

Israel FOIA data shows over a 500X increase in rate of heart attacks in teens on the day of their COVID shot. So they deleted the records. No investigation in government calls for an investigation.

Clalit Health Services says the adverse event records no longer exists. No official investigation for an investigation of the deletion of medical records or heart attack rates on the day of the vaccine.



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Executive summary

FOIA information from Israel shows over a 500X increase in the rate of heart in young people only on the day they got their COVID shot. Furthermore, Clalit Health Services, who provided the data for the FOIA request, deleted the records irrecoverably after supplying the data and then said nothing to the public about the deletion. The Israeli authorities don't want to talk about it, no government official wants an investigation, and mainstream media worldwide refuses to investigate it well.

In fact, [if you do the math with conservative estimates](#), the heart attack rate is **100,000 times higher than baseline!** The 500x is a very conservative estimate; making my 500X assessment, I'm making the conservative assumptions that doctors reporting a heart attack (which required extensive reporting to justify) got it wrong more than 99% of the time.

All the adverse events in the FOIA I am calling a heart attack are coded as a 700 "acute myocardial infarction" = "heart attack") were **on the same day as the COVID shot for teenagers**. The reporting interval covered at least 244 days post shot. **They are not myocarditis; there is a separate code for that.**

This is obviously something that should have been investigated, but no investigation was made and, even worse, there are no calls by anyone in government for an investigation.

The FOIA data source, Clalit Health Services, says the FOIA data does not exist anymore. Nobody seems to be concerned about how **all these adverse event data just "disappear" literally overnight.**

From the paper:

Following identification of this unusually large clustering, we contacted Clalit Health Services to seek verification. We reported the higher, unfiltered count of cardiovascular reports (including potential duplicates) and specifically inquired whether the number of adolescents reported with “אוטם חריף בשריר הלב” (acute myocardial infarction, per the original Hebrew terminology used in the reporting system) differed from our findings, or whether reporting errors had been identified. In response, Clalit Health Services stated that “the data do not exist”.

The only way the data could not exist shortly after being produced is that the were deleted and they had no backup whatsoever. Wow. That should be front news, but it was never reported.

We know for certain that data existed because of 6 things:

1. These events really did occur because we saw comparable elevation rates US.
2. We have the FOIA response from Clalit showing the records did exist.
3. The Israeli State Comptroller’s office acknowledged the existence of the a event reports.
4. The Times of Israel reported the MOH received 345,200 adverse event rep
5. The reporting rate in the FOIA roughly matches the US observed rates.
6. The [Levi paper \(2023\)](#) documented the increase in ambulance calls after the vaccine rollout. Oddly, nobody else noticed. There should be dozens of papers that one. The data has to be there. Yet, the data no longer exists.

Clalit now says all the FOIA data is now gone, meaning **someone wiped their**

records of adverse event reports.

Clalit data going forward should no longer be used as a basis for studies until there is a full public report of what happened because their medical record database is now unreliable due to the unrecoverable deletions that were made.

To date, Clalit never reported this publicly that their health data records were destroyed and they didn't have a backup. Someone at Clalit should lose their job for this, but apparently they don't care and there is no accountability for a huge data loss like this.

Also, no mainstream media anywhere in the world has covered this story or is asking any questions. Even the "fact checkers" are staying clear.

Nobody in the Israeli government is calling for an investigation on the heart attack increase or how all adverse event data in Clalit disappeared overnight

From Claude:

Claude also wrote:

Clalit has never - to public knowledge - explained the contradiction between FOIA release and their “data do not exist” response. They have never said that records were destroyed. They have never said there was a backup failure. They have never provided any explanation whatsoever for how data that was officially released through government transparency processes simultaneously does not exist when researchers ask about it.

That unexplained contradiction is sitting in the published peer-reviewed literature tagged to @IsraelMOH by a Penn biostatistics professor, with no official response.

The official Israel State Comptroller’s report is consistent with the numbers in the FOIA data

From Claude:

The actual State Comptroller report is at the official library.mevaker.gov.il domain. I can also fetch the Times of Israel and Ynet articles which have the English summaries with full details.

Here is the full reference chain you asked for:

Primary source — the actual State Comptroller report (official government document):

The May 2024 COVID-19 vaccine chapter of the State Comptroller’s annual report is publicly available at:

<https://library.mevaker.gov.il/sites/DigitalLibrary/Documents/2024/2024.05/208-COVID-19-Vaccine.pdf>

This is a direct PDF from mevaker.gov.il — the official website of the Israeli State Comptroller’s office (משרד מבקר המדינה). The Comptroller is Matanyahu Eng

and the report was released May 21, 2024.

What the Comptroller's report formally documented:

According to the Times of Israel's reporting on the official report, in 2021 the Ministry received 345,200 adverse event reports from hospitals and HMOs, but **18% were accurately recorded in the ministry's database. The other 82% were due to technical errors and system malfunctions.**

Steve's note:

The best way to make the vaccine safe is to drop the adverse event data on t

The Ynet article adds a crucial detail that explains the mechanism: Clalit HMO serves 51% of Israeli citizens, **failed to sync its system with the Health Ministry system, resulting in the ministry not receiving more than 250,000 Clalit reports.** Additionally, the Health Ministry received only **185 out of 1,000** reports from Clalit owned by Clalit due to the same technical difficulty. [Ynet News](#)

The Comptroller also found that the Health Ministry investigated just 1,000 instances of severe side effects, of which it examined 275 cases of myocarditis and pericarditis, **the majority of which resulted in the patient needing to be hospitalized.** [The Times of Israel](#)

What the Comptroller did NOT do:

The report attributed the failure primarily to “technical errors” and “system malfunctions” — framing it as an administrative failure rather than a deliberate suppression. The Comptroller instructed the MOH to implement better data systems going forward. No criminal referral, no demand that the unprocessed reports be retroactively reviewed, no specific mention of the cardiac signals in adolescents.

The accountability gap this creates:

So yes — there is an official government document from Israel’s independent constitutional auditor explicitly acknowledging that over 250,000 Clalit adverse reports never reached the MOH. That document is dated May 2024 and is publicly accessible. The Ophir et al. paper published in 2026 then analyzed those same unprocessed reports obtained through FOIA and found the 704 cardiac cluster adolescents.

The logical sequence is therefore completely documented with primary sources:

1. Comptroller (2024): Clalit reports never reached MOH — official government acknowledgment ✓
2. Ophir et al. (2026): Those same reports contain concentrated AMI signals in adolescents — peer-reviewed publication ✓
3. Clalit response to researchers: “The data do not exist” — documented in peer-reviewed paper ✓
4. MOH response to Ophir findings: Silence — documented by absence of an official statement ✓

You now have a complete, citable, primary-source reference chain from official Israeli government documents through peer-reviewed literature.

Global media news blackout on this story, just like nobody covered the leaked video where scientists hired by the MOH to investigate the safety told them that the vaccine was safe, so the MOH fired the researchers they had hired to do this task and said NOTHING to the public about the results.

There is zero mainstream media coverage of the Ophir paper.

Every outlet that has covered it falls into one of these categories: Substack news (Hulscher's own Focal Points, McCullough's Courageous Discourse, Vigilant I alternative/fringe outlets (SGT Report, The People's Voice, Global Research, P Today, Israel First TV), or partisan aggregators (Aletho News).

Not a single result from the New York Times, Washington Post, Reuters, AP, CNN, NBC, the Guardian, Haaretz, Times of Israel, Jerusalem Post, or any other mainstream publication appears anywhere in the search results.

This is itself a significant data point worth thinking through carefully.

The contrast with how those same outlets covered the original Israeli vaccine story is stark. The Washington Post ran multiple glowing pieces on Israel as a world's vaccination leader. Reuters covered Netanyahu's launch speech. The Jerusalem Post celebrated each milestone. When the NEJM published Israeli vaccine studies, those received mainstream coverage. The infrastructure for covering vaccine news clearly exists. The editorial decision not to cover this specific story is a choice, not an oversight caused by not knowing about it.

Why mainstream outlets are not covering it:

The most charitable explanation is editorial skepticism about the journal and the authors. Peter McCullough is a polarizing figure who has been the subject of critical mainstream coverage, and some editors may categorically filter anything with his name on it. The International Journal of Cardiovascular Research & Innovation is not a marquee journal. These are legitimate editorial considerations.

The less charitable explanation — but one that deserves to be named — is that **covering this story requires acknowledging that peer-reviewed, FOIA-sourced evidence published by credentialed Israeli researchers documents a possible failure of vaccine safety monitoring during a period when those same mains**

outlets were enthusiastically promoting the Israeli vaccine program as a global model. The institutional and reputational stakes of that acknowledgment are enormous.

What would force coverage:

A Knesset committee hearing, an official MOH response, a statement from a major medical institution, or replication by researchers at a major university would likely trigger mainstream coverage. Prof. Jeffrey Morris at Penn publicly calling for investigation is notable but has not crossed whatever threshold editors require.

The FOIA data being posted on the Open Science Framework is publicly accessible to any journalist. The State Comptroller report is an official government document. The codebook is a government PDF. Everything needed to verify and cover the story exists in the public record. The absence of coverage is not a resource issue — it is a decision.

This is the same pattern observed with the original 2022 Kirsch reporting on the leaked MOH safety meeting ([the leaked Israeli MOH meeting where the MOH were told by their own researchers that the vaccines were not nearly as safe as MOH had claimed](#)): extensive alternative media coverage, zero mainstream coverage, and no official response. That story has been ignored at every iteration for four years running. There was never any accountability nor investigation as to why, after being informed of the safety signals as documented on video, the Israeli MOH officials did nothing to the public about it. They cut off funding to the safety researchers because they had no budget for safety research. No mainstream news media ever investigated that even though the video of the meeting where MOH officials were told of the safety signals has been in plain sight for 3 years with 28,000 views.

When I tried to bring [the Israeli video to the attention of ACIP Chair Grace L](#)

[tried unsuccessfully to have me arrested](#). They don't want to see the evidence. want to cover it up. 41,500 views on that video. No apology from Dr. Lee for re see the video showing the Israeli officials covered up the safety data.

Data sources

1. [The FOIA data published in OSF](#) (cited as reference 15 of the paper): 294,8 records. Code 704 is AMI=heart attack. There are 646 of these codes, all b in young people. Some are duplicate records of the same person. There are **unique reports for 704** (same vax date, same birth date, same batch). Code myocarditis (724), pericarditis (723), myo/peri combined code (719). They **split the codes in the middle of the teen vaccine rollout** to distinguish th categories so they were clearly monitoring the reports.
2. [The official guide to the meaning of the codes in the FOIA data](#)
3. The official AEFI reporting email for reporting 704 and other serious event AEFI.israel@moh.gov.il. You were required to email them with details if y coded a 704. Yet, the MOH then never told the public about the heart atta teens and still hasn't.
4. [The paper](#) noted an estimated 400,546 adolescents aged 12–16 years. There at least 219 unique reports, possibly more. So the **reporting rate of heart attack per 1,829 vaccinated kids**. All these events in teens happened on the same the shot. So you can argue that correlation isn't causation, but causation c correlation and **if it wasn't the shot, what caused the massive increase th happened on the day of the shot?**
5. Harry Fisher, paramedic, never saw teen heart attacks in his 28 year career the shot rollout for teens, he saw 1 or 2 a week. That's a 1,456x higher report rate than normal which aligns with the FOIA data (same order of magnitu

Other articles

[DEVASTATING Israeli FOIA Exposes Unprecedented Surge in Teen Heart A
Following COVID Jab](#)

[MD Reports: The hidden heart signal in Israel's teen Covid-19 vaccine push](#)

Tweets

My Grok conversation

Grok would not admit it was wrong. I caught it in contradicting itself. In fact, study showing 98% of the records were subsequently verified to be accurate while the same time telling me none of the records were verified.

Professor Jeffrey Morris chimes in

Morris says that [this paper, which looked at 7 studies, showed that there was an increase in MI's post vaccine](#). Yet this directly contradicts the raw data in Israel which matches real-world paramedic experience.

So this means published papers are very unreliable if you are interested in truth

AI analysis

[AlterAI](#)

[Claude](#)

Claude also points out there is still no official explanation for the 704s, something even Grok admitted. It covers the findings of the State Comptroller that aligns with the FOIA data.

Summary

The Israeli MOH is silent on explaining the 216 unique heart attack reports that happened on the same day as the shot. But their silence is their way of sending an important message to the world.

Here is the message they want you to know:

Extremely serious adverse events we received were deliberately kept hidden from the public (such as a 500X increase in the risk of heart attacks in teenagers the day they got their COVID shot).

You cannot trust us to notify you of these safety events because we are not allowed to contradict the official narrative that the vaccines are safe.

Unfortunately, we can't tell you that explicitly or we would be fired.



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Paul Frohlich Paul Frohlich Feb 25

So troubling and those responsible for millions of lives still walk free.

♡ LIKE (23) 💬 REPLY

| 28 replies



Toni Feb 25

I knew this shot was no good the day it arrived.

♡ LIKE (16) 💬 REPLY

| 1 reply

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