

June Raine,
Medicines & Healthcare Products Regulatory Agency (MHRA),
10, South Colonnade,
London
E14 4PU

9th June 2022

Attached:

- 1) Internet overview of death and injury from Covid 19 intervention products (compiled by The Expose UK)
- 2) Letter sent to MP.

Dear Madam,

I previously wrote to Mr Stephen Lightfoot on 18th March 2022. No response has been forthcoming.

Brevity, speed and accuracy is needed to investigate the ongoing threat to human life from the experimental gene-based therapy injections created for Covid 19.

I am a retired UK Police Inspector. In June 2021, I distributed an investigation report to approximately 450 UK MPs, UK Police Associations, media outlets and the General Medical Council. This report contained an investigation I had undertaken into PCR Protocols. I left the Metropolitan Police Service in February 2020, after 30 years of service. My investigation report was published in The Expose UK on December 6th 2021 (entitled 'Society in a Centrifuge – PCR Protocols').

A multi-agency approach is paramount to the investigation of adverse events, death and regressed fertility. The investigation must be transparent, thorough and the full facts made available to UK citizens, once completed. Where appropriate it must identify failings and misconduct. It must use plain language and where misconduct is identified it must say so, identifying named individuals (regardless of status) and named organisations. If a sufficient threshold has been reached that demonstrates criminal behaviour (i.e., misconduct in public office), a full report with supporting evidence should be provided to the Crown Prosecution Service (CPS) and Attorney General.

The investigation team should not have compromised staff as investigators, (this includes those that function in a supervisory or management function). Any person/s directed in this capacity should not have financial involvement with any practice or specialty area, they are investigating (i.e., vaccines, drugs, PPE). Any investigator, supervisor or manager would be prohibited from being involved in public policy making process. The investigation should rightly be totally independent and free from political interference. This rightly excludes, NHS portfolio managers and health policy makers. This is central to integrity.

Adverse event reporting systems are well known for under reporting of injury and death. It is critical to the confidence of UK citizens, that these matters are pursued with integrity and a systematic approach to finding out the full extent of the damage already caused (and potentially caused).

Full disclosure is the cornerstone of any investigation. This does not appear to have manifested. A myopic mindset has been adopted throughout. We have trusted some half-

truths and stopped searching for the whole truth. Global vaccine adverse events databases demonstrate the high number of those who have already died from the current vaccine roll out. Between 26% and 33% of deaths take place within 24 - 48 hours of vaccination. Under these circumstances they satisfy the Bradford Hill postulates in relation to causation. The current medical intervention is still in an experimental phase, using new gene- based technology. No one at this stage, knows the long -term side effects.

It is a critical part of risk, crisis and disaster management that these issues are addressed and documented. The health and safety of every citizen is paramount. The risk v benefit ratio of the experimental drugs has not been fully factored. A complete understanding of 'relative' v 'absolute' effectiveness has to be correlated with a determined pursuit by every available means to investigate death and injury from gene-based products. This can only be achieved by proactive co-operation of other public bodies. Relying on a redundant dataset, defies logic and integrity. <https://rumble.com/vqx3kb-the-pfizer-inoculations-do-more-harm-than-good.ht>

A number of agencies are likely to have members that have the required skills to undertake such complex investigation or advise /advertise for such investigators. I have attached a list of organisations that may be able to offer assistance or further direction to obtain data.

It is extremely important to emphasise the role of companies that provide life insurance. A rich vein of evidence is likely to exist in such. These should not be ignored. NHS patient data could abound in signal expression. Private health care providers are also an opportunity. Coroners and undertakers are likely to be in a position to provide family concerns. Ignoring any of these evidential pathways; would be regarded by the public as flagrant dereliction of duties and responsibilities.

After reviewing a number of your board meetings, I have no confidence in the MRHA direction. A strategy and tactical investigation plan are desperately required.

The UK public look forward to your response,

Thank you

Colin Edge BSc (Hons)
Ret: Inspector

List of organisations:- (Full contact details of these agencies were provided in the original correspondence to June Raine and Stephen Lightfoot)

Institute of Professional Investigators,

National Association of Retired Police Officers (NARPO),

International Police Association (IPA),

National Association of Funeral Directors (NAFD),

The Coroners' Society of England & Wales,

