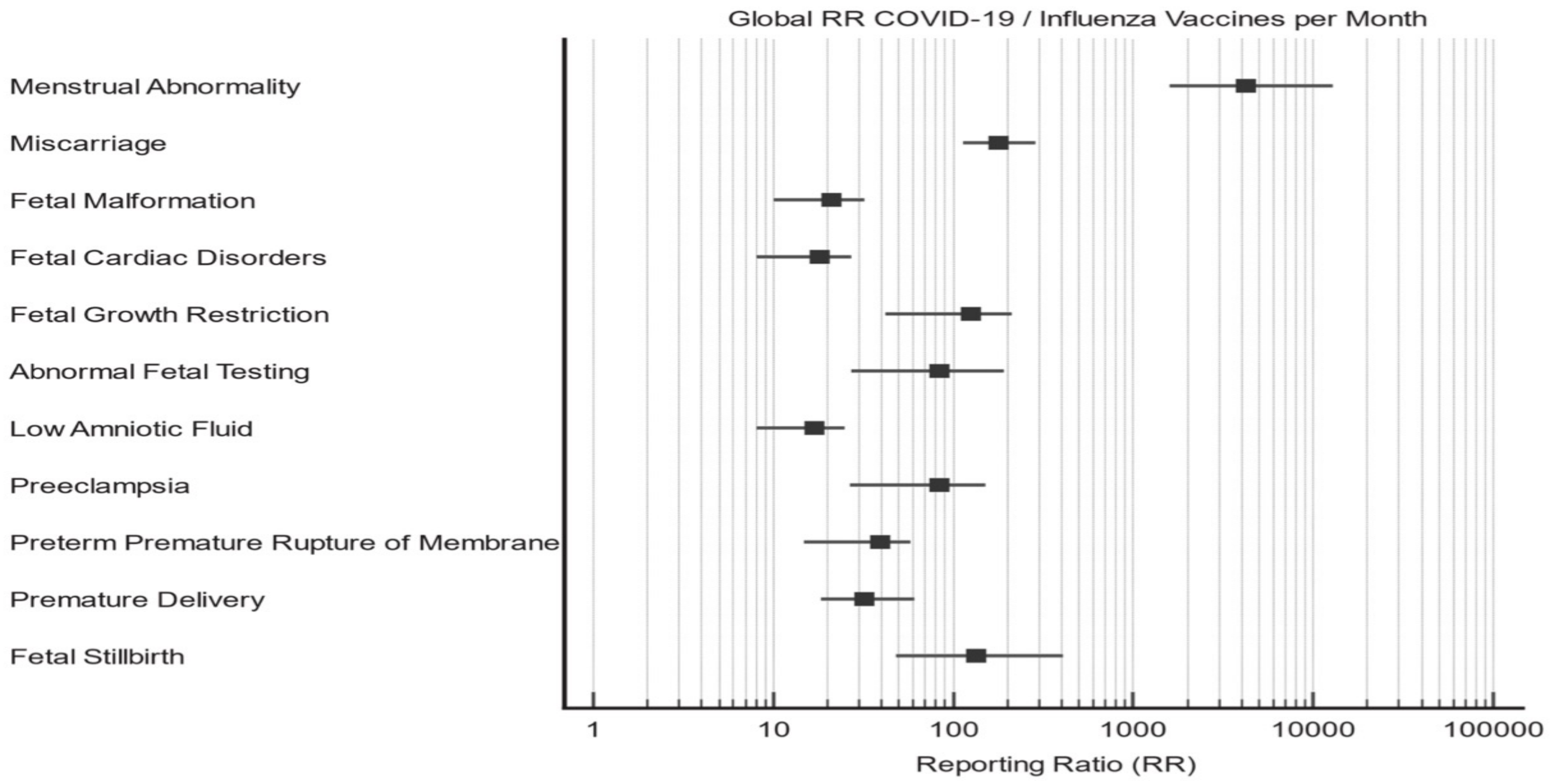


Figure 2. Global Reporting Ratios (RRs) for COVID-19 vs. Influenza Vaccination by Month.

Thorp Article Link 2023

Preprint Article, Part 1 of 3

Preprints.org

Article

Not peer-reviewed version

Are COVID-19 Vaccines in Pregnancy as Safe and Effective as the U.S. Government, Medical Organizations, and Pharmaceutical Industry Claim? Part I

James Thorp * , Albert Benavides , Maggie Thorp , Daniel McDyer , Kimberly Biss , Julie Threet , Peter McCullough

Posted Date: 29 June 2024

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geni.us/preprint-july3

35 Adverse Events in VAERS

Miscarriage 3494/315/936	Stillbirth 477/68/175	Cervical Incompetence 10/2/9	Pre-eclampsia 147/26/96	Insufficient Breast Milk 10/0/0	Placental Calcifications 5/0/2	Placental Infarction 5/0/2
Placental Insufficiency 24/0/2	Placental Disorder 41/17/55	Placental Thrombosis 6/0/0	Placental Accreta 3/0/0	Placental Abruption 90/14/44	Reduced Amniotic Fluid 17/1/11	Chromosomal Abnormality 17/0/2
Fetal Growth Restriction 21/0/1	Fetal Heart Rate Abnormality 228/48/94	Fetal Cardiac Arrest 21/2/2	Fetal Cardiac Disorder 22/4/8	Fetal Malformation 40/2/8	Fetal Distress 18/6/27	Fetal Vascular Mal-perfusion
Fetal BPP Abnormality 4/0/0	Premature Delivery 404/142/356	Premature Rupture of the Membranes 114/14/53	Premature Labor 189/53/223	Neonatal Death 12/0/1	Neonatal Asphyxia 8/0/3	Neonatal Infection 5/0/4
Neonatal Resp. Distress 12/0/7	Neonatal RDS 12/0/23	Neonatal Seizure 7/0/6	Neonatal Hemorrhage 4/0/0	Neonatal Pneumonia 4/0/1	Fetal-Maternal Hemorrhage	Hemorrhage in Pregnancy 164/7/25

Adverse Event (AE)	C19 Vaccines over 40 Months vs Influenza Vaccines over 412 Months	C19 Vaccines over 40 Months vs All Other Vaccines over 412 Months
Miscarriage 3494/315/936	PRR 114 95% CI: 81-161 p<0.0001, z statistic 27.0	PRR 38.4 95% CI: 27-53.6 p<0.0001, z statistic 21.5
Stillbirth 477/68/175	PRR 72.3 95% CI: 47.8 – 109 p<0.0001, z statistic 20.4	PRR 28.1 95% CI: 19.4 – 40.6 p<0.0001, z statistic 13.0
Insufficient Breast Milk 10/0/0	Significantly increased in Covid-19 vs Influenza Vaccines Fishers Exact p < 0.000001 Chi-square 84.0	Significantly increased in Covid-19 vs All Other Vaccines Fishers Exact p < 0.00001 Chi-square 84.0

Preprint Link

Fertility / Menses / Miscarriages

- Dr. Yeadon and Dr. Sucharit Bhakdi
  - *Syncytiotrophoblast* layer develops day 7 after fertilization
  - Implants into endometrium
  - Secretes hcg (Human Chorionic Gonadotropin) –for production of progesterone
  - Contains proteins similar to spike protein
- Inflammation—LNPs and/or Spike?
  - Not ideal for fertilization or pregnancy in general
- Endocrine– ovary/testes/pituitary ?
  - Menstrual abnormalities
- Clotting (micro) – may be similar to those seen by embalmers
- Possible DNA integration
- Spike protein may bind to estrogen receptors
  - Link to JROSE substack Dec 2022