

## ANNEX no 1.

- **Email cover letter**

**From:** Nina Bjelogrljic <nina.bjelogrljic@fimnet.fi>

**Subject:** Academic dissertation of Eero Poukka

**Date:** 16. December 2025 at 18.17.28 EET

**To:** "Preben.Aavitsland@fhi.no" <Preben.Aavitsland@fhi.no>

**Cc:** johanna.t.arola@helsinki.fi, president@helsinki.fi, Tamara Tuuminen <tuuminen@gmail.com>, sylvi.silvennoinen-kassinen@hoidot.fi, "rauli.makela" <rauli.makela@protonmail.com>

**Dear Professor Aavitsland** (cc: Professor Johanna Arola, Dean of the Medical Faculty; Professor Sari Lindblom, the Headmaster of Helsinki University and the signatories of this statement)

You served as the opponent at the academic dissertation of Eero Poukka, entitled "*COVID-19 Vaccine Effectiveness in Finland During Pandemics,*" which was presented in Helsinki on December 13, 2025, by Eero Poukka from the Finnish Institute for Health and Welfare.

We would like to express our concerns regarding the decision to accept this work as an academic dissertation. The main issues that have led to our concerns are outlined in the attached statement.

We respectfully request that you reconsider your assessment in light of what we perceive to be several methodological limitations and procedural issues. We believe that careful reflection on these matters is important to maintain the independence and integrity of academic research. Furthermore, this thesis will most likely have a significant impact on future policymaking. Therefore, it must be as reliable as possible.

We intend to share these concerns with domestic and international communities after your final decision (i.e., within two weeks).

We are seriously concerned about the relationship between public policy and scientific research, and the importance of ensuring that research practices fully respect ethical standards and fundamental human rights. We believe that open academic discussion of these issues is essential.

Our proposal is that the doctorate candidate is requested to make a thorough revision of the academic dissertation before its final acceptance.

We hope that you will understand our perspective and would appreciate being informed of your decision at your convenience.

Helsinki, December 16, 2025,

Sincerely yours,

Nina Bjelogrić, MD, MSc (biochemistry), PhD (toxicology), specialist doctor in neurology with subspecialty in intellectual disability medicine and with an experience working for national and European regulatory bodies

Rauli Mäkelä, MD, specialist doctor

Sylvi Silvennoinen-Kassinen, MD, PhD, specialist doctor in clinical microbiology, associate professor (docent)

Tamara Tuuminen, MD, PhD, specialist doctor in clinical microbiology, associate professor (docent)

- **Email attachment**

**An academically highly questionable thesis entitled *'COVID-19 Vaccine Effectiveness in Finland During Pandemics'* was presented in Helsinki on December 13, 2025, by Eero Poukka from the Finnish Institute for Health and Welfare.**

We the undersigned have reviewed the academic dissertation of Eero Poukka. In addition, a few of us attended the public examination held in the PIII auditorium, Porthania, at the Faculty of Medicine of the University of Helsinki. The thesis is available [here](#). We have serious concerns regarding the acceptability of this thesis. There are both legal and scientific issues, which we would like to present in this letter.

The dissertation has been supervised by Professor Tuija Leino (Finnish Institute for Health and Welfare) and Ulrike Baum, PhD (Finnish Institute for Health and Welfare), and pre-examined by Professor Merryn Voysey (University of Oxford) and Professor Mika Rämetsä (Tampere University). The opponent in the public defense was Professor Preben Aavitsland (University of Bergen, Norwegian Institute of Public Health), and the custos was Docent Eliisa Kekäläinen (University of Helsinki). The public examination was held in English.

This dissertation is of great national and international significance. It is an observational study of injectable pharmaceuticals (misleadingly called 'vaccines') based on mRNA and DNA vector technology, which have been granted emergency use authorization (USA) and conditional use authorization (Europe).

The vaccine industry is moving towards mRNA technology. Therefore, this academic thesis MUST absolutely be scientifically valid, which it is not in its current form.

The thesis originates from the National Institute for Health and Welfare, which guides Finland's vaccination policy and the procurement of vaccines for the entire population.

## Legal concerns

Finnish administrative law (Section 28, Paragraph 7 of the Administrative Procedure Act) on conflicts of interest and disqualification must be recognized.

The following conflicts of interest related to funding received from pharmaceutical companies are disclosed in the original publications:

- In publication IV it has been declared that THL engages in public and private sector partnerships with vaccine manufacturers and has received research funding from Sanofi Inc., Pfizer Inc. and GlaxoSmithKline Biologicals SA.
- Professor Hanna Nohynek co-wrote three of the five publications. Her affiliation with the WHO as Chair of the Strategic Advisory Group of Experts on Immunization was disclosed in only one of the three publications (Publication V).
- Professor Arto Palmu has been a co-author in the publication number II and a last co-author in the publication IV. In the publication II it is stated under 'Declaration of Competing Interest' that he has been in a relationship with Sanofi Pasteur Inc, GlaxoSmithKline and Pfizer including grants.

Inevitably, this thesis raises the question of whether this work was produced as tailor-made promotional material "to support policymaking," as the doctoral candidate mentions himself in section 6.1 'Motivation' on page 65.

## Scientific concerns

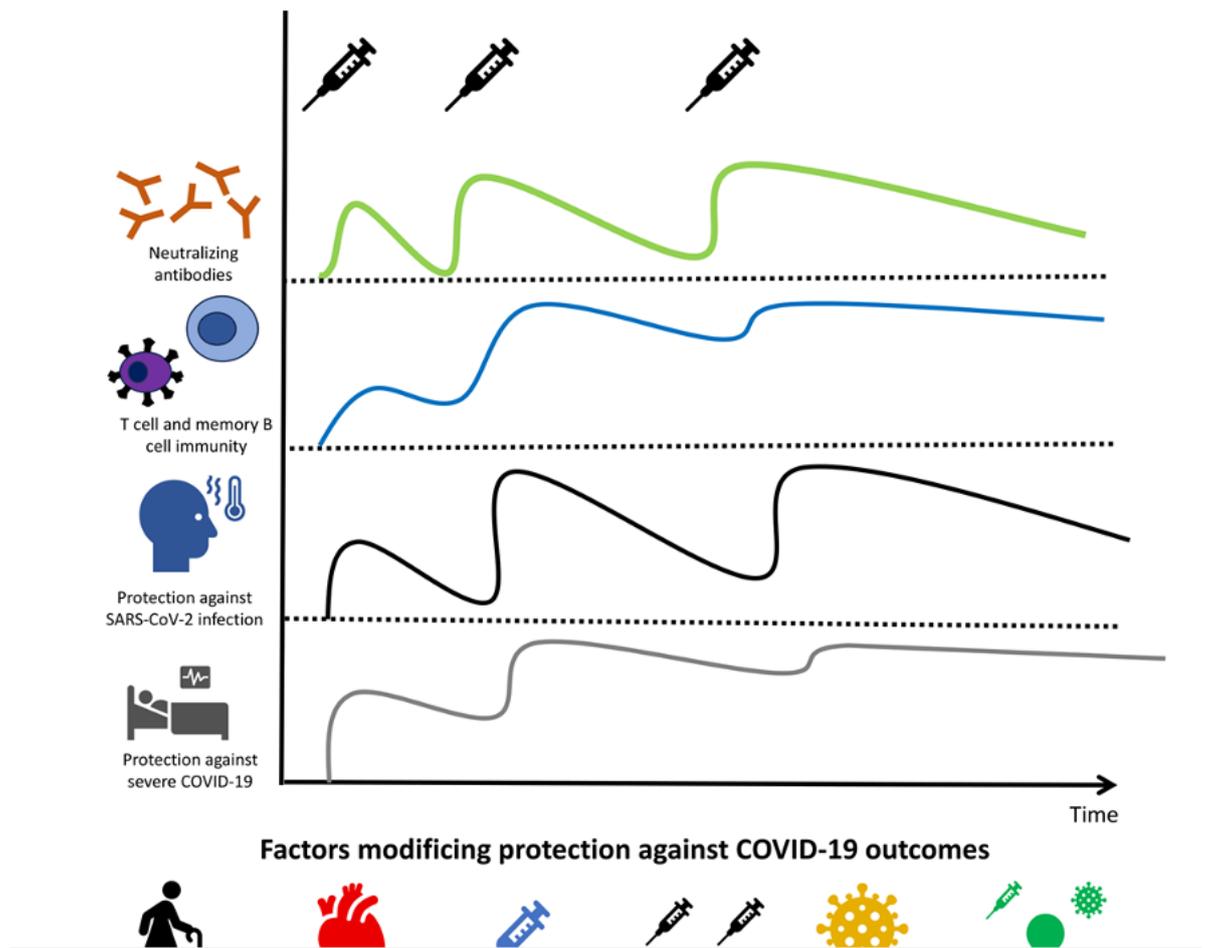
There are several scientifically obvious weaknesses in the methodology and reliability of the thesis, which are listed below:

1. The thesis is based on the scientifically incorrect assumption that COVID vaccines based on lipid nanoparticles, mRNA or DNA vector technologies are safe. Thousands of serious adverse reactions reported to FIMEA (Finnish Medical Agency) and described in detail in peer-reviewed medical publications confirm that COVID-19 vaccines are not safe.
2. The national safety data available from FIMEA or the safety concerns regarding adverse reactions reported in the medical literature were not included in the dissertation, which focuses on 'vaccine effectiveness'.

In Oxford learner's dictionary, 'effectiveness' means the quality of producing the desired or intended result, showing success in achieving goal, or working well to get what you want, like a drugs' effectiveness in curing illness or a strategy's effectiveness in solving a problem. It is about *result*, not necessarily the resources used to get them. A shorter definition is "as the fact of producing the result that is wanted or intended; the fact of producing a successful result."

Therefore, from an ethical perspective, the general approach of the thesis may lead to questionable conclusions about the overall benefit of the implemented mass vaccination.

3. The mortality database available from the National Information Center (which records deaths) was not used to calculate the all-cause mortality before and after initiation of mass vaccination.
4. The used classification method is misleading. Vaccinees (i.e., vaccinated persons) were considered unvaccinated for two weeks after the first dose of any vaccine and for one week after the second dose. This arbitrary vaccination status is likely to have led to highly biased results. Adverse events (including deaths) occur in this very short period after injections. This has been widely reported in peer-reviewed medical literature (see, e.g., [this](#)). Thus, many serious adverse events (including hospitalization) may have occurred within one or two weeks of vaccination, leading to distorted interpretation of vaccine effectiveness.
5. The classification of vaccinated individuals as unvaccinated controls is inconsistent throughout the research (five separate publications).
6. It should be noted that the relative effectiveness used in the thesis is not the same as absolute vaccine efficacy. This may contribute to biased results.
7. The scientific justifications for what have been presented is missing, as can be seen in the image below, for example. The graphs are drawn arbitrarily without reference to the existing data underlying them, as are the x and y axes without precise definition of what they represent. The immune response, the natural course of the disease, and the immune protection do not follow the curves presented in this simplified scheme. The defender has not described in the literature review why it is preferable to immunize instead of acquiring natural immunity.



## Final remarks

The opponent raised many of the above-mentioned points at the public defense and at the end asked very relevant questions, such as:

- Why was vaccine effectiveness (VE) lower in observational studies than in randomized controlled trials (RCTs)?
- Why does protection against infection wane faster than protection against severe disease?
- Did the vaccination program fulfil its objectives?
- Should the vaccination program have been stopped at age 18 or 30?
- Do we still need COVID-19 vaccination? If so, which groups would need vaccination?

## Conclusion

Based on the growing body of peer-reviewed medical literature, including the FDA's recent statement on dangers of COVID-19 vaccines, this thesis should not be accepted without significant revisions.

The scientific weaknesses listed above significantly weaken the reliability of the thesis. The shortcomings are structural rather than incidental. Section 6.1 on page 65 openly states that the motivation for this study was to "support decision-making", which is inconsistent with the reasonable goal of independent scientific research.

Conflicts of interest should also be checked under the Finnish Administrative Procedure Act (Section 28, Subsection 7 of the Administrative Procedure Act).

### **Signatories**

Nina Bjelogrić, MD, MSc (biochemistry), PhD (toxicology), specialist doctor in neurology with subspecialty in intellectual disability medicine and with an experience working for national and European regulatory bodies

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