

**IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF LOUISIANA
MONROE DIVISION**

STATE OF MISSOURI *ex rel.* ERIC S.
SCHMITT, Attorney General, and

STATE OF LOUISIANA *ex rel.* JEFFREY
M. LANDRY, Attorney General,

Plaintiffs,

v.

JOSEPH R. BIDEN, JR., in his official
capacity as President of the United States, *et*
al.;

Defendants.

Case No. 3:22-cv-01213

DECLARATION OF DR. MARTIN KULLDORFF

I, Dr. Martin Kulldorff, declare as follows:

1. I am an adult of sound mind and make this statement voluntarily, based upon my knowledge, education, and experience.

2. I am an epidemiologist, a biostatistician and a former Professor of Medicine at Harvard University and Brigham and Women's Hospital, from 2015 to November 2021. Before that, I was Professor of Population Medicine at Harvard University from 2011 to 2015. I hold a Ph.D. from Cornell University. I have published over 200 scholarly articles in peer-reviewed journals in the fields of public health, epidemiology, biostatistics and medicine, among others. My research has been cited in the peer-reviewed scientific literature more than 25,000 times.

3. I have dedicated my professional career to the development and implementation of new disease surveillance systems, including the early detection and monitoring of disease outbreaks;

and the post-market evaluation of the safety and efficacy pharmaceutical drugs and vaccines, including the early detection of drug and vaccine adverse reactions.

4. I have served on multiple governmental scientific advisory boards, including the World Health Organization's Disease Mapping Advisory Group; the Scientific Advisory Board for the Accelerated Development of Vaccine Benefit-Risk Collaboration in Europe; the Food and Drug Administration's Drug Safety and Risk Management Advisory Committee; the New York State Department of Health Environmental Public Health Tracking Project; the New York City Department of Health and Hygiene's Advisory Board for Augmenting Statistical Methods for Public Health Syndromic Surveillance System; the National Cancer Institute's Best Practices in Spatial Analysis Working Group; the Centers for Disease Control and Prevention's (CDC) Vaccine Safety Datalink Project, the CDC's MMRV Vaccine Safety Working Group; and CDC's COVID-19 Vaccine Safety Technical Sub-Group; among others. In April 2021, I was abruptly removed from the latter after publishing an op-ed in The Hill against the CDC instituted pause on the one-dose Johnson & Johnson Covid vaccine, arguing that it should not be withheld from older high-risk Americans. As such, I am probably the only scientist that has been fired by CDC for being too pro-vaccine. (Four days after removing me from the working group, CDC reversed itself and lifted the pause.)

5. I have extensively studied and commented on the necessity and safety of vaccine requirements for different population groups with different benefit-risk profiles, including COVID-19 recovered individuals with natural immunity. I am intimately familiar with the data sources and the medical literature on this topic, as it pertains to both clinical practice and government health policy.

6. My writings on COVID-19-related issues have appeared in both scientific journals (like *Emerging Infectious Diseases*, *The Lancet* and *Annals of Epidemiology*) and in the popular press around the world (including the *Wall Street Journal*, *Newsweek*, *CNN*, *The Hill*, *the Telegraph*, *the Spectator*, *the Toronto Sun*, *Aftonbladet*, *Dagens Nyheter*, and many other). I have appeared as an invited guest on national and international news and debate programs in the United States, the United Kingdom, Ireland, Sweden, Germany, France, Spain, India, Mexico, Chile, Argentina and Uruguay, among other countries, including Fox News, Democracy Now, Munk Debates, NewsMax, GB News, Hindustan Times and Infobae.

7. As part of my professional work, I communicate scientific information not only through scientific journals, but also through social media. I have maintained a Twitter account since May 2014, and a LinkedIn account for approximately the same amount of time. I currently have 250,800 followers on Twitter and 13,400 contacts and followers on LinkedIn. Some of these followers reside in Missouri and Louisiana.

8. As a public health scientist, I have experienced censorship on social media platforms due to my views on the appropriate strategy for handling the COVID-19 pandemic. Since April 2020, I have argued for better focused protection of older, high-risk people, at the same time, as we should let children go to school and let young adults live near normal lives so as to minimize the collateral public health damage from these lockdowns and other measures.¹

9. On October 4, 2020, two other epidemiologists and I published the “Great Barrington Declaration” online.² My co-authors were Dr. Jayanta Bhattacharya of Stanford University, and Dr. Sunetra Gupta of the University of Oxford.

¹ The Epoch Times (2021), “Censorship of Science, with Dr. Martin Kulldorff, Dr. Scott Atlas, and Dr. Jay Bhattacharya,” May 2, 2021. https://www.theepochtimes.com/live-censorship-of-science-with-dr-martin-kulldorff-dr-scott-atlas-and-dr-jay-bhattacharya_4343061.html.

² Great Barrington Declaration, <https://gbdeclaration.org/>.

10. In the Great Barrington Declaration, we stated: “As infectious disease epidemiologists and public health scientists we have grave concerns about the damaging physical and mental health impacts of the prevailing COVID-19 policies, and recommend an approach we call Focused Protection.” *Id.* The Declaration criticized current lockdown policies to respond to COVID-19, stating: “Current lockdown policies are producing devastating effects on short and long-term public health. The results (to name a few) include lower childhood vaccination rates, worsening cardiovascular disease outcomes, fewer cancer screenings and deteriorating mental health – leading to greater excess mortality in years to come, with the working class and younger members of society carrying the heaviest burden. Keeping students out of school is a grave injustice.” *Id.*

11. The Great Barrington Declaration was publicly co-signed by 43 medical and public health scientists and practitioners, including a former chair of the Department of Epidemiology at Harvard School of Public Health. It has subsequently been co-signed by over 930,000 people, including over 15,000 medical and public-health scientists, and over 47,000 medical practitioners.

12. On October 8, 2020, four days after the Declaration’s publication online, then-Director of National Institutes of Health, Dr. Francis Collins, emailed Dr. Anthony Fauci and Cliff Lane at NIH/NIAID about the Great Barrington Declaration. This email stated: “Hi Tony and Cliff, See: <https://gbdeclaration.org/>. This proposal from the three fringe epidemiologists who met with the Secretary seems to be getting a lot of attention – and even a co-signature from Nobel Prize winner Mike Leavitt at Stanford. There needs to be a quick and devastating published take down of its premises. I don’t see anything like that online yet – is it underway? Francis.” This email was produced over a year later in response to FOIA requests.³

³ Wall Street Journal Editorial Board. (2021) “How Fauci and Collins Shut Down Covid Debate” *Wall Street Journal*. Dec. 21, 2021. <https://www.wsj.com/articles/fauci-collins-emails-great-barrington-declaration-covid-pandemic-lockdown-11640129116>

13. In a recent speech I gave on May 2, 2022, I summarized many of the instances of social-media censorship that I experienced after publishing the Great Barrington Declaration.⁴

14. After the Great Barrington Declaration was published, I noted that there was an organized campaign against the Great Barrington Declaration with various sorts of strange accusations. By other scientists, we were equated with ‘exorcism’, ‘eugenics’, ‘clowns’, ‘anti-vaxxers’, ‘Trumpian’, ‘libertarian’, ‘Koch funded’ and ‘pseudo scientists’. We were accused of writing the Declaration for financial gains, even though the opposite is true. We were accused of threatening others, which none of us have done.

15. Soon after the Great Barrington Declaration was published, it was censored on social media in an apparent attempt to prevent it from (in Dr. Collins’ words) “getting a lot of attention.” This included Google deboosting search results for the Declaration within a few days of Dr. Collins’ email to Dr. Fauci. In the first few days after its publication, the Great Barrington Declaration came up at the top in the search engine in Google, but then suddenly it wasn’t there. Instead, what was there was those who criticized it. Other search engines still had it at the top, but not Google.

16. The Declaration was later censored on Facebook: They took down the Great Barrington Declaration page for about a week, with no explanation. The offending post was a pro-vaccine post arguing that we should prioritize giving the vaccines to older, high-risk people.

17. I also experienced extensive censorship on social media on my personal accounts. For example, in March 2021 Twitter censored my tweet stating that “Thinking that everyone must be vaccinated is as scientifically flawed as thinking that nobody should. COVID vaccines are

⁴ The Epoch Times (2021), “Censorship of Science, with Dr. Martin Kulldorff, Dr. Scott Atlas, and Dr. Jay Bhattacharya,” May 2, 2021. https://www.theepochtimes.com/live-censorship-of-science-with-dr-martin-kulldorff-dr-scott-atlas-and-dr-jay-bhattacharya_4343061.html.

important for older, higher risk people and their caretakers. Those with prior natural infection do not need it. Nor children.”

18. I was also censored by Twitter for two tweets about masks. In one I wrote that, “Naïvely fooled to think that masks would protect them, some older high-risk people did not socially distance properly, and some died from #COVID19 because of it. Tragic. Public health officials/scientists must always be honest with the public.” For three weeks starting in May 2021, I had no access to Twitter because of this tweet.

19. On November 5, 2021, I posted a direct quote from Dr. Roberto Strongman, an Associate Professor of Black Studies at the University of California-Santa Barbara. In a recent essay, he had reflected on the historical use of enforced mask use among enslaved populations. My tweet simply quoted his words that: “Masks are symbols of submission / Masks are the lurid fetish of power / Masks lead to the erasure of personhood / Masks promote a culture of fear / Masks are deterrents of solidarity,” in quotation marks with an attribution to Dr. Strongman. Twitter censored this tweet by labeling it “Misleading” and preventing it from being replied to, shared, or liked.

20. Twitter is an important venue for communicating accurate public health information to the public. Because of the censoring, and the suspension of other scientists, I have had to self-censor myself on the platform. Sometimes by not posting at all and sometimes through imaginative phrasing. Here is one example of such a tweet: “Having been censored by Twitter, I must be careful what I write about masks: If you do surgery, please wear a surgical mask. It protects your patients.”

21. On March 18, 2021, I participated in a two-hour roundtable discussion with Governor Ron DeSantis in Florida, along with Dr. Sunetra Gupta at Oxford, Dr. Jay Bhattacharya at Stanford and Dr. Scott Atlas at Stanford. In this discussion, we made remarks critical of COVID-19 restrictions, including mask mandates on children. I stated that “children should not wear face masks, no. They

don't need it for their own protection, and they don't need it for protecting other people either.” Dr. Bhattacharya stated that “children develop by watching other people” and that it is “developmentally inappropriate” to require young children to wear face masks. Dr. Atlas pointed out that “there's no scientific rationale or logic to have children wear masks in schools.” Dr. Gupta stated that “to force [children] to wear masks and distance socially, all of that to me is in direct violation of our social contract.” In the same roundtable, we also argued against vaccine passports. ‘Let's try to argue against that from the very beginning before it sort of takes off.’ Unfortunately, the video of the roundtable was removed by YouTube, which is owned by Google.

22. I have also experienced censorship on LinkedIn, which is a popular communications platform among scientists and other professionals. In August 2021, LinkedIn censored a post where I linked to an interview I did with The Epoch Times on the dangers of vaccine mandate. LinkedIn said that ‘Only you can see this post.’ So, I could still read my own post, but nobody else could, which defeats the whole purpose.

23. The same week, LinkedIn also censored me when I reposted a LinkedIn post by a colleague from Iceland where he cited what the Icelandic chief epidemiologist had said. I did not add any text to the repost, so in this case LinkedIn censored the words of a government public health official: Iceland's equivalent of the CDC director in the U.S.

24. In October 2021, LinkedIn censored a post where I defended health care jobs, pointing out that natural immunity from covid infection is stronger than vaccine induced immunity, so that hospitals should hire rather than fire nurses and other health care providers with natural immunity, and use them for the patients that are the most vulnerable to Covid-19.

25. In November 2021 I wrote a Newsweek op-ed together with Dr. Jay Bhattacharya where we criticized the official Covid-19 response as formulated by Dr. Anthony Fauci. When I posted a

quote from and a link to the Newsweek article, it was removed by LinkedIn, which is owned by Microsoft. Ironically, Microsoft News (msn.org) republished the same Newsweek op-ed verbatim.

26. In January 2022, LinkedIn terminated my account for posting about the benefits of natural immunity. My last post before suspension was: “By firing staff with natural immunity after COVID recovery, hospitals got rid of those least likely to infect others.” LinkedIn restored my account after my termination received media attention, but I now have to be very careful with what I write.

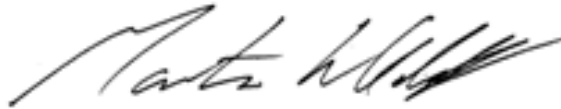
27. Twitter and LinkedIn are important venues for communicating accurate public health information to other scientists and to the public. Because of the censoring, and the suspension of other scientists, I have had to self-censor myself on both platforms. Sometimes by not posting important public health information. At other times, I have had to express my thoughts indirectly through imaginative phrasing. For example, on March 15, 2022, I tweeted: “Having been censored by Twitter, I must be careful what I write about masks: If you do surgery, please wear a surgical mask. It protects your patients.” This, obviously, was a very indirect and oblique way of communicating the limited utility of wearing masks and expressing my criticism of mask mandates, including the widespread use of cloth masks.

28. Social-media censorship has not focused solely on the co-authors of the Great Barrington Declaration but has swept in many other scientists as well. These censorship policies have driven scientists and others to self-censor, as scientists like me restrict what we say on social-media platforms to avoid suspension and other penalties. In fact, the most devastating consequence of censoring is not the actual posts or accounts that are censored or suspended, but the reluctance of scientists to openly express and debate scientific questions using their varied scientific expertise. Without scientific debate, science cannot survive.

29. It can sometimes appear random who are being censored, but that serves the purpose of the censors. They cannot monitor every post from every user. By censoring a variety of individuals, some scientists and some non-scientists, some journalists, some private individuals, some anonymous accounts, some after warnings and others suddenly without a warning and some account with many followers and other accounts with few followers, the censors are able to make everyone scared and make everyone self-censor.

30. It has been stunning to be a scientist during these last two years. We have NIH Director Collins and NIAID Director Fauci thinking that you promote science by silencing scientists through published takedowns. It is absurd. We have a geneticist and a virologist thinking they know epidemiology better than epidemiologists at Oxford, Harvard and Stanford, calling us “fringe epidemiologists.”

I swear or affirm under penalty of perjury that the foregoing is true and correct.

A handwritten signature in black ink, appearing to read "Martin Kulldorff". The signature is fluid and cursive, with a prominent initial "M" and a long, sweeping underline.

Dated: June 8, 2022

Signed: /s/ Martin Kulldorff