

# Study Finds More Than 25% Increase in Emergency Cardiovascular Events in 16–39 Age Group During COVID-19 Vaccination Rollout in Israel

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A recent **study** in Israel revealed more than a **25% increase** in calls in Israel’s National Emergency Medical Services (IEMS) concerning emergency cardiovascular events in the 16 to 39 age group during the Covid-19 vaccination rollout.

The study analyzed all calls related to **cardiac arrest (CA)** and **acute coronary syndrome (ACS)** events from January 1st, 2019 to June 20th, 2021.

**The findings showed more than a 25% increase in both cardiac arrest (CA) calls and acute coronary syndrome (ACS) calls of people in the 16–39 age group during the Covid-19 vaccination rollout in Israel (January–May 2021), as compared to 2019-2020.**

“Of the 30,262 cardiac arrests and 60,398 ACS calls included in the study population, 945 (3.1%) and 3945 (6.5%) calls were for patients of age 16–39, respectively, from a population of close to 3.5 million people in this age group. Of the 834,573 confirmed COVID-19 cases during the study period, 572,435 (68.6%) cases were from individuals of age 16–39. Among the 5,506,398 patients receiving their 1st vaccination dose and 5,152,417 patients receiving their 2nd vaccination dose, 2,382,864 (43.3%) and 2,176,172 (32.2%) patients were of age 16–39, respectively,” the study stated.

The researchers stated in their abstract, “while not establishing causal relationships, the findings raise concerns regarding vaccine-induced undetected severe cardiovascular side-effects and underscore the already established causal relationship between vaccines and myocarditis, a frequent cause of unexpected cardiac arrest in young individuals.”

**KoolBeens Cafe** has more on this study:

### ***COMBINING EMERGENCY CALL DATA WITH PANDEMIC WAVES AND VACCINATION RATES***

The study combines IEMS call volume data for cardiac arrest (CA) and for acute coronary syndrome (ACS) with data on COVID-19 infection rates and vaccination rates over a span of two and half years, divided into three time periods: a 14-month “normal period” beginning in January 2019, prior to the pandemic; a ten-month “pandemic period” starting in March 2020, which

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includes two infection waves; and a “pandemic and vaccination period” from January to June 2021, which includes a third wave as well as Israel’s vaccination rollout for those aged 16 and older.

Here are some of the main observations (see Figures below for more detail):

- Cardiac arrest calls (red line) appear to be decoupled from pandemic infection waves (grey line).
- The increase in cardiac arrest calls (red line) appears to be associated with the vaccination rollout (purple and blue lines for 1st and 2nd dose respectively) and not with third wave (grey line).
- The increase in cardiac arrest calls (red line) appears to be highly associated with the 2nd dose of the Pfizer vaccine (blue line).
- The increase in cardiac arrest calls (red line) after April 2021 is associated with the single vaccine doses administered to individuals who were previously infected and recovered from COVID-19 (green line).

While the association between CA calls and the 1st and 2nd doses of vaccine seems to be a convincing one, the same cannot be said for the association between the single vaccine dose (green line) and the second spike in cardiac arrest calls (Figure 2). In this case, there seems to be a disconnect rather than an association.

To view the Figures relating to acute coronary syndrome (ACS)—which showed a similar association with Israel’s vaccination rollout— please go [here](#).

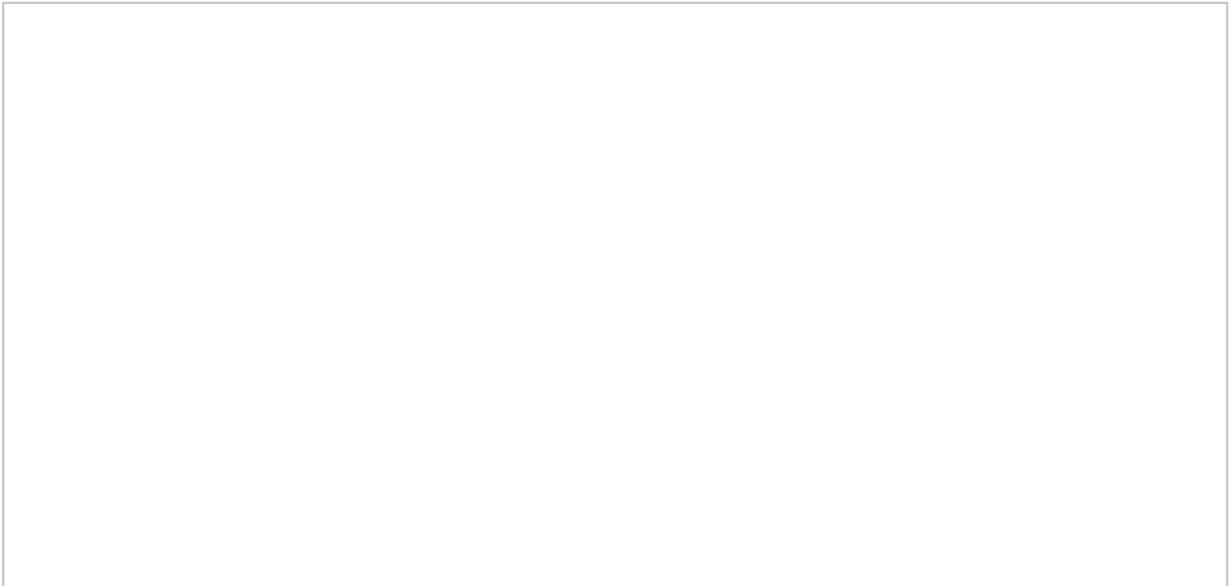


Figure 1: Number of cardiac arrest calls (red line) from January 2019 to June 2021. Screen shot taken from IEMS call study (2022).

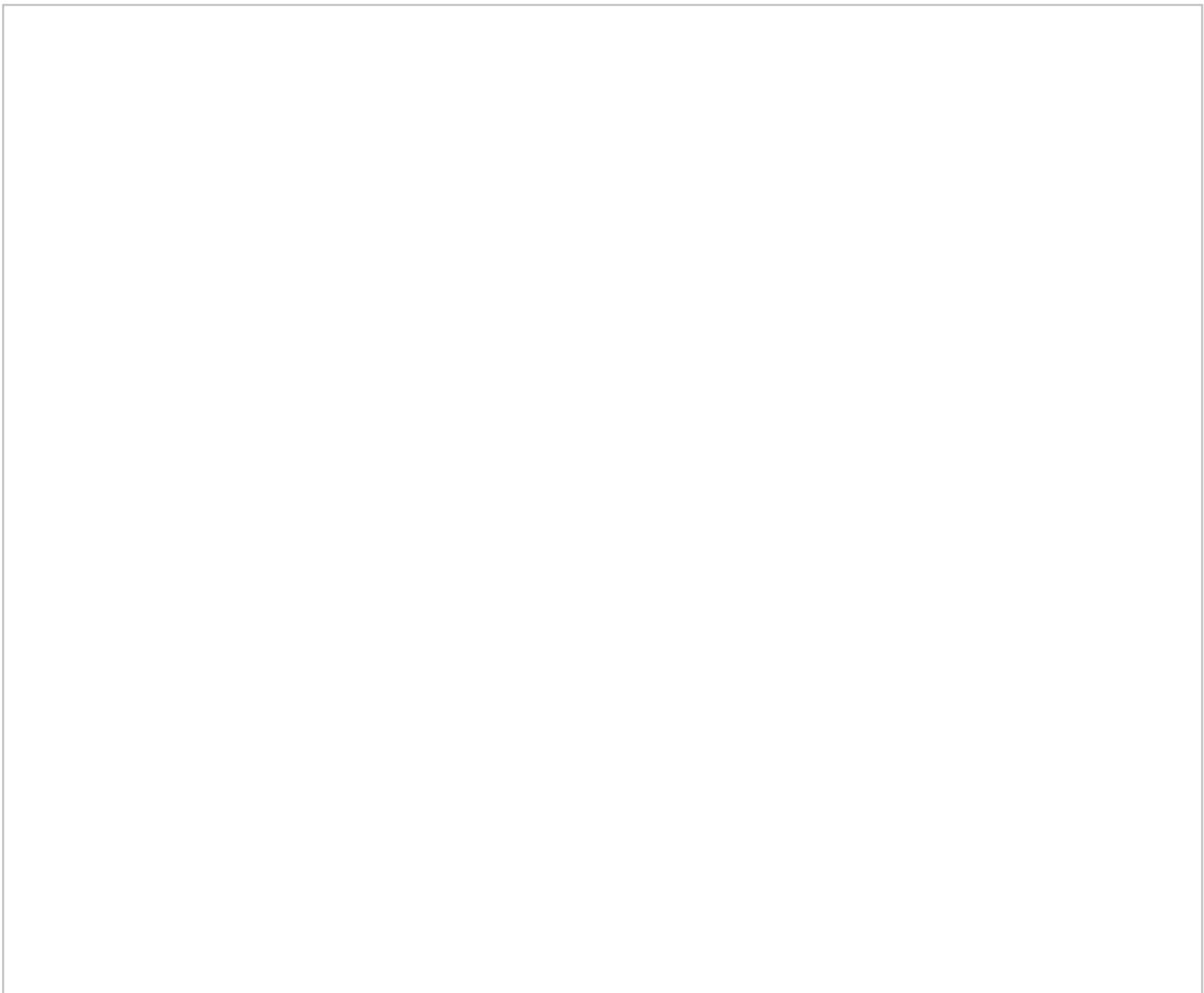


Figure 2: Number of cardiac arrest calls (red line) during the “pandemic and vaccination” period only. Screen shot taken from IEMS call study (2022).

***CARDIAC TISSUE CHANGES CAN PERSIST FOR MONTHS***

When a group of patients aged 12-17 years, who presented in hospital with mRNA vaccine-related myopericarditis returned for follow-up 3-6 months later, the majority continued to have “abnormal” heart MRI findings. This is according to a [paper](#) published in the *Journal of Pediatrics*, which was discussed in detail [here](#). The authors of the study—most from the Department of Pediatrics at Seattle Children’s Hospital—say that while abnormalities persisted, function had improved. They say the findings raise concerns for “potential longer-term effects” and plan to repeat the cardiac MRI on these patients at the 1-year postvaccine mark to re-assess.

The key point here is that when myopericarditis occurs, whether it’s a result of COVID-19 or the vaccine, there can be remnant damage to the heart and the signs of fibrosis and scarring can persist in a patient for a long time.

Read more [here](#).

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Jim Hoft is the founder and editor of The Gateway Pundit, one of the top conservative news outlets in America. Jim was awarded the Reed Irvine Accuracy in Media Award in 2013 and is the proud recipient of the Breitbart Award for Excellence in Online Journalism from the Americans for Prosperity Foundation in May 2016.

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