Name of the person/organization

Title/position

Name, via email to firstname.lastname@x.y

XXth Month 2025

Subject: To reproductive health professionals

Dear Colleague or Title Family name,

As a medical professional working at the frontline of reproductive health, your role in safeguarding the lives of women, unborn children, and future generations is irreplaceable. Your professional training, experience, and commitment to evidence-based care give you a key perspective to discern emerging risks.

In that spirit, we respectfully ask you to examine serious safety concerns that have come to light regarding the gene-based COVID-19 mRNA vaccines, particularly in relation to reproductive outcomes. These concerns are not speculative — they arise from observed anomalies, regulatory inconsistencies and published scientific data. They are compounded by the fact that products based on this novel gene-based technology and used for COVID-19 were exempt from genotoxicity testing. This is not because of their composition, mechanism of action or pharmacodynamic/kinetic properties, but simply because of a regulatory definition that gives vaccines targeting an infectious disease exemption from such testing.

These findings have been compiled and analysed by NORTH Group — a global, multidisciplinary coalition supported by over 1000 professionals including doctors, nurses, scientists, lawyers as well as elected representatives.

NORTH Group has sent both a Letter of Concern and Scientific Lay Summary to heads of state and health ministers in 24 countries calling for:

- *Immediate suspension of the use of modified mRNA vaccines and recall of the products.*
- *Independent and transparent investigation into their approval and use.*
- *Scientific evidence that conclusively demonstrates no risk of damage to human DNA.*

We ask you to review the information that NORTH Group has provided with strict focus on public safety.

The very serious concerns raised relate to the manufacturing process and quality control, as well as the regulatory approval, of COVID-19 modified mRNA vaccines.

Health and drug regulators as well as politicians have been negligent in disclosing the known risks associated with genetic vaccines including modified mRNA products, which were manufactured using plasmid DNA templates. The lack of transparency in the safety monitoring and quality control has raised major international concern about their proper implementation, particularly regarding:

- Design, manufacturing process and quality control.

- Unprecedented regulatory irregularities, such as not requiring a clinical trial of the marketed product despite a change in the manufacturing process after the initial clinical trial.
- Variable levels of residual transfection-capable plasmid DNA in the final drug products marketed by Pfizer and Moderna, which in many instances greatly exceed regulatory limits.
- The presence of undeclared, oncogenic SV40 promoter/enhancer sequences in Pfizer's COVID-19 vaccine and subsequently identified in the blood of vaccine recipients. Sequences include the SV40 Nuclear Targeting Sequence designed to transport associated DNA into the cell nucleus.
- Previous regulatory limits for residual DNA in vaccines should not apply to LNP encapsulated DNA, which is efficiently transferred into cells.

As history has shown repeatedly, external pressures — whether financial, political, or institutional — can cloud scientific judgement. It is only through rigorous, transparent inquiry and dialogue that medical science can retain its objectivity and the trust of those we serve.

The last few years placed health professionals in impossible positions, with rapidly shifting guidance and intense political and social pressure. We understand that asking questions, let alone speaking up, has often been met with silence or sanction.

Even if our observations challenge dominant narratives, our duty of care requires that we examine emerging data with open and critical minds.

NORTH Group's scientific summary raises serious concerns that need to be addressed by gynaecologists, obstetricians, midwives, fertility specialists, tissue, and germ cell banks etc. These include:

- Biodistribution of LNPs to the reproductive organs and permeability of the placenta.
- Transfer of mRNA and LNP lipids into extracellular vesicles/exosomes and further spread.
- Toxicity of virally or vaccine derived spike protein to the gonads, germ cells or foetus.
- Exposure to residual DNA packaged into LNPs
- Transfer of residual DNA to the nucleus.
- Risk of foreign DNA integration into the human genome.

As professionals, we are sure you agree that it is our ethical duty to insist on strict adherence to the precautionary principle, especially for pregnant women and children. The long-term effects of modified mRNA vaccines are unknown, and no pharmacokinetic studies have been carried out. We do not know with certainty what the effect of modified mRNA vaccines may be on female and male fertility, pregnancy, foetal development, and short- or long-term health of the resulting children.

Tissue establishments and germ cell banks have special requirements on safety and traceability. Traceability must be complete, and the data must be archived. Serious adverse reactions must be reported and where necessary, cells or tissues recalled. The use of gametes and embryos is also regulated by legislation, and restrictions may apply, for example, to the use of genetically modified gametes or embryos.

Your clinical insight is irreplaceable in identifying early signals. If you have noticed changes — even if subtle or difficult to interpret — we urge you to share them. Together, we can uphold the principles of medicine and protect future generations.

Since the rollout of COVID-19 vaccines, have you noticed anomalies or unusual changes in:

- Birth rate, miscarriage, stillbirth, placental abnormalities, post-partum haemorrhage, foetal malformation, foetal heart rate abnormality, foetal cardiac arrest, haemorrhage in pregnancy, premature labour, SGA, PE, hyper coiled umbilical cord, placental clots, other complications in pregnancies?
- Neonatal ICU admissions, unexplained neonatal deaths, neonatal strokes?
- Abnormal pap smears, menstrual abnormalities, abnormal uterine bleeding, reproductive cancer, breast cancer, infertility, ovarian and testicular function?
- Quality of oocytes, sperm and embryos, oocyte maturity, fertilization, embryo cleavage / blastocyst formation, embryo arrest, implantation failure, pre-implantation genetic testing (PGT), rejection rate for gamete donors or need to loosen donor acceptance criteria?

We would be grateful to hear more about your observations, so please do reach out, even if you wish to remain anonymous. We will respect confidentiality absolutely and without question.

We believe that the system of drug approval and regulation is broken and that overarching financial and political interests, as well as fear of the pandemic, led to the premature approval of modified mRNA vaccines before they had been shown to be safe. Critically, this rushed and haphazard approval process has opened the floodgates for the less stringent approval of a range of modified mRNA products – including the recently approved self-amplifying mRNA vaccine Kostaive for COVID-19. This new technology adds yet more levels of genetic risk that have not been investigated.

The European Union is pushing, at breakneck speed, for deployment of new vaccines within 100 days, which is impossible with appropriate safety testing. Human beings should not be subject to experimentation. We call for the restoration of the highest levels of ethical principles in medicine to protect both our patients and our professional autonomy. The burden of proof for the safety of a product does not rest with us as professionals or with the public, but with the manufacturer of the product and the medical regulator.

The decisions made now will shape the future of reproductive health and medical ethics for decades to come. We believe that by working together, grounded in courage and transparency, we can help restore the highest standards of care and accountability in our field.

We would like to thank you for your time and interest. We hope that we can continue to discuss this important issue together.

Sincerely

Signature

First name Family name