

COMPLAINT TO OFCOM UNDER THE BROADCASTING CODE

Standards complaint concerning a BBC programme, following completion of the BBC First process

Programme	<i>Everything Is Fake (and Nobody Cares)</i> , Episode 5: 'Doctor's Orders'
Service	BBC Radio 4
Date of broadcast	8 April 2026
Complainant	David Keighley
BBC references	CAS-8372760-P5L5Y8; ECU CAS-8372760
BBC First status	Complete. Final BBC response: Executive Complaints Unit, 23 July 2026 (Jeremy Hayes, Complaints Director)
Code provisions	Rule 2.2; Rules 5.5, 5.7 and 5.9
Submission date	31 July 2026

1. Summary

On 8 April 2026, BBC Radio 4 broadcast, in the presenter's own scripted voice and as an unqualified statement of fact, the assertion that: 'As Dr Malhotra says, the paper he cites was peer-reviewed, but the authors were specifically told to make it clear this paper should not be used to make the kinds of claims Dr Malhotra is making.' [9] The statement concerned a peer-reviewed paper in the journal *Vaccine* (Fraiman et al., 2022) analysing serious adverse events in the Pfizer and Moderna trial data. [13]

No evidence has been produced that any such instruction was given. The BBC's Executive Complaints Unit has found that the assertion was 'an unverified claim', and the programme has been re-edited to remove it. The ECU nonetheless decided not to uphold the complaint on the grounds of either due accuracy or due impartiality. [11] Across the three stages of its complaints process, the BBC's explanation of the basis for the statement shifted. It moved from saying that the wording reflected the final paper, through an inference drawn from comparing two versions, to the ECU's disclosure that the inference originated with Dr Male and was acknowledged by her to be uncertain. Its Stage 1a assurance that a 'leading epidemiologist' had reviewed the episode before broadcast and confirmed the interpretation to be sound remains unexplained. [10][11]

There is a tension in that outcome. The BBC has altered the programme itself, a step the ECU expressly endorsed as appropriate, but also found that the original wording did not materially mislead the audience.

This complaint asks Ofcom to investigate whether the programme as broadcast breached the Broadcasting Code. It does not ask Ofcom to review or hear an appeal from the ECU's decision, which is not a function Ofcom performs; the ECU decision is relied upon as evidence of the broadcaster's own findings about its output.

I do not ask Ofcom to adjudicate on the underlying science, and I do not contend that due impartiality required the programme to give equal weight to Dr Malhotra's views. The complaint concerns the standard of verification the programme applied to a factual claim it broadcast in its own voice, and the editorial construction within which that claim did its work.

This submission is made on 31 July 2026, eight calendar days after the BBC's final response of 23 July 2026, and as soon as practicable following completion of the BBC First process. [12]

2. The statement complained of

Three features of the statement are material to the assessment.

- It was scripted and presenter-voiced. It was not attributed to any contributor, and was not framed as an inference, a possibility or an interpretation. A listener would reasonably have understood it as a fact the programme had established.
- It asserts an event, not a characterisation. 'Specifically told' describes an instruction given by identifiable people to identifiable people within a documented editorial process. It is independently capable of being true or false.
- It carries an imputation. The natural reading is that the paper's reviewers had expressly identified that use as contrary to the limitations of the study, and that Dr Malhotra was nevertheless continuing to rely on the paper in that way. That is a claim about conduct, not merely about evidential weight.

3. The BBC's evolving explanation

The account given of where the statement came from changed materially at each stage:

Stage	The BBC's account of the basis for the statement
Stage 1a	The wording 'reflects the final, peer reviewed version of the paper', which states that the study was not designed to evaluate the overall harm-benefit of vaccination programmes. A 'leading epidemiologist' had reviewed the episode prior to broadcast and 'confirmed the interpretation of the <i>Vaccine</i> study was sound and consistent with expert consensus'.
Stage 1b	The statement was 'based on a comparison of the pre- and post-peer reviewed versions of the paper'. 'It is not unreasonable to assume that changes made between the two versions were a requirement of the peer review process.' The external reviewer 'was asked to review the section of the programme relating to the <i>Vaccine</i> paper'.
Stage 2 (ECU)	The wording 'was based on Dr Male's interview with the presenter'. Dr Male, approached for comment, stated that she had assumed the peer reviewers requested the changes, but accepted that the authors may have decided independently and made them without being asked. The ECU concluded that the assertion is 'an unverified claim' and that its removal from the programme 'is appropriate'.

The final position is common ground: the statement was broadcast as fact; no evidence supporting it has been produced; its basis was an assumption; and the BBC has removed it. The ECU records that

‘it is evidently conceded that “the authors were specifically told to make it clear” is an unverified claim.’ [11]

The BBC’s explanation evolved as scrutiny increased, and that bears on the weight Ofcom can give the account now offered. The Stage 1a response did not answer the sourcing question: the published paper contains a scope caveat but says nothing about who requested it and therefore cannot itself establish that the authors were ‘specifically told’ to add it. Stage 1b then relied on a comparison of the two versions and the inference that the changes were a requirement of peer review, presenting that as the BBC’s own reasoning – ‘it is not unreasonable to assume’. The ECU later disclosed that both the comparison and the inference came from Dr Male, who accepted that an alternative explanation was possible. The complaints process therefore moved from a reference to the published wording to an acknowledged expert assumption.

I do not suggest that anyone set out to mislead. The point is narrower: the basis offered for the statement changed substantially, and the fullest account emerged only when the ECU approached Dr Male directly. That history makes the underlying production material important. Ofcom should obtain and assess that material directly, rather than rely solely on the ECU’s summary.

The sequence is difficult to reconcile with any pre-broadcast check having established the claim. Had documentary evidence been available to substantiate it, one would expect the BBC to have identified that evidence during the complaints process.

4. Why the broadcast materially misled the audience

4.1 It asserted an event, and the true position was materially different

The true position is unremarkable: a published paper contains a sentence noting the limits of its own design, written by its authors. The broadcast position was that an external party had intervened to require the authors expressly to state that the paper should not be used in that way, and that Dr Malhotra was nevertheless relying on it for precisely that purpose.

Those are materially different propositions. The broadcast suggested that the journal or its reviewers had already considered and rejected Dr Malhotra’s interpretation – and had required the authors to say so. That gave the criticism an appearance of independent confirmation which the evidence did not support. Ofcom should assess whether listeners were misled by the claim actually broadcast, not by a more defensible version constructed afterwards.

4.2 The verification process did not establish the claim

No evidence has been supplied that the programme checked the assertion with the paper’s authors, or against any peer-review correspondence, before broadcast. The BBC’s own final account identifies Dr Male’s comparison of two versions as the basis. Yet the proposition was directly verifiable from primary sources: the authors knew what they had been told, and the editorial correspondence existed.

Contemporaneous public material also pointed to the alternative explanation Dr Male ultimately conceded was possible. In a letter to the fact-checking organisation Full Fact dated 1 July 2022 – while the paper was still a preprint and before publication in *Vaccine* – the authors distinguished errors in media coverage of their work from errors in the work itself, and stated that in a future

revision they would more thoroughly emphasise what they were not addressing, did not do, did not show and did not claim, using a list of popular misinterpretations as their guide. [7]

That document does not prove that no reviewer subsequently made any related request but does establish two things. First, an author-initiated intention to add precisely this kind of scope-limiting language, attributed to media misinterpretation rather than to peer review, was already on the public record before publication. Second, it was readily accessible: the letter has been hosted on co-author Peter Doshi's University of Maryland faculty page alongside the preprint itself. It was therefore a primary source pointing to an author-initiated explanation for the later changes, and one which a reasonable attempt to verify the assertion could readily have discovered.

In a published article dated 27 April 2026, lead author Joseph Fraiman stated that no one gave the authors that instruction. [8] By the ECU stage, that first-hand account had not been answered with documentary evidence; instead, the BBC's source accepted that her own account was an assumption. In a programme devoted to distinguishing supported claims from unsupported ones, this verification failure is central rather than incidental.

4.3 The ECU assessed a proposition the programme did not broadcast

The ECU declined to uphold the complaint on the ground that the sentence would not have given 'a materially misleading impression about the standing of its findings'. But the sentence was not about the standing of those findings. It was about whether the authors had been specifically instructed during peer review. The ECU therefore answered a different question: instead of deciding whether that factual assertion was accurate, it considered whether listeners would nevertheless have received a broadly accurate impression of the paper's limitations and scientific standing. [11]

The ECU also referred to later randomised trials that did not reproduce the 2022 findings. That may be relevant to the scientific weight of the paper, but it does not answer the factual question raised by the complaint: were the authors specifically instructed during peer review? Nor can evidence introduced afterwards change what listeners understood from the original broadcast. Even if the programme's broader scientific conclusion was defensible, that does not make this particular factual assertion accurate.

4.4 Its placement made the error consequential

The sentence was not an incidental aside. It formed the bridge between Dr Male's methodological criticism and the programme's resolution of the dispute. The sequence was: Dr Malhotra's headline claim; the presenter's expression of concern; Dr Male's technical rebuttal; the assertion that the authors had been 'specifically told'; and the presenter's concluding question as to whether Dr Malhotra's central sentence was 'not actually correct'. [9]

The effect was compounded by what came next. Dr Male's immediate response was to quote the paper itself: 'They actually say, "Our study is not designed to evaluate the overall harm/benefit of the vaccine programme so far."' Placed directly after the presenter's assertion, that quotation could readily be understood as the sentence the authors had been instructed to insert. Listeners were given the paper's own caveat as evidence of the instruction. [9]

The unsupported assertion strengthened the rebuttal by suggesting that the paper's own authors and reviewers agreed that Dr Malhotra was misusing it. The BBC later removed that sentence while

leaving Dr Male's scientific criticism in place. This shows that the assertion was a separate factual claim, not simply a shorthand summary of the wider scientific argument. The question therefore remains whether listeners were misled when it was originally broadcast.

4.5 The asserted pre-broadcast expert review

At Stage 1a the BBC stated that a 'leading epidemiologist' had reviewed the episode before broadcast and confirmed that its interpretation of the study was sound and consistent with expert consensus. At Stage 1b it narrowed this: the reviewer had been asked to review the section of the programme relating to the *Vaccine* paper. [10]

The narrowing makes the scope of the review more relevant, not less, because the unverified assertion appeared in precisely that section. Either the review did not extend to the factual proposition about what the authors had been told, in which case the Stage 1a assurance was too broad to answer the complaint; or it did extend to it and failed to identify a categorical claim without a verified source. The ECU decision does not resolve this and does not address it.

The BBC has declined at every stage to identify the reviewer or describe what was placed before them. Ofcom can obtain the reviewer's identity, remit and advice in a way a complainant cannot.

4.6 The BBC acted on the error but did not uphold the complaint

There is a tension at the centre of the ECU's decision. It accepted that the claim was unverified and endorsed its removal as 'appropriate', while maintaining that the original broadcast did not materially mislead the audience.

Removal does not by itself determine whether Rule 2.2 was breached. It is nevertheless relevant evidence that the BBC could not substantiate the statement and did not consider it sufficiently reliable to remain in the programme. Ofcom should therefore consider the re-edit alongside the ECU's formal finding when assessing the effect of the original broadcast.

4.7 Removal is not correction

The re-edit prevents future listeners from hearing the statement, but it does not reach the audience that heard the original broadcast. So far as I am aware, no correction has been broadcast or published.

The result is that the unsupported statement has disappeared from the current version without listeners being told that the BBC later accepted it was unverified. The authors and Dr Malhotra have likewise received neither a published correction nor an upheld finding. The BBC's own accuracy guidelines state that serious factual errors should normally be acknowledged and corrected quickly, clearly and appropriately. [5]

4.8 Harm and the Rule 2.2 threshold

Rule 2.2 provides that 'factual programmes or items or portrayals of factual matters must not materially mislead the audience'. [1] I recognise that Ofcom's guidance to Section Two indicates the rule is directed at misleadingness capable of causing actual or potential harm or offence, assessed in context, rather than at inaccuracy in non-news output as such. [2]

The potential harm here arose from the programme's authoritative presentation of contested public-health evidence. The sentence gave listeners a categorical and apparently documented account of this particular peer-review process, although the BBC has produced no evidence that the alleged instruction was given and now accepts that the assertion was unverified.

The assertion was then used in resolving a dispute about the evidential basis for claims concerning vaccine risk. It therefore had the potential to distort listeners' assessment of the paper, the scientific review process and the reliability of the competing accounts presented to them. That risk was especially significant in a series devoted to misinformation, unsupported claims and the ways in which persuasive narratives acquire authority. The programme invited listeners to trust its own methods of verification and factual adjudication. Presenting an inference as an established event in that context risked reproducing the very failure of evidential discipline the *Everything Is Fake (and Nobody Cares)* series purported to examine.

5. Due impartiality

5.1 What is and is not argued

This is not a demand for equal time, equal weight, or endorsement of Dr Malhotra. The Code expressly does not require all views to be given equal weight, and a broadcaster is entitled to reflect the weight of established scientific opinion. [6] Dr Malhotra was heard at length, was treated courteously in places, and several of his concerns were acknowledged. Those features should be recognised.

What I say is that the programme applied different standards of proof to the two sides, and that its overall construction gave them different jobs. One side supplied the claims to be tested. The other supplied the authority that tested them.

I submit that the episode engaged matters relating to current public policy: NHS vaccination eligibility, government health data, the funding and independence of the MHRA, ministerial statements, party-political activity, and United States policy towards mRNA research. Rules 5.5, 5.7 and 5.9 are therefore engaged. [3]

5.2 Pre-framing and the search for 'the other story'

Over the past four episodes, I've been trying to understand how and why fakery has become so prevalent in modern life. And this is my chance to finally talk face to face with someone that the vast majority of the medical profession say is pushing fake information to millions of people – that the COVID vaccines are deadly.

– Jamie Bartlett, programme transcript [9]

That came before any evidence had been tested. After the interview, the presenter described the account as compelling and full of numbers, data and reports, but said that as he was not a doctor he needed someone who could tell him 'the other story'. Dr Male was then introduced as an Associate Professor of Reproductive Immunology at Imperial College London who had been involved in official efforts to collate data on COVID vaccination, and who spoke about 'the facts and the evidence'. She was thus positioned not merely as a further contributor but as the person who would provide the answer to the question the presenter had posed. [9]

5.3 A repeated adjudicative sequence

The concern arises from cumulative form rather than from any single challenge. The recurring movement was: claim/presenter uncertainty/expert rebuttal/presenter closure.

On the *Vaccine* paper, Dr Malhotra's harm-versus-hospitalisation statement was followed by the presenter's concern, Dr Male's methodological criticism, the unverified 'specifically told' assertion, and the presenter's question whether the sentence was 'not actually correct'. On institutional funding, the programme acknowledged concerns about pharmaceutical money and regulatory independence, then reframed the discussion as one about 'hidden plots and secretive motives of powerful companies' before the presenter's conclusion. [9]

Robust fact-checking is legitimate and necessary, and the complaint is not that the programme tested claims or reached conclusions. The concern is that the presenter repeatedly expressed uncertainty, turned to institutional experts to resolve it, and then adopted their position as the programme's conclusion. Yet the programme's own supporting assertion – that the paper's authors had been 'specifically told' not to use it in that way – was broadcast without equivalent verification.

5.4 Asymmetric language and the allocation of authority

As we've heard across this series, we've created a society that increasingly values stories, emotional truths, clear narratives, even if they're fake. I've listened carefully to both Aseem and Viki, and I'm sorry, Viki, but Aseem's stories about his personal experiences, about dodgy Big Pharma, about the corrupt medical and media elite, are just more exciting. It's a better story.

– Jamie Bartlett, programme transcript [9]

This was not a neutral summary of disagreement. It located one position within the series' category of emotional narrative and fakery, while the contrary position was associated throughout with facts, evidence, data, official work and the 'vast majority of the medical profession'. Rule 5.7 provides that views and facts must not be misrepresented, and Ofcom's guidance directs attention to whether content is skewed through editing or presentation in a way that undermines due impartiality. [3][4]

The question is not whether Dr Malhotra was heard. He plainly was. It is whether his evidential case survived being classified, in the programme's own narration, as 'a better story' rather than reliable evidence.

5.5 The presenter's conclusion

But now we're not arguing about the science anymore – we're arguing about hidden plots and secretive motives of powerful companies. And on the specific claims Aseem is making about the COVID vaccine, I don't think they're true.

– Jamie Bartlett, programme transcript [9]

Rule 5.9 permits presenters of non-news programmes to express their own views on matters relating to current public policy. The issue is therefore not whether Jamie Bartlett was entitled to state, 'I don't think they're true'. He was. The issue is whether, by the point at which he delivered that conclusion, Dr Malhotra's alternative viewpoint had been adequately represented in the programme or across an editorially linked series, as Rule 5.9 requires. [3]

The programme's closing credits describe it as 'written and presented by Jamie Bartlett', but the regulatory point does not depend on whether it was formally labelled an authored or personal-view programme. The substantive question is whether the alternative position was represented adequately and objectively rather than principally as material to be tested and dismissed.

The ECU relied on the fact that criticisms were reported back to Dr Malhotra for a reaction. That is relevant but not conclusive. What the programme broadcast of his response was a single sentence: 'Who is the scientist? Who's funding their department? Does their institution receive any funding from Pfizer and/or the Gates Foundation? And how much?' The programme then moved to the question of funding and did not return to the scientific criticisms. [9]

Adequacy depends on what was put to him, what he said in reply and how it was edited. It is not apparent from the programme or from the ECU decision whether the 'specifically told' allegation was among the points put to him at all. Ofcom should obtain the questions and the complete response rather than infer adequacy from the existence of a right of reply. [11]

5.6 Countervailing material does not remove the structural issue

The programme did include substantial criticism of traditional media and institutions. The presenter acknowledged that the BBC and others can ignore outside perspectives; that the possibility of a COVID laboratory leak was dismissed too quickly; that concerns about gender clinics and large-scale immigration were easier to avoid; and that the BBC had come to look as though it was trying to influence rather than reflect opinion. He also referred to the *Panorama* editing of President Trump's speech and the resignations that followed. This made the programme more nuanced than a simple attack on Dr Malhotra. [9]

However, these examples ultimately supported a broader argument: institutions may make mistakes, but they also possess mechanisms for correction and accountability which alternative media lack. That may be a legitimate distinction, but it does not answer whether Dr Malhotra's case was adequately represented as evidence rather than mainly framed as a compelling narrative.

5.7 The failure in accuracy intensified the impartiality concern

The two grounds are connected. The 'specifically told' assertion was not merely one more critical opinion: it was stated as fact, and it appeared to show that the paper's own authors and reviewers stood behind the programme's correction. Because that apparent confirmation was unverified, it strengthened one side's authority by means of a factual proposition that had not itself been tested.

The imbalance is therefore about evidence rather than airtime. Dr Malhotra's claims were attributed and checked. The claim used against him was neither, and has now been deleted. A programme that sets out to distinguish reliable claims from unreliable ones should apply to its own assertions the standard by which it judges others.

6. Why the ECU decision does not answer the complaint

6.1 Accuracy

The ECU accepted that the assertion was unverified but nevertheless did not uphold the complaint, relying on the paper's scope caveat, later studies and the broader validity of Dr Male's scientific

criticism. Those matters may be relevant to whether Dr Malhotra's interpretation was justified, but they do not answer the factual issue raised by the complaint: whether the BBC had evidence for telling listeners that the authors had been 'specifically told' during peer review not to use the paper in that way.

6.2 Impartiality

The ECU said that, because the episode centred on Dr Malhotra's claims, it was reasonable for the programme to present those claims and then subject them to expert scrutiny. It also said that science coverage does not require all views to receive equal weight, that including experts such as Dr Male was appropriate, and that the criticisms had been put back to Dr Malhotra for a response. None of those propositions is disputed.

The complaint concerned the cumulative operation of narration, sequencing, vocabulary and presenter verdicts: whether institutional opinion was not merely given due weight but installed as the programme's adjudicating authority; whether Dr Malhotra's position was adequately represented as an evidential argument rather than coded primarily as emotional narrative; and whether the unverified factual statement intensified that asymmetry. The ECU did not analyse those features under Rules 5.5, 5.7 or 5.9.

7. Material Ofcom is asked to obtain

A fair assessment would be assisted by material not available to the complainant. I ask Ofcom to obtain from the BBC:

- the programme as originally broadcast and as currently available, with the date of the re-edit and any internal correction record;
- the full Dr Male interview and production notes showing the source and precise wording of the 'specifically told' assertion, and whether it was her formulation or the production's;
- the pre- and post-peer-review versions relied upon, and any peer-review or editorial correspondence considered before broadcast;
- the identity, expertise, remit and advice of the external reviewer relied upon at Stage 1a, and the material placed before that person;
- the questions put to Dr Malhotra following Dr Male's interview and his complete response, so that the adequacy of the representation of his viewpoint can be assessed; and
- relevant editorial compliance, fact-checking or legal notes concerning the *Vaccine* paper, its authors, the disputed phrase and the programme's due-impartiality plan.

8. Determination sought

8.1 I ask Ofcom to investigate the programme as broadcast under Rule 2.2 and under Rules 5.5, 5.7 and 5.9.

8.2 Under Rule 2.2, I ask Ofcom to determine whether listeners were materially misled by the categorical presentation of an unverified inference about peer review, taking account of its placement in the programme, the expectations attaching to a Radio 4 factual current-affairs

investigation, the public-health subject, and the programme's declared purpose of helping listeners distinguish reliable claims from unreliable ones.

8.3 Under Section Five, I ask Ofcom to assess the programme as a whole: whether facts and views were misrepresented; whether due impartiality was preserved through the repeated claim, uncertainty, rebuttal and verdict structure; and whether the alternative viewpoint remained adequately represented after the presenter stated his own conclusion.

8.4 In assessing the significance of the BBC's remedial action, I ask Ofcom to take account of the fact that removing the statement from the available programme did not correct it for the audience that heard the original broadcast.

8.5 I also ask Ofcom, as part of its oversight of the BBC First process, to consider how the BBC's explanation changed across the three stages of the complaint, and why the scope and effectiveness of the claimed pre-broadcast expert review remain unclear. I do not present these matters as separate breaches of the Code. They are relevant because they affect the credibility of the BBC's defence and the adequacy of its handling of the complaint.

8.6 This complaint matters beyond a single phrase because the programme's subject was the boundary between evidence, plausible narrative and institutional authority. The BBC's own final complaints body has accepted that, at a decisive moment, the programme presented inference as a verified event. Whether that materially misled the audience, and whether it contributed to an editorial construction that failed to preserve due impartiality, are properly questions for Ofcom.

Appendix A – Selected programme extracts

These extracts are included to show sequence and context. They are not offered as a substitute for the complete transcript, which is available. [9]

Initial framing

Over the past four episodes, I've been trying to understand how and why fakery has become so prevalent in modern life. And this is my chance to finally talk face to face with someone that the vast majority of the medical profession say is pushing fake information to millions of people – that the COVID vaccines are deadly.

– Programme transcript

The programme seeks 'the other story'

After the interview, producer Tom and I go back through what we've heard. I have to admit his story did feel quite compelling. He was bombarding me with numbers, data, reports, quotes. The problem is, I'm not a doctor. What's fake? What's real? I'm not an expert. So to understand why Aseem is popular, I think I need to find someone who can tell me the other story.

– Programme transcript

The Vaccine paper sequence, in order

As Dr Malhotra says, the paper he cites was peer-reviewed, but the authors were specifically told to make it clear this paper should not be used to make the kinds of claims Dr Malhotra is making.

– Jamie Bartlett

They actually say, 'Our study is not designed to evaluate the overall harm/benefit of the vaccine programme so far.'

– Dr Viki Male

So, the sentence, 'You were two to four times more likely to suffer serious harm from the COVID vaccine than you were to be hospitalised with COVID ...'

– Jamie Bartlett

You were two to four times more likely to suffer serious harm from taking the COVID vaccine than you were to be hospitalised with COVID. Think about that for a second.

– Dr Aseem Malhotra (archive clip)

That sentence is not actually correct?

– Jamie Bartlett

The paper doesn't show that that's true.

– Dr Viki Male

Funding, motives and the presenter's conclusion

But now we're not arguing about the science anymore – we're arguing about hidden plots and secretive motives of powerful companies. And on the specific claims Aseem is making about the COVID vaccine, I don't think they're true.

– Programme transcript

Stories and emotional truths

As we've heard across this series, we've created a society that increasingly values stories, emotional truths, clear narratives, even if they're fake. I've listened carefully to both Aseem and Viki, and I'm sorry, Viki, but Aseem's stories about his personal experiences, about dodgy Big Pharma, about the corrupt medical and media elite, are just more exciting. It's a better story.

– Programme transcript

Authorship

Everything Is Fake and Nobody Cares was written and presented by me, Jamie Bartlett.

– Programme credits

Appendix B – Sources and documents

- [1] Ofcom Broadcasting Code, Section Two: Harm and Offence.
- [2] Ofcom Guidance Notes, Section Two: Harm and Offence.
- [3] Ofcom Broadcasting Code, Section Five: Due Impartiality and Due Accuracy.
- [4] Ofcom Guidance Notes, Section Five: Due Impartiality and Due Accuracy.
- [5] BBC Editorial Guidelines, Section 3: Accuracy.
- [6] BBC Editorial Guidelines, Section 4: Impartiality.
- [7] Fraiman J, Erviti J, Jones M, Greenland S, Whelan P, Kaplan RM, Doshi P, response to Full Fact, 1 July 2022, published at faculty.rx.umaryland.edu/pdoshi.
- [8] Joseph Fraiman, 'The Vaccine Safety Signal the Media Still Won't Read', Brownstone Institute, 27 April 2026.
- [9] BBC Radio 4, *Everything Is Fake (and Nobody Cares)*, Episode 5: 'Doctor's Orders', broadcast on Wednesday 8 April 2026 at 09:30 (programme ID m002styk); programme transcript and credits. The ECU decision gives 6 April 2026.
- [10] BBC Stage 1a and Stage 1b responses, reference CAS-8372760-P5L5Y8.
- [11] BBC Executive Complaints Unit decision, CAS-8372760, 23 July 2026.
- [12] Ofcom, Procedures for investigating breaches of content standards on BBC broadcasting services and BBC on-demand programme services.
- [13] Fraiman J et al. Serious adverse events of special interest following mRNA COVID-19 vaccination in randomized trials in adults. *Vaccine* 2022;40(40):5798–5805.

Additional evidence attached or available on request

- Original complaint to the BBC and subsequent request for escalation.
- BBC Stage 1a and Stage 1b responses.
- Executive Complaints Unit decision of 23 July 2026.
- Full transcript of Episode 5 and relevant extracts from the wider series.
- Authors' response to Full Fact, 1 July 2022.
- Joseph Fraiman's published account of 27 April 2026.
- The published paper and its pre-peer-review version.

Signed: David Keighley

Date: 31 July 2026