

Communication from Public

Name: Paulette Navarro

Date Submitted: 03/29/2022 10:43 AM

Council File No: 21-0878-S4

Comments for Public Posting: I am totally opposed to the ordinance "SafePass LA", the law that requires LA businesses to CHECK YOUR PROOF OF VACCINATION before access. It is totally unconstitutional to force people to get an injection and to force businesses to be the enforcers of the state. " CHECKING YOUR PAPERS IS REMINISCENT OF NAZI GERMANY" DO NOT DO THAT!

Communication from Public

Name: ROBERT LEVY

Date Submitted: 03/29/2022 10:55 AM

Council File No: 21-0878-S4

Comments for Public Posting: I am totally opposed to the ordinance "SafePass LA", the law that requires LA businesses to CHECK YOUR PROOF OF VACCINATION before access. It is totally unconstitutional to force people to get an injection and to force businesses to be the enforcers of the state. " CHECKING YOUR PAPERS IS REMINISCENT OF NAZI GERMANY" DO NOT DO THAT! I too am opposed to the ordinance "SafePass LA" It forces people to be injected, many against their will. This is against free choice and is against the American way of life. It is unconstitutional.

Communication from Public

Name: Ryan Hollander

Date Submitted: 03/29/2022 04:50 PM

Council File No: 21-0878-S4

Comments for Public Posting: I represent scores of local persons, friends and family who could not leave comment on this hideous attempt to implement tyrannical controls upon a free people. Shame on you for this disgraceful act. Do not proceed with this or any form of the same. We the people are watching and will seek damages against any and all politicians or public servants having a role in this or any other attempt to limit our constitutional freedoms. I remind you such acts are in direct violation of the Nuremberg code and you will be brought to answer for all such violations. Thanks very much. Sincerely, Ryan Hollander One of many concerned citizens

Communication from Public

Name: Steven F Clark
Date Submitted: 03/29/2022 05:06 PM
Council File No: 21-0878-S4

Comments for Public Posting: I vehemently appose passing this bill and can't believe you are still pushing people to take a vaccine with the huge amounts of death and side effects reported by Vaers and Pfizer! Let alone set up a "Show me your papers " App wich is so remenicient of Natzi Germany! There is so much evidence coming out about how bad these so called vaccines (the literal definition of what is considered a vaccine had to be changed to name it that) are causing especially to young people who statistically have a much greater chance of death or severe injury side effect from this jab than from covid 19 where they have a 99.995% chance of recovering from even with out treatment! And you will sheepishly put the burden of enforcing the ordinance on the people and small businesses of our community when this should NOT be their responsibility. At the very least they should have their own choice whether they require this or not ...not be forced and coerced into doing so! Please realize also that NONE of the so-called Vaccines that are available to use right now have been approved ...comernity is the only one and will not be out for a few years. It is still a gene therapy experiment! At the Nuremburg trial... those doctors, nurses, guards and other complicit people in the experimentation on innocent people.... were executed. Those rules were set down so that NO ONE would ever have to go through this again.... YOU are complicit if you go along with this illegal mandate! I suggest you make yourself informed about the Nuremburg trials and code:
<https://anti-vaccines.com/history-of-vaccine/nuremberg-code-of-1947/>
Many countrys and states have already stopped mandating the jabs and masks... sighting the fact that there are numerous studies that the masks are useless and the Jabs do more harm than good.... why is it that California is so behind? Many organizations like Americas Frontline Doctors, Children's health Defense and the World Doctors Alliance have been filing major lawsuits about the problems related to this vax and not to mention the strange nano chips and numerous toxins that are in this death shot that I would be arrested if it was known that I gave to my child! How long will it take for our beautiful state to recognise that we are being played big time by big Pharma and the mainstream propaganda machine to sell millions of unneeded meds only to make the likes of Bill Gates, George Soros, Dr fauci and the rest of big Pharma even more wealthy at the expense of our own health and that of our friends, neighbors and children.... the children is the worst crime of all. At the very least, in America, we should have the right to choose whether we take this experimental jab or not ...the ingredients are not even put on the box but they include: Graphene Oxide, mercury, aluminum, ethaline glycol (antifreeze) (all very toxic to human cells) and also tissue from aborted fetuses. NO INFORMED CONSENT HERE! Los Angeles being an apartheid city, where we are LITERALLY NOT PERMITTED to engage

in activities because we choose FREEDOM - whether or not we're vaccinated? "YOUR PAPERS PLEASE" can ONLY be responded to with a giant "ABSOLUTELY NOT. It is my sincere hope that you will make an informed decision in light of the above facts and vote NO on any mandates for C19. Sincerely, STEVE CLARK

A “SHOT” HEARD AROUND THE WORLD



INTRODUCTION

“A Shot Heard Around the World,” is a compilation of almost 500 references with citations predominately coming from original sources, scientific journals, medical journals, peer reviewed studies, lawsuit filings, original letters, and includes direct links to the CDC, FDA, clinical trials, and manufacturers’ own reports. In some categories, experts are warning there may be devastating problems with the mass inoculation policies. Because children are likely to be the next group authorized under the EUA, this stands as a warning to parents to be informed in your decision. It is extremely concerning for children to be next on the list in mass inoculation. For all medical decisions, informed consent is critical.

Let this compilation of hundreds of links, sources, and references, serve as a summary and launching pad for everyone’s own thorough investigation and research into the covid injections. Regardless, if someone has gotten one shot, two, or none, this information matters for all. In a time where information is being deleted, censored, banned, canceled, and withheld, many do not know where to find information to answer their questions. This summary is an essential resource. This can be shared with elected officials, school officials, employers, and others.

As an organization who watches over issues affecting children, we are greatly concerned.

The heart of this project is driven by the sole purpose to share important, even critical information with family, friends, and loved ones. Many of them do not know. The goal is to provide original source information from sources those searching, would see as credible and have a resource all in one place. The ultimate goal is not to tell any one person what to think, but instead allow them to think for themselves.

A “SHOT” heard around the world is symbolic for a historic global moment. A careful evaluation may give credence to the thousands of experts who have been censored, removed from online, targeted with removal of their licenses, as they lay it all on the line to get this information to the public. May we hear the “SHOT heard around the word” before our children are unnecessarily harmed.

*****Medical disclaimer:** *This pdf, information, resource list, and website information was created for informational purposes only and has no ties to any drug company or physician. The content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical condition. Never disregard professional medical advice or delay in seeking it because of something you have read on this website. In addition, no one involved in this website has financial ties to any of the suggested therapies. We are merely advocates of informed consent, open dialogue on all sides of an issue, and fight medical censorship.****

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OPERATING UNDER EMERGENCY USE AUTHORIZATION

Currently, no covid shots are approved or licensed, including Moderna, Pfizer, Johnson and Johnson, AstraZeneca, and 70+ others. Current ones in use are under EUA: Emergency Use Authorization and have specific conditions to adhere to under EUA.

Moderna: On December 18, 2020, the Moderna biological product was issued (EUA) status by the FDA. This is the first product they have ever brought to market. (the FD&C Act or the Act) (21 U.S.C. 360bbb-3). <https://www.fda.gov/media/144636/download> Page 1 <https://www.modernatx.com/covid19vaccine-cua/recipients/>

Pfizer: On December 11, 2020, FDA issued an EUA for the unapproved **biological** product, Pfizer-BioNTech COVID-19 Vaccine, for active immunization against COVID-19 in individuals 16 years of age and older. (Pfizer fact sheet)
<https://www.fda.gov/media/144412/download>
<https://www.fda.gov/media/144413/download> Page 1
https://www.fda.gov/media/144413/download?fbclid=IwAR00a48tUcKo-owxjGKeTk7y_SQjeryewJEZAVvBLv-3RYllpnTLQFY5WtQ

Johnson and Johnson: Although J&J has never brought a vaccine to market before, on February 27, 2021, the FDA issued an Emergency Use Authorization for use of Johnson and Johnson single dose vaccine.
<https://www.fda.gov/media/146303/download>
<https://www.fda.gov/media/146304/download>
<https://www.fda.gov/media/146305/download>

FULL LICENSURE EXPECTED IN 2022

Currently, under EUA (Emergency Use Authorization), even if the FDA rushes approval the soonest the Moderna and Pfizer/BioNTech experimental vaccines could be considered by FDA for full licensure (in adults only) is when the trials are expected to conclude, on October 27, 2022 and January 31, 2023, respectively. Neither Pfizer/BioNTech nor Moderna have completely disclosed everything in their vaccines, nor is full disclosure required by the FDA. [22] See e.g., *Lorillard Tobacco Co. v. Reilly*, 533 U.S. 525, 570-71 (2001)

PREVIOUS APPROVAL PROBLEMS

Previously from Moderna, "No mRNA drug has been approved in this new potential category of medicines, and **may never be approved** as a result of efforts by others or us. mRNA drug development has substantial clinical development and regulatory risks due to the **novel** and **unprecedented nature of this new category of medicines.**" <https://www.statnews.com/2017/01/10/moderna-trouble-mrna/>

"As a potential new category of medicines, no mRNA medicines have been approved to date by the FDA or other regulators. Adverse events in clinical trials of our investigational medicines or in clinical trials of others developing similar products and the resulting publicity, as well as any other adverse events in the field of mRNA medicine, or other products that are perceived to be similar to mRNA medicines, such as those related to gene therapy or gene editing, could result in a decrease in the perceived benefit of one or more of our programs, increased regulatory scrutiny, decreased confidence by patients and clinical trial collaborators in our investigational medicines, and less demand for any product that we may develop. Our large pipeline of development candidates and investigational medicines could result in a greater quantity of reportable adverse events..."

https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm#toc577473_6

BIOLOGICS APPLICATION REQUIRED

Currently, Pfizer, Moderna, J&J are under EUA. They are not FDA approved, nor licensed. J&J was just paused in the US due to serious blood clotting reactions, but then reinstated after short consideration. They are required to apply for a biologic application for full approval. **“Some of our investigational medicines are classified as gene therapies by the FDA and the EMA, and the FDA has indicated that our investigational medicines will be reviewed within its Center for Biologics Evaluation and Research, or CBER.”**

<https://www.fda.gov/vaccines-blood-biologics/development-approval-process-cber/biologics-license-applications-bla-process-cber>

<https://www.foxnews.com/health/pfizer-request-full-approval-coronavirus-vaccine-first-half-2021-fda>

https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm#toc577473_6
(Pg.26-27)

EUA ONSITE VISITS NOT REQUIRED, ONLY 2 MONTHS OF DATA REQUIRED

FDA does NOT have to do an onsite visit to the vaccine manufacturing facility before approval of the EUA. Also, it states that only 4 months of EUA may be required before full approval is given. Before emergency approval, FDA required only two month's of safety data.

<https://www.foxnews.com/health/pfizer-request-full-approval-coronavirus-vaccine-first-half-2021-fda>

SAFETY DATA ANALYZED AFTER 100 MILLION DOSES- MAY NOT BE IN PLACE UNTIL AFTER LICENSURE

Currently, a passive reporting system through the CDC called VAERS is in place to monitor adverse events. There are indications the system is overwhelmed with injury reports, backlogged, and not updated. It is not live, reporting and monitoring of adverse reactions. An active monitoring of adverse reactions/events will **NOT be in place until AFTER licensure of products, AFTER approval, and likely after 100 million+ people** have already received the doses. “In interviews, F.D.A. officials acknowledged that a promised monitoring system, known as BEST, is still in its developmental stages. They expect it to start analyzing vaccine safety data sometime *soon* — but likely not until *after* the Biden administration reaches its goal of vaccinating *100 million people*.”

In other words, there is NOT a system in place now to accurately capture the adverse reactions. 22 Side Effects listed in FDA documents. “Following authorization of the vaccine, use in large numbers of individuals may reveal additional, potentially less frequent and/or more serious adverse events not detected in the trial safety population”

https://www.fda.gov/media/143557/download?fbclid=IwAR1UxM_ZwbMfzLFbFCMci_DbU0fq-fqy1LjJEwxHpGkLTqN8kz1AaGx-h08 (p. 8, 9)

<https://www.openvaers.com/covid-data>

<https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>

<https://www.nytimes.com/2021/02/12/health/covid-vaccine-how-safe.html>

INJURY STORIES HERE

Evidence of Backlogging on reporting injuries to VAERS

US VAERS	5/21	262,521	(likely higher due to VAERS ID numbers skyrocketing)
UK Yellow Card	5/12	869,764	(suspected reactions)
Sweden	4/15	22,000	
Israel	3/21	See report	

*Note most people, including health care practitioners do not know about VAERS in the US. See note on Harvard evaluation of VAERS passive reporting system.

<https://drive.google.com/file/d/1uS4krGJX-7sa8fuRIH7mhod-Xa5ZBsXU/view>

<http://covidvaccinevictims.com/>

<https://www.openvaers.com/covid-data>
<https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting>
<https://raysahelian.com/covidvaccinesideeffects.html>

“EXPECTED HIGH VOLUME OF COVID-19 VACCINE ADVERSE DRUG REACTION”

UK-The MHRA contracted out an (AI) software tool to process the “expected high volume of Covid-19 vaccine Adverse Drug Reaction (ADRs).” 300,000 + Yellow Card Reported Injuries. (Pfizer, Moderna, AstraZeneca) **UK yellow cards reporting hundreds of thousand injuries below.**

<https://ted.europa.eu/udl?uri=TED:NOTICE:506291-2020:TEXT:EN:HTML&src=0>
<https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions/coronavirus-vaccine-summary-of-yellow-card-reporting>

EVIDENCE OF BACKLOGGING ON REPORTING INJURIES TO VAERS

Previous capacity of VAERS reporting system handled a few reported deaths a week and a few thousand a month. Currently, VAERS ID (unique identification numbers) have skyrocketed from December to now. Possibility of Hundreds of Thousand Adverse reactions in the US. Indicating 200,000 more injuries. GDIT posted positions to hire additional staff and professionals to report and code VAERS injury reporting. On March 8, CDC gave GD a budget supplement of \$16 million; GD is now hiring more “service representatives” to take reports and medical coders to review them... (Search job posting General Dynamics, which manages VAERS)

<https://twitter.com/alexberenson/status/1376280404513161227?s=21>

GOALS OF MANUFACTURERS TO GIVE THE MRNA VAX TO 6 MONTH OLD BABIES

Beginning trials on 6month-12 year old’s now. <https://www.statnews.com/2021/03/25/pfizer-and-biontech-to-begin-testing-covid-19-vaccine-in-children/>

SEE REAL TIME, LIVE ADVERSE EVENTS HAPPENING HERE:

(In the social media era, Put the link to injuries, real time, social media) **(100+ PAGES of live injury stories have been removed twice from internet access.)**

<http://covidvaccinevictims.com/>
https://drive.google.com/file/d/1YK0JR_lFy88Zu3rcC3L5NvL_Xr3ib6zY/view (Removed from Online)
<https://www.openvaers.com/covid-data>

UNDERREPORTING INJURIES

VAERS Underreporting. Disputes 1 in a Million claims. Recent JAMA reports injuries 50-120 Times more than VAERS and CDC reporting; 2.47/per 10,000 anaphylaxis reaction. Long discussed, but ignored, we need to reform the reporting system as it may hinder identifying safety issues with the new vaccines.

Documented insufficient system post surveillance, 30+decades of underreporting issues (See Lazarus Harvard Report pg. 6), VAERS system inefficacies; public officials continue to promote the inaccurate statement that “injuries are rare.” Red flags are emerging even without a real time reporting system in place.

<https://jamanetwork.com/journals/jama/fullarticle/2777417>
<https://digital.ahrq.gov/sites/default/files/docs/publication/r18hs017045-lazarus-final-report-2011.pdf>
<https://www.icandecide.org/wp-content/uploads/2020/12/Lazarus-report.pdf>

PHARMACO-VIGILANCE TRACKING SYSTEM

Where is the data? The Department of Defense of the federal government has contracted with tech giants, Google and Oracle to track vaccinated persons. In the document entitled “From the Factory to the Frontlines,” the Department of Health and Human Services (HHS) and the Department of Defense (DOD) stated that, because Warp Speed vaccine candidates use new unlicensed technology, “The key objective... is to determine each vaccine’s performance in real-life scenarios, to study efficacy, and to discover any

infrequent and rare side effects not identified in clinical trials...Robust analytical tools will be used to leverage large amounts of data and the benefits of using such data across the value chain, including regulatory obligations.” Where are the real-life studies and reporting? All we have seen is VAERS backlogged reporting system.

<https://www.thelastamericanvagabond.com/google-oracle-monitor-americans-who-get-warp-speeds-COVID-19-vaccine-for-two-years/>

INVESTIGATION OF ELDERLY DEATHS

Blood clots aren’t the only problem. Countries investigating elderly deaths after inoculation.

Countries around the world and different states are investigating and pausing the administration of the COVID vaccine, particularly to the elderly. Quick snapshot-

Norway (investigating 33+ deaths in elderly after getting vaccine)

Germany (investigating deaths after the vaccine)

China (at one point completely paused the vaccine for elderly)

UK (for a while paused on second dose after so many anaphylactic reactions)

Israel (see data on injuries)

Australia (health minister considering pause)

CA (about a month ago said there is a "hot batch" and are pausing 330,000 vials)

https://www.theepochtimes.com/deaths-of-elderly-who-recovered-from-covid-19-but-died-after-vaccine-raise-questions_3692259.html?utm_source=newsnoe&utm_medium=email&utm_campaign=breaking-2021-02-10-4

PRESCREENING REQUIREMENT

Patients should be screened prior to receipt of each vaccine dose, and those with a contraindication should not receive the shot. A [COVID-19 prevaccination questionnaire pdf icon\[6 pages\]](#) is available to assist with screening. CDC <https://www.cdc.gov/vaccines/covid-19/downloads/pre-vaccination-screening-form.pdf>
<https://www.cdc.gov/vaccines/covid-19/clinical-considerations/managing-anaphylaxis.html>

ALL VACCINES USED IN ISRAEL ARE FROM PFIZER: ISRAEL INJURY ANYALYSIS

Dr Hervé Seligmann works at the Emerging Infectious and Tropical Diseases Research Unit, Faculty of Medicine, Aix-Marseille University, Marseille, France. He is of Israeli-Luxembourg nationality. He has a B. Sc. In Biology from the Hebrew University of Jerusalem and has written over 100 scientific publications. Dr. Hervé Seligmann and engineer Haim Yativ through their research and data analysis claim that Pfizer's experimental shot causes "mortality hundreds of times greater in young people compared to mortality from coronavirus without the vaccine, and dozens of times more in the elderly, when the documented mortality from coronavirus is in the vicinity of the vaccine dose, thus adding greater mortality from heart attack, stroke, etc."

“Our analyses indicate orders of **magnitude increases in deaths rates** during the 5-week long vaccination process, as compared to the unvaccinated and those after completing the vaccination process.”

"The data in the table, rather than indicating the vaccine efficacy, indicate the vaccine's adverse effects," the authors conclude. There is a mismatch between the data published by the authorities and the reality on the ground. Compared to other years, mortality is 40 times higher.” An independent legal body that calls itself the Civilian Probe (CP)* published its finding regarding the catastrophic impact of the Pfizer vaccine on the nation.

<https://archive.ph/jiIVR>

<https://static1.squarespace.com/static/544680b5e4b0149c3cfddd3b/t/6059e7669fb7f95bb994f934/1616504728303/%D7%9E%D7%9B%D7%AA%D7%91+%D7%AA%D7%95%D7%A4%D7%A2%D7%95%D7%AA+%D7%94%D7%9C%D7%95%D7%95%D7%90%D7%99+%D7%A0%D7%95%D7%A1%D7%97+%D7%A1%D7%95%D7%A4%D7%99+%D7%9C%D7%94%D7%A4%D7%A6%D7%94+-+22-3-21.pdf>

ASTRAZENECA SAFETY SIGNALS IGNORED, NOT INCLUDED IN ADVERSE REACTION REPORTING

The AstraZeneca brand primarily being used in Europe and other countries was put on HOLD by up to 24 countries. WHY? In spite of the PR team for the manufacturing company saying it was safe and effective, the results showed a different story. On March 16, 2021, Luxembourg, Estonia, Lithuania, were 3 more countries added to the halt list. Other countries include Sweden, Norway, Denmark, Finland, and France (who limit shots to 55 year old's and above.) Safety concerns over AstraZeneca creating blood clots notable in women 25 and under. The UK has not paused it but has stated if you have a headache continually for four days post vaccination, they tell you to go get help. AstraZeneca is going to Africa and 92 other third world countries by the end of 2021. Under the umbrella of COVA X, who partners with WHO, GAVI, at least 29 million doses are in Italy waiting for shipment. Despite safety warnings, the United States is gearing up to authorize EUA status for the US. Even though officials have begun calling out AstraZeneca's misleading effective rate because they are using OLD data.

LIABILITY REMOVED FROM COVID MANUFACTURERS

The public has become increasingly aware that manufacturers of vaccines have not been liable for their products since 1986 and that our very own tax dollars pay for our own injuries. On February 4, 2020, according to the Centers for Disease Control (CDC) website, there were only 11 active CV cases, Yet the U.S. quietly pushed through Federal regulations giving coronavirus vaccine makers full immunity from liability. Although, these are new, investigational, and long-term consequences unknown, ALL manufacturers have indemnity. They are not liable for any harm, adverse reactions, death, etc. short-term or long-term.
<https://www.cnn.com/2020/12/16/covid-vaccine-side-effects-compensation-lawsuit.html>

NO LIABILITY DUE TO THE PREP ACT

The PREP Act allows covid vaccine manufacturers to create, develop, and market vaccines with zero liability. Manufacturers have been allowed to bypass animal studies and go directly to human trials. They also can add anything to the vaccine formula- whether it be a known toxin or carcinogen.
<https://www.phe.gov/Preparedness/legal/prepact/Pages/default.aspx>

EXPIRATION END OF 2024, BEYOND LIABILITY

This was put into the Federal Register in March of 2020 and “does not expire till the end of 2024. The consequences surpass liability. It also means that anything that is developed over the next four years that has to do with a biological agent, such as a vaccine or drug or biotechnology, is protected from liability under the umbrella of COVID-19.”

[Federal Register :: Amendment to Declaration Under the Public Readiness and Emergency Preparedness Act for Medical Countermeasures Against COVID-19](#)

BEFORE LIABILITY REMOVED LOSSES FOR MANUFACTURES

“We have incurred significant losses since our inception and anticipate that we will continue to incur significant losses for the foreseeable future.” “Risks related to the research, development, regulatory review, and approval of our existing and future pipeline.” “Preclinical development is lengthy and uncertain, especially for a new category of medicines such as mRNA, and therefore our preclinical programs or development candidates may be delayed, terminated, or may never advance to the clinic” “Clinical testing is expensive and complex and can take many years to complete, and its outcome is inherently uncertain.”
pg. 24 (Moderna 2018 Report) **mRNA medicines are a novel approach, and negative perception of the efficacy, safety, or tolerability of any investigational medicines that we develop could adversely affect our ability to conduct our business, advance our investigational medicines, or obtain regulatory approvals. Moderna was in debt \$1.5 billion dollars and the verge of bankruptcy before COVID.** (Why did they remove liability?)

https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm#toc577473_6

https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm#toc577473_6

COUNTERMEASURES INJURY COMPENSATION

The Countermeasures Injury Compensation Program (CICP) is a federal program [taxpayer funded] that has been created to help pay for related costs of medical care and other specific expenses to compensate people injured after use of certain medical countermeasures. Medical countermeasures are specific vaccines, medications, devices, or other items used to prevent, diagnose, or treat the public during a public health emergency or a security threat.

<https://www.fda.gov/media/144434/download>

<https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>:

ANIMAL STUDIES BYPASSED

These inoculations bypassed animal studies. Previously, for decades, they were not able to pass the animal studies due to pathogenic priming, cytokine storms, enhanced antibody dependence, and the inability to survive (in one ferret study, all of the ferrets died in the challenge phase) after vaccination when exposed to the wild virus (because of an altered immune system response.) Ferrets pg 17-18. Note the challenge results in the previous animal trials, including accelerated autoimmune issues.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3335060/>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7115540/> (ferrets)

https://www.jstage.jst.go.jp/article/jvms/advpub/0/advpub_18-0702/_pdf

<https://jvi.asm.org/content/jvi/87/12/6551.full.pdf>

<https://pubs.acs.org/doi/full/10.1021/acsinfecdis.6b00006>

<https://www.sciencedirect.com/science/article/pii/S1090023314001786>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7115629/>

<https://jvi.asm.org/content/jvi/85/23/12201.full.pdf>

FAILURE IN PREVIOUS ANIMAL STUDIES

Previously, coronavirus trials failed in animals. When animal trials were skipped in 1960, infants post vaccination got sicker when exposed to wild virus, including **80% of the vaccinated infants requiring hospitalization**. Review of previous trial outcomes. Caution due to disease enhancement, sicker, death, and lung diseases post vaccination in Ferrets, mice, civets, and other animals.

“the insufficient ability of our translational models to reduce risk or predict outcomes in humans, particularly given that each component of our investigational medicines and development candidates, may have a dependent or independent effect on safety, tolerability, and efficacy, which may, among other things, **be species-dependent**”

<https://www.nature.com/articles/s41579-020-00462-y#Sec11>

<https://www.frontiersin.org/articles/10.3389/fmicb.2018.02991/full>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC525089/>

<https://www.nature.com/news/2005/050110/full/050110-3.html#ref-CR1>

https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm#toc577473_6

<https://www.pnas.org/content/102/3/797>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3335060/>

<https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688?scroll=top&needAccess=true&>

<https://science.sciencemag.org/content/303/5660/944>

<https://www.reuters.com/article/us-rsv-shot/research-shows-why-1960s-rsv-shot-sickened-children-idUSTRE4BM4SH20081223>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3335060/>

<https://pubmed.ncbi.nlm.nih.gov/12810865/> (ADE mice)

<https://www.ncbi.nlm.nih.gov/pubmed/28817732> (White rabbits)

<https://pubmed.ncbi.nlm.nih.gov/19122397/> (feline)

<https://pubmed.ncbi.nlm.nih.gov/2154621/> (feline)

<https://pubmed.ncbi.nlm.nih.gov/6754243/> (feline in Dengue)

<https://pubmed.ncbi.nlm.nih.gov/17049691/> (hamsters)

<https://www.ncbi.nlm.nih.gov/pubmed/21937658> (Mice, increase lung inflammation on challenge)

<https://pubmed.ncbi.nlm.nih.gov/29029938/> (vaccine enhanced disease)

Kusters IC, Matthews J, Saluzzo JF. Manufacturing vaccines for an emerging viral infection – Specific issues associated with the development of a prototype SARS vaccine. In: Barrett ADT, Stanberry LR, editors. Vaccines for biodefense and emerging and neglected diseases. City: Elsevier; 2009. pp. 147–156



NO INDEPENDENTLY PUBLISHED ANIMAL STUDIES FROM MANUFACTURERS

“Most other previous vaccines have performed and published results on animal studies prior to being giving to humans. This is critical because deadly effects are often not seen until this step. Vaccines that have been given to humans prior to animal trials have frequently resulted in deaths that caused the governments to yank the vaccines. Most scientists believe that human death is inevitable if there are no prior peer-reviewed animal studies. We learn about these studies only from the company itself.”

<https://www.pfizer.com/news/press-release/press-release-detail/pfizer-and-biontech-announce-data-preclinical-studies-mrna>

https://assets.website-files.com/606d3a50c62e44338008303d/6076e4fd8bde421370729e47_Vaccine-PP.pdf (p.14)

PROBLEM WITH DENGUE VIRUS, EBOLA VIRUS, HIV, RSV, AND THE FAMILY OF CORONAVIRUSES

Virus amplification or enhancement of virus infection is a common problem in the coronavirus family. In some viruses, if a person harbors a non-neutralizing antibody to the virus, a subsequent infection by the virus can cause that person to elicit a more severe reaction to the virus due to the presence of the non-neutralizing antibody. This is not true for all viruses, only particular ones. This is called Antibody Dependent Enhancement (ADE), and is a common problem with Dengue Virus, Ebola Virus, HIV, RSV, and the family of coronaviruses. The problem of ADE is a major reason why many previous vaccine trials for other coronaviruses failed. Major safety concerns were observed in animal models. If ADE occurs in an individual, their response to the virus can be worse than their response if they had never developed an antibody in the first place.

“This can cause a hyperinflammatory response, a cytokine storm, and a general dysregulation of the immune system that allows the virus to cause more damage to our lungs and other organs of our body. In addition, new cell types throughout our body are now susceptible to viral infection due to the additional viral entry pathway. There are many studies that demonstrate that ADE is a persistent problem with coronaviruses in general, and in particular, with SARS-related viruses.”

<https://pubmed.ncbi.nlm.nih.gov/24182427/>

Antibody-dependent enhancement of virus infection and disease. Viral immunology, 16(1), 69-86.

<https://www.liebertpub.com/doi/abs/10.1089/088282403763635465>

"Antibody-dependent enhancement of viral infection: molecular mechanisms and in vivo implications."
Reviews in medical virology 13, no. 6 (2003): 387-398.

<https://onlinelibrary.wiley.com/doi/abs/10.1002/rmv.405>

Antibody-dependent SARS coronavirus infection is mediated by antibodies against spike proteins.

Biochemical and biophysical research communications 451, no. 2 (2014): 208-214.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7092860/>

https://lib.dr.iastate.edu/cgi/viewcontent.cgi?article=1075&context=vmpm_pubs (Ebola)

<https://pubmed.ncbi.nlm.nih.gov/27339099/> (zika)

<https://technology.inquirer.net/69907/pharma-firm-issues-caution-anti-dengue-vaccine-sanofi-dengvaxia-vaccine-health-dengue> (Pharma firm issues caution on use of anti-dengue)

<https://pubmed.ncbi.nlm.nih.gov/30410732/>

<https://www.rappler.com/nation/child-vaccination-rate-philippines-as-of-september-2018> (Dengue distrust in free vaccines post scare of Dengue outcome.)

<https://www.telegraph.co.uk/news/2018/02/05/philippines-immunisation-rates-plummet-amid-dengue-vaccination/> (Philippines)



ADE (ANTIBODY ENHANCEMENT) MORE SEVERE DISEASE

ADE(Antibody enhancement is a very serious paradox. This could mean that people who are vaccinated might, paradoxically, suffer more severe disease when exposed to the wild virus than if they hadn't been vaccinated. Direct from manufactures. "risk of vaccine-enhanced disease over time, potentially associated with waning immunity, remains unknown and needs to be evaluated further." The accurate incidence of ADE may never be known, as many cases will likely just be falsely described as a "new strain," "new variant," or "more severe strain" and new outbreaks attributed to those not vaccinated.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7311339/>

<https://academic.oup.com/cid/article-abstract/19/3/500/459343>

<https://academic.oup.com/cid/article-abstract/19/3/500/459343>

ENHANCED IMMUNE RESPONSE (PATHOGENIC PRIMING, ALSO CALLED CYTOKINE STORM)

Outspoken vaccine advocate, Dr Peter Hotez previously warned of potentially fatal consequences from skipping animal studies. "If there is immune enhancement in animals, that's a show-stopper". During the past decade, previous Coronavirus vaccines DID NOT pass the animal trials. Prior to the Emergency Use Authorization, Moderna was unable to bring to market through clinical trials an approved CV vaccine, despite billions of dollars invested into it. The ferrets tested in previous coronavirus animal trials all DIED when placed in a "challenge" round where they were exposed to the wild virus, after being vaccinated. ADE is

unique because it is a delayed reaction. "It has mainly been observed with positive-strand RNA viruses." Initially everything seems fine with the person having a great immune response but then becomes deadly when the person is exposed to the virus in the wild. The paradox is the inoculation is what AMPLIFIES the infection, possibly within months or years. This is why it must be ruled out in animal trials. Unfortunately, ADE is well known to be a risk for coronavirus-mediated infections, as well as dengue.

<https://www.liebertpub.com/doi/abs/10.1089/088282403763635465>

<https://onlinelibrary.wiley.com/doi/abs/10.1002/rmv.405>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7092860/>

<https://bmcproc.biomedcentral.com/track/pdf/10.1186/1753-6561-5-S1-P62?site=http://bmcproc.biomedcentral.com>

<https://europepmc.org/article/PMC/3837288>

<https://www.sciencedirect.com/science/article/pii/S1074761319303334>

<https://muse.jhu.edu/article/459161/pdf>

<https://jvi.asm.org/content/jvi/77/13/7539.full.pdf>

Takada, Ayato, Shinji Watanabe, Katsunori Okazaki, Hiroshi Kida, and Yoshihiro Kawaoka. "Infectivity-enhancing antibodies to Ebola virus glycoprotein." *Journal of virology* 75, no. 5 (2001): 2324-2330.

https://lib.dr.iastate.edu/cgi/viewcontent.cgi?article=1075&context=vmpm_pubs

Journal of General Virology 97, no. 7 (2016): 1489-1499.

https://www.microbiologyresearch.org/docserver/fulltext/jgv/97/7/1489_vir000468.pdf?expires=1591728632&id=id&accname=guest&checksum=5007EAF2D1FCFBE1C2DD06ED7D1C8FFE

BLOOD CLOTS

J & J was just paused in the US (4/13/2021), resumed (4/23/2021) for this very reason. The UK and 23+ other countries are seeing strong indicators of blood clotting (particularly in younger women). So much so, almost 24 countries at one point have paused the administration of the AstraZeneca vaccine. (while simultaneously still authorizing it to be sent to 3rd world countries!)

https://www.researchgate.net/profile/Andreas_Hocke/publication/6259977_Extracellular_RNA_Mediates_Endothelial_Cell_Permeability_via_Vascular_Endothelial_Growth_Factor/links/00463523c326a4024e0000000/Extracellular-RNA-Mediates-Endothelial-Cell-Permeability-via-Vascular-Endothelial-Growth-Factor.pdf

"Extracellular RNA constitutes a natural procoagulant cofactor in blood coagulation."

<https://www.pnas.org/content/pnas/104/15/6388.full.pdf>

HEART INFLAMMATION, HEADACHES, NEUROLOGICAL SYMPTOMS

A recent leaked report from the Israeli Health Ministry is investigating cases of "Myocarditis", heart inflammation in predominately men following their second dose of the Pfizer shot. In addition, a recent peer-reviewed journal reported other side effects/symptoms after receiving the shot.

<https://pubmed.ncbi.nlm.nih.gov/33053430/>

<https://www.health.com/condition/infectious-diseases/coronavirus/pfizer-vaccine-heart-inflammation-myocarditis>

POSSIBLE INCREASE ON AUTOIMMUNE DISEASES & CONTAMINANTS IN VACCINES

AUTOIMMUNITY LINK, CONTAMINANTS IN VACCINES

Dr. Vanessa Schmidt-Kruger, a Cell Biologist with over 20 years' experience in molecular medicine working at the Max Delbrück Center for Molecular Medicine gave a report on contaminants in the vaccines (which is in the EMA's Open Assessment Report), problems in the dosage of clinical trials, risks of LPNS, and long-term consequences of autoimmune disease.

“The BioNTech vaccine that is currently already being used is not highly purified, it contains contaminants of certain components...And finally if we have time I would like to talk about the long-term consequences relating to immune disease, that is an aspect that has not yet been discussed in public at all.”

http://enformtk.u-aizu.ac.jp/howard/gcep_dr_vanessa_schmidt_krueger/
<https://www.mdc-berlin.de/person/dr-vanessa-schmidt-kruger>

Potential Autoimmunity increase. Do COVID-19 RNA-based vaccines put at risk of immune-mediated diseases? In reply to “potential antigenic cross-reactivity between SARS-CoV-2 and human tissue with a possible link to an increase in autoimmune diseases.”

Clin Immunol. 2021 Mar; 224: 108665. Published online 2021 Jan 8. doi: 10.1016/j.clim.2021.108665

PMCID: PMC7833091, PMID: 33429060

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7833091/>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7246018/>

TOXICITY OVERLOAD, INSTABILITY IN THE BODY

Dr Suhab Siddiqi, Moderna’s Ex-Director of Chemistry, told CNN, “I would not let the [vaccine] be injected in my body. I would demand: Where is the toxicity data?” Potential toxicity is a problem.

BNT 162 B2 study had 78% CLASS 3 adverse events. It was an anti-cancer study that all studies were quoting as their "proof" that it was safe, despite that terrible result- of liver toxicity. The conclusion of the study was "generally safe," in spite of the study including terrible statistics as well as being a poorly powered study. In a cancer immunotherapy study, before covid, lots of toxicities are noted-especially when synthetic nucleosides are used. It’s particularly alarming that no blood is being drawn after a few months into the study. How will they detect immunological dyscrasias, or liver toxicity if no blood is drawn for abnormalities? They are testing antibody levels, but no longer a cbc, cmp or crp. after 60-80 days. This is likely a problem with a shot that already has precedence for liver toxicity.

HIV VECTOR INCREASE IN AIDS SUSCEPTIBILITY IN MEN

Liability free manufacturers claim DNA of a viral vector vaccine is carried within a harmless adenovirus. Veteran researchers raise a warning flag that it may not be “harmless.” This is very concerning for men in particular. 4 Veteran Researchers are raising a warning flag about COVID vaccines containing the Ad5 vector carrier and the correlation leaving people more vulnerable to the AIDS virus. “Additional exploratory studies suggest that Ad5 immune complexes activate the dendritic cell–T cell axis, which might enhance HIV-1 replication in CD4 T cells. Additionally, Ad5-specific CD4 T cells could have an increased susceptibility to HIV infection.” These are important red flags and indicators to watch for.

Lancet link: [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)32156-](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)32156-5/fulltext?fbclid=IwAR3NknTJTMJgrLHqvK96hJqsi56nzH37QrzQusJddmeDGetiSFpE0ssiEU)

[5/fulltext?fbclid=IwAR3NknTJTMJgrLHqvK96hJqsi56nzH37QrzQusJddmeDGetiSFpE0ssiEU](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)32156-5/fulltext?fbclid=IwAR3NknTJTMJgrLHqvK96hJqsi56nzH37QrzQusJddmeDGetiSFpE0ssiEU)

Another summary: <https://www.sciencemag.org/.../could-certain-covid-19...>

<https://www.cnn.com/2020/12/10/australia/australia-vaccine-hiv-intl-hnk/index.html>

SAFETY TESTING NOT PROPERLY DONE

After decades of failed animal trials, current trials have been conducted without an inert double-blind placebo-controlled environment, insufficient time to observe effects on the human subjects, numerous unknowns, no long-term studies, lead to serious safety concerns.

SAFETY AND EFFECTIVENESS QUESTIONS AND CONCERNS

“Vaccine safety requires proper animal trials and peer-reviewed data, neither of which has occurred during operation warp speed. This is especially concerning considering the fatal failure of prior coronavirus vaccine attempts such as SARS-CoV-1, the virus that is 78% identical to SARS-CoV-2 (COVID-19). Prior coronavirus (and other respiratory) vaccines have failed due to the scientific phenomena known as pathogenic priming that makes the vaccine recipient more likely to suffer a sudden fatal outcome due to massive cytokine

storm when exposed to the wild virus. In addition to pathogenic priming there are three other potential safety issues that are being minimized. While we are hopeful that the vaccine is both effective and safe, hope is not science. Because these experimental shots have not been tested in accordance with the usual standards, we have serious concerns about safety.” Moderna and J&J have never brought a vaccine to market before covid.
<https://raypeatforum.com/community/threads/implications-for-possible-consequences-of-covid-19-vaccines.38726/>

NO SAFETY FOR CHILDREN UNDER 18 YEARS OLD, ELDERLY OVER 85, OR IMMUNOCOMPROMISED

No data in clinical trials. “There are currently insufficient data to make conclusions about the safety of the vaccine in subpopulations such as children less than 18 years of age” “subgroups not yet studied in the clinical trial such as pregnant, immunocompromised and very elderly (>85 years of age) persons. ”

<https://www.fda.gov/media/144434/download>
[https://www.clinicaltrials.gov/ct2/show/study/NCT04665258:](https://www.clinicaltrials.gov/ct2/show/study/NCT04665258)
<https://www.fda.gov/media/144246/download>
<https://www.fda.gov/media/144413/download>

SHORT TERM SAFETY DATA WITHOUT A ROBUST MONITORING SYSTEM

With only limited short term safety data and absolutely no long-term safety studies, the proper length of safety study has not been done to ensure that any of these injections do not cause cancer, seizures, pathogenic priming, heart disease, reverse transcription, immune escape, fertility issues, allergies, and autoimmune diseases, as observed in earlier coronavirus animal studies. Because animal studies were bypassed, millions of humans are now the primary test animal. With only a passive injury reporting system, using a completely new mRNA technology that has never been licensed for human use, since viruses mutate frequently, we have absolutely no long-term knowledge of what to expect from these new injections. Previously rushed Dengue imprudence is noteworthy.

<https://www.biologicalmedicineinstitute.com/post/covid-19-mrna-vaccines>
[https://www.sciencemag.org/news/2019/04/dengue-vaccine-fiasco-leads-criminal-charges-researcher- Philippines](https://www.sciencemag.org/news/2019/04/dengue-vaccine-fiasco-leads-criminal-charges-researcher-Philippines)

TWO MONTHS OF IMMUNITY FROM SHOT

“We only have data to support 2 months.”

CDC notes that "observed outcome of vaccine efficacy at two months does not directly inform vaccine efficacy for any duration longer than two months." In other words, there is no way to know whether the vaccine is effective for any period longer than the time period it has been given to patients. CDC information on Pfizer vaccine: Fauci describes no long term immunity, does not prevent transmission, may lessen symptoms. From the clinical trials “As the interim and final analyses have a limited length of follow-up, it is not possible to assess sustained efficacy over a period longer than 2 months.”

<https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-12/slides-12-19/05-COVID-Clark-508.pdf>
<https://www.dailymail.co.uk/news/article-8884031/Dr-Fauci-warns-early-COVID-19-vaccines-prevent-symptoms-not-block-infection.html>
<https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>
<https://www.fda.gov/media/144246/download>
<https://www.fda.gov/media/144413/download>
<https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>

UNKNOWN: MUTATIONS, CO-INFECTION, TRANSMISSION, LONG-TERM EFFECT, STOPPING DEATH

UNKNOWN EFFECTIVENESS ON MUTATIONS OR CO-INFECTIONS

This has not been studied. “Additional evaluations will be needed to assess the effect of the vaccine in preventing asymptomatic infection” **Future vaccine effectiveness if there are mutations/changes in the virus, and/or potential effects of co-infections?** “Continued evaluation of vaccine effectiveness following issuance of an EUA and/or licensure will be critical to address these uncertainties.”

<https://www.fda.gov/media/144434/download>

<https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>:

<https://www.fda.gov/media/144246/download>

<https://www.fda.gov/media/144413/download>

<https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>

EFFECT ON TRANSMISSION UNKNOWN

See statements from Moderna and Pfizer’s own words. NIH..“the studies **aren’t** designed to assess transmission. They don’t ask that question and there’s really no information on this at this point in time.”

“Data are limited to assess the effect of the vaccine against transmission of SARS-CoV-2 from individuals who are infected despite vaccination....data from clinical trials and from vaccine use post-authorization will be needed to assess the effect of the vaccine in preventing virus shedding and transmission, in particular in individuals with asymptomatic infection.”

<https://www.fda.gov/media/144434/download>

<https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>:

<https://www.fda.gov/media/144246/download>

<https://www.fda.gov/media/144413/download>

<https://www.medscape.com/viewarticle/941388>

UNKNOWN EFFECTIVENESS AGAINST LONG-TERM EFFECTS OF COVID-19 DISEASE

There are only 2 months of data. “COVID-19 disease may have long-term effects on certain organs, and at present it is not possible to assess whether the vaccine will have an impact on specific long-term sequelae of COVID-19 disease in individuals who are infected despite vaccination.”

<https://www.fda.gov/media/144434/download>

<https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>:

<https://www.fda.gov/media/144246/download>

<https://www.fda.gov/media/144413/download>

UNKNOWN EFFECTIVENESS IN STOPPING DEATHS FROM COVID-19 DISEASE

“A larger number of individuals at high risk of COVID-19 and higher attack rates would be needed to confirm efficacy of the vaccine against mortality.” “The protocol had prespecified stopping rules that included monitoring of severe COVID-19 cases, and these stopping criteria were not met.”

<https://www.fda.gov/media/144434/download>

<https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>:

<https://www.fda.gov/media/144246/download>

<https://www.fda.gov/media/144413/download>

WARNING: RED FLAGS INNOCULATING PEOPLE WHO ALREADY HAD COVID

PREVIOUSLY HAVING COVID-CLINICAL TRIALS- NO DATA

Will the vaccine protect individuals previously infected with SARS-CoV-2? UNKNOWN

“Regarding the benefit of the mRNA-1273 for individuals with prior infection with SARS-CoV2, participants with a known history of SARSCoV-2 infection **were excluded from the Phase 3 study**...Thus, the study was not designed to assess the benefit in individuals with prior SARS-CoV-2 infection.”

<https://www.fda.gov/media/144434/download>

<https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>

<https://www.fda.gov/media/144246/download>
<https://www.fda.gov/media/144413/download>

WARNING: RED FLAGS INNOCULATING PEOPLE WHO ALREADY HAD COVID:

The clinical studies *excluded* participants who were previously infected. Dr. Hooman Noorchasm in a letter to Dr. Whelan, FDA's Janet Woodcock warns that Pfizer and Moderna must consider the danger COVID vaccines pose to the recently convalescent or asymptomatic carriers of SARS-CoV-2 — especially the elderly, frail or anyone with significant cardiovascular risk factors. Inoculating patients with occult SARS-CoV-2 infections or lingering viral antigens, is a clear and present potential danger to the health of these patients. In the case of vaccines, previous infected persons with Covid may be more at higher risk for allergic reactions and other adverse events. "Recently, or asymptotically, infected persons are very highly likely to be at risk of an exacerbated and dangerous hyper-inflammatory immune response when indiscriminately vaccinated — several cases of this complication in the recently infected and vaccinated have emerged over the past few weeks across the nation, including the deaths."

<https://noorchasm.medium.com/>
<http://fullmeasure.news/news/cover-story/cdc-investigation>
<https://www.regulations.gov/document/FDA-2020-N-1898-0246>
<https://noorchasm.medium.com/uregnt-fda-communication-catastrophic-blood-clot-risk-absent-medical-necessity-of-covid-19-a6bb35b806df>
<https://noorchasm.medium.com/a-letter-of-urgent-warning-to-the-university-of-notre-dame-president-rev-831f29535973>

HEAVIER PERIODS IN WOMEN

HEAVIER PERIOD POST VAX- WARNING: UNKNOWN IMPACT ON REPRODUCTIVE SYSTEM

25,000+ Women are now reporting to an Illinois research team, regarding abnormal changes and unusual occurrences in periods, menstruation, unregulated periods, bruising, bleeding, blood clots, 400% increase in miscarriages, etc. for both women receiving the shot and also reactions in women being in close proximity to recently inoculated persons. Possible speculation includes the protein spike is shedding from those who have received it and the implications on fertility and reproductive health are concerning, but unclear.

<https://www.dailymail.co.uk/femail/article-9446907/Some-women-report-heavier-painful-PERIODS-getting-COVID-19-vaccine.html>
https://madison.com/news/state-and-regional/abnormal-periods-after-covid-19-vaccine-university-of-illinois-professor-researching-reports/article_2de33962-9f32-5814-b805-c953758b9d61.html
<https://redcap.healthinstitute.illinois.edu/surveys/index.php?s=LL8TKKC8DP>
<https://twitter.com/KateClancy/status/1364671490772320259>
<https://montanadailygazette.com/2021/04/16/unvaccinated-women-report-miscarriages-after-interactions-with-vaccinated-people/>

ABNORMAL PHENOMENON ALARMING WOMEN

PHENOMENON OF BLEEDING AND CLOTTING

Phenomenon happening. Thousands of reports are coming in. Uncertain outcomes. It's so new, there is no data in clinical trials, or peer reviewed literature to explain it. Except for SAE (Secondary Adverse Events) reports.

<https://envirowatchrangitikei.wordpress.com/2021/04/25/six-doctors-discuss-the-phenomenon-of-bleeding-and-clotting-in-women-who-have-received-the-cv-injection/>

INVESTIGATION OF VACCINE (SAE) FROM SKIN OR INHALING BREATH

Separate from the clinical trial participants, reports into investigations into (SAE) serious adverse events from exposure to a vaccinated person, are kept in a separate study. “An occupational exposure occurs when a person receives unplanned direct contact with a vaccine test subject, which may or may not lead to the occurrence of an adverse event. These people may include health care providers, family members, and other people who are around the trial participant.”

“A female family member or healthcare provider reports that she is pregnant after having been exposed to the study intervention by inhalation or skin contact.”

“A male family member or healthcare provider who has been exposed to the study intervention by inhalation or skin contact then exposes his female partner prior to or around the time of conception.” (See 8.3.5.1, 8.3.5.3, p. 65-70)

https://media.tghn.org/medialibrary/2020/11/C4591001_Clinical_Protocol_Nov2020_Pfizer_BioNTech.pdf

FERTILITY, BREAST FEEDING, PREGNANCY

UK states shot should not be used by pregnant, breast-feeding mother, or children.

Fertility- Unknown “Animal studies do not indicate direct or indirect harmful effects with respect to reproductive toxicity (see section 5.3)” But alarmingly the guide has only one thing to say about the vaccine’s impact on fertility: they don’t know if it does or doesn’t. “It is unknown whether COVID-19 mRNA Vaccine BNT162b2 has an impact on fertility.”

Pregnancy- Unknown impact. “There is limited experience with use of the COVID-19 mRNA Vaccine BNT162b2 in pregnant women. Animal studies do not indicate direct or indirect harmful effects with respect to pregnancy, embryo/fetal development, parturition or post-natal development (see section 5.3).

Breast-feeding- Unknown impact. “It is unknown whether the COVID-19 mRNA Vaccine BNT162b2 is excreted in human milk.” “There are currently insufficient data to make conclusions about the safety of the vaccine in subpopulations such as... pregnant and lactating individuals” (MODERNA/PFIZER)

2 Months- Avoid pregnancy at least 2 months after shot. Unknown impacts. This means that it could take a relatively long time before a noticeable number of cases of post vaccination infertility could be observed. “women of child-bearing potential” can take part only if they are not pregnant or breastfeeding and are using contraception, it could take “a relatively long time before a noticeable number of cases of post-vaccination infertility could be observed.”

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/973884/Temporary_Authorisation_HCP_Information_BNT162_8_0_UK.pdf

http://virological.org/t/response-to-ncov2019-against-backdrop-of-endogenous-retroviruses/396https://2020news.de/wp-content/uploads/2020/12/Wodarg_Yeadon_EMA_Petition_Pfizer_Trial_FINAL_01DEC2020_EN_unsigned_with_Exhibits.pdf

Dr. Stephanie Seneff, an expert in protein synthesis who is a Ph.D. senior research scientist at MIT. “The potential for blood clotting disorders and the potential for sterilization are only part of the story. There are other potential long-term effects of these vaccines as well, such as autoimmune disease and immune escape, whereby the vaccines administered to immune-compromised people accelerate the mutation rate of the virus so as to render both naturally acquired and vaccine-induced antibodies no longer effective.” “This massive clinical trial on the general population could have devastating and irreversible effects on a huge number of people.”

<https://www.jennifermargulis.net/halt-covid-vaccine-research-scientist-urges-cdc/>

CONCERNS REGARDING THE FORMATION OF THE PLACENTA

Former Vice President of Pfizer's petition called for a halt to Phase 3 clinical trials of Pfizer's mRNA vaccine. Yeadon and Wodart warn that some of the vaccines may prevent the safe development of placentas in pregnant women, resulting in "vaccinated women essentially becoming infertile." In part due to the concern that if a woman's immune system starts reacting against syncytin-1, there is the possibility she could become infertile. Because the spike protein is derived from human endogenous retroviruses (HERV) and is responsible for the development of a placenta in mammals and humans. If the mRNA vaccine triggers your body to produce "antibodies against the SARS-CoV-2 spike protein, and spike proteins in turn contain syncytin-homologous proteins that are essential for various functions in your body, including the *formation of the placenta* in pregnant women." Previously infected covid-19 patients with the wild virus had placental problems. Dr. Jennifer Margulis describes concerns around spike proteins and the fertility issue as well.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/973884/Temporary_Authorisation_HCP_Information_BNT162_8_0_UK.pdf

<http://virological.org/t/response-to-ncov2019-against-backdrop-of-endogenous-retroviruses/396>

https://web.archive.org/web/20201209042033/https://2020news.de/wpcontent/uploads/2020/12/Wodarg_Yeadon_EMA_Petition_Pfizer_Trial_FINAL_01DEC2020_EN_unsigned_with_Exhibits.pdf

<https://jamanetwork.com/journals/jama/fullarticle/2765616>

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)30311-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30311-1/fulltext)

<https://www.jennifermargulis.net/halt-covid-vaccine-research-scientist-urges-cdc/>

XI. Several vaccine candidates are expected to induce the formation of humoral antibodies against spike proteins of SARS-CoV-2. Syncytin-1 (see Gallaher, B., "Response to nCoV2019 Against Backdrop of Endogenous Retroviruses" - <http://virological.org/t/response-to-ncov2019-against-backdrop-of-endogenous-retroviruses/396>), which is derived from human endogenous retroviruses (HERV) and is responsible for the development of a placenta in mammals and humans and is therefore an essential prerequisite for a successful pregnancy, is also found in homologous form in the spike proteins of SARS viruses. There is no indication whether antibodies against spike proteins of SARS viruses would also act like anti-Syncytin-1 antibodies. However, if this were to be the case this would then also prevent the formation of a placenta which would result in vaccinated women essentially becoming infertile. To my knowledge, Pfizer/BioNTech has not yet released any samples of written materials provided to patients, so it is unclear what, if any, information regarding (potential) fertility-specific risks caused by antibodies is included.

According to section 10.4.2 of the Pfizer/BioNTech trial protocol, a woman of childbearing potential (WOCBP) is eligible to participate if she is not pregnant or breastfeeding, and is using an acceptable contraceptive method as described in the trial protocol during the intervention period (for a minimum of 28 days after the last dose of study intervention).

This means that it could take a relatively long time before a noticeable number of cases of post-vaccination infertility could be observed.

XII. It appears that Pfizer/BioNTech have not yet released any samples of written materials provided to patients, so it is unclear what, if any, instructions/information patients/subjects were given regarding ADE and PEG-related issues and (potential) fertility- or pregnancy-specific issues.

LOWER SPERM COUNT FOR MEN DURING CLINICAL TRIALS:

Has not yet been studied but there are strong enough concerns that studies are being proposed. Sperm counts are lowered post vaccination. <https://www.clinicaltrials.gov/ct2/show/study/NCT04665258>

PFIZER CLINICAL TRIAL- DEFECTIVE DESIGN CLAIM

PFIZER APPROVAL BASED ON DEFICIENT, UNRELIABLE CLINICAL TRIAL DATA, DEFECTIVELY DESIGNED

Stating in a joint petition, accusations were made that the current study designs for the Phase II/III trials of BNT162b (“the Pfizer/BioNTech trial”) are inadequate to accurately assess efficacy, the designs of the clinical trials were faulty, flawed, and that the vaccines were NOT properly tested. Trials and widespread use of the product were based on misleading evidence, and therefore should not be recommended for widespread use. “Vaccine candidates were not designed to stop transmission of the virus, the public will suffer irreparable harm, the cases and non-cases were not accurate in the trial (using the faulty PCR test rather than a Sanger test and cross examining).” Dr. Yeadon claims the design trial and results are inaccurate and not appropriately designed to reduce transmission and reduction of COVID disease and deaths. “First, none of the leading vaccine candidate trials is designed to test if the vaccine can reduce severe COVID-19 symptoms, defined as: hospital admissions, ICU or death. And, second, the trials are not designed to test if the vaccine can interrupt transmission.”

“Design flaws include PCR tests that are identical to or modeled after what is sometimes called the “Drosten-Test” this can lead to false-positive results in trials designed such that PCR results are the primary evidence of infection.” The complaint asserts that without the assuring proper safety trials of the vaccines now, the people will not have the opportunity to object to receiving the vaccine based on deficient clinical trials later.

https://2020news.de/wp-content/uploads/2020/12/Wodarg_Yeadon_EMA_Petition_Pfizer_Trial_FINAL_01DEC2020_EN_unsigned_with_Exhibits.pdf

ONE SYMPTOM AND PCR DESIGN FLAW IN CASE DEFINITION IN CLINICAL TRIALS

" Evaluable cases consisted of a positive virological test [PCR test] plus at least one COVID-19 symptom... Fever • New or increased cough • New or increased shortness of breath • Chills • New or increased muscle pain • New loss of taste or smell • Sore throat • Diarrhea • Fatigue • Headache • Nasal congestion or runny nose • Nausea." “External peer review of the RTPCR test to detect SARS-CoV-2 reveals 10 major scientific flaws at the molecular and methodological level: consequences for false positive results.”

<https://www.fda.gov/media/144246/download>

<https://www.fda.gov/media/144413/download>

NO DATA IN CLINICAL TRIALS

Clinical trials were done on the “healthiest” subjects. There is no data to suggest safety or efficacy regarding: auto-immune conditions, cancer patients, immunocompromised individuals, 3 doses, repeated annual doses, safety in children under 18 or persons older than 55, pregnant or lactating mothers, fertility, transmission of covid, duration of protection or immunity from covid, mortality prevention from covid, long-term health impacts, interaction of different brands, interaction between other traditional vaccines, variants, and more.

<https://www.fda.gov/media/144245/download> (Pfizer pg 46-48)

<https://www.fda.gov/media/144434/download> (Moderna pg 46-48)

95% EFFICACY REPORTS IN CLINICAL TRIALS QUESTIONED

BMJ Questions 95% efficacy reports when reviewing the clinical trials. “3410 total cases of suspected, but unconfirmed covid-19 in the overall study population, 1594 occurred in the vaccine group vs. 1816 in the placebo group.” If these were accounted for, EUA qualifications would not have been met, causing the clinical trials to fall below 50% efficacy.

<https://www.fda.gov/media/144245/download#page=42> (pg 42 FDA report)

<https://blogs.bmj.com/bmj/2021/01/04/peter-doshi-pfizer-and-modernas-95-effective-vaccines-we-need-more-details-and-the-raw->

[data/?utm_source=feedburner&utm_medium=feed&utm_campaign=Feed%3A+bmj%2Fblogs+%28Latest+BMJ+blogs%29&g=w_bmj-com](https://blogs.bmj.com/bmj/2021/01/04/peter-doshi-pfizer-and-modernas-95-effective-vaccines-we-need-more-details-and-the-raw-data/?utm_source=feedburner&utm_medium=feed&utm_campaign=Feed%3A+bmj%2Fblogs+%28Latest+BMJ+blogs%29&g=w_bmj-com)

PFIZER FORMER VICE PRESIDENT YEADON PETITION REQUEST

His request was to pause all trials until vaccine efficacy is determined in the Phase 3 or 2/3 trials. One of the biggest reasons they cited was based upon the deaths of the ferrets in the prior SARS vaccine trials. They requested to confirm infection status with Sanger sequencing, given the high cycle thresholds of the PCR test used in some trials. If verified by Sanger sequencing, rather than PCR, that would confirm that the tested samples in fact contain a unique SARS-CoV-2 genomic RNA. This would remain consistent with the FDA requirements for a confirmed diagnosis of human papillomavirus (HPV) using PCR, the sequencing electropherogram must show a minimum of 100 contiguous bases matching the reference sequence with an Expected Value.

https://web.archive.org/web/20201209042033/https://2020news.de/wp-content/uploads/2020/12/Wodarg_Yeadon_EMA_Petition_Pfizer_Trial_FINAL_01DEC2020_EN_unsigned_with_Exhibits.pdf
<https://www.bmj.com/content/bmj/371/bmj.m4037.full.pdf>

GENEVA ETHICISTS SOUND THE ALARM ABOUT THE MRNA

For decades Geneva ethicists were concerned. It's actually more accurate to describe the new injections as gene therapy rather than a vaccine. Traditional vaccines stimulate the immune system through an antigen and adjuvant. Moderna plugs a small piece of coronavirus genetic code into human cells, attempting to "reprogram" the cells in the body. Previous to now, it has been called off by Ethicists. It was previously referred to as "germ line gene editing."

CONSIDERED GENE THERAPY FROM MODERNA & FDA

"Currently, mRNA is considered a gene therapy product by the FDA. Unlike certain gene therapies that irreversibly alter cell DNA and could act as a source of side effects, mRNA-based medicines are designed to not irreversibly change cell DNA; however, side effects observed in gene therapy could negatively impact the perception of mRNA medicines despite the differences in mechanism. In addition, because no product in which mRNA is the primary active ingredient has been approved, the regulatory pathway for approval is uncertain. The number and design of the clinical and preclinical studies required for the approval of these types of medicines have not been established, may be different from those required for gene therapy products or may require safety testing like gene therapy products. Moreover, the length of time necessary to complete clinical trials and to submit an application for marketing approval for a final decision by a regulatory authority varies significantly from one pharmaceutical product to the next and may be difficult to predict.

https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm#toc577473_6

GENETICALLY ENGINEERED RNA OR DNA, SEQUENCING IDENTIFIED

The new mRNA products through Pfizer, J&J, and Moderna are viral vector vaccines. Viral Vector use 50 billion adenovirus particles virus that have been **genetically engineered** to generate an artificial immune response. RNA and DNA vaccines use genetically engineered RNA or DNA to generate a protein that itself prompts an artificial immune response. It is unknown if the spike protein can be turned off. See the sequence discovered by Stanford University Scientists using left overs in shot vials.

Figure 2: Spike-encoding contig assembled from Moderna mRNA-1273 vaccine.



<https://www.the-scientist.com/news-opinion/scientists-reverse-engineer-mrna-sequence-of-moderna-vaccine-68640>

<https://github.com/NAalytics/Assemblies-of-putative-SARS-CoV2-spike-encoding-mRNA-sequences-for-vaccines-BNT-162b2-and-mRNA-1273/blob/main/Assemblies%20of%20putative%20SARS-CoV2-spike-encoding%20mRNA%20sequences%20for%20vaccines%20BNT-162b2%20and%20mRNA-1273.docx.pdf>

<https://berthub.eu/articles/posts/reverseengineering-source-code-of-the-biontech-pfizer-vaccine/>

GENETICALLY ENGINEERED AND INTRODUCE FOREIGN DNA AND RNA INTO CELLS OF THE BODY:

Introducing a non-human substances and foreign synthetic material (mRNA vaccines) have created instability in the body and ineffective delivery in the past. **Synthetic mRNA leads to instability in the body, possible toxicity.** In studies of mRNA vaccines it is described along with a comparison to DNA vaccines, **the greater inherent inflammatory nature of the mRNA vaccines is discussed for both its potential immunological utility for vaccines and for the potential toxicity.**

ProTherImmune, 3656 Happy Valley Road, Lafayette, CA 94549, USA

Vaccines 2019, 7(2), 37; <https://doi.org/10.3390/vaccines7020037>

https://www.mdpi.com/journal/vaccines/special_issues/advances_DNA_vaccines

A NEW FIELD CALLED EPITRANSCRIPTOMICS AND POSSIBLE ROLE IN CANCER

Epigenetic gene regulation is studied by examining dynamic modifications of DNA and proteins—so-called **epigenetic modifications**. The modifications can turn genes on or off without changing the underlying genetic code. Over the last five years, there has been an enormous increase in the amount of research into RNA modifications—a field called epitranscriptomics. ("Deciphering the epitranscriptome in cancer." Trends in cancer 4, no. 3 (2018): 207-221. "Epitranscriptomic signatures in lncRNAs and their possible roles in cancer." Genes 10, no. 1 (2019): 52.)

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5997933/>

<https://genomebiology.biomedcentral.com/articles/10.1186/s13059-017-1336-6?optIn=true>

POSSIBLE REVERSE TRANSCRIPTION PROBLEMS, RNA AND DNA- COMMON IN HIV

SARS-CoV-2 RNA reverse-transcribed and integrated into the human genome. Detection of reverse transcriptase activity in human cells. Here are samples of three nonmalignant and seven leukemic human cells that were examined for DNA polymerase activity that could be identified as RNA tumor virus reverse transcriptase. This is common in HIV retroviruses.

<https://doi.org/10.1101/2020.12.12.422516>

<https://www.ncbi.nlm.nih.gov/books/NBK19424/>

<https://pubmed.ncbi.nlm.nih.gov/87260/>

[https://www.jbc.org/article/S0021-9258\(20\)78303-1/fulltext](https://www.jbc.org/article/S0021-9258(20)78303-1/fulltext)

GENE THERAPY RISKS WITH ALTERING CELL DNA IRREVERSIBLY

Directly from the Moderna 2018 report. “In the EU, mRNA has been characterized as a Gene Therapy Medicinal Product... a clinical hold on gene therapy products across the field due to risks associated with altering cell DNA irreversibly may apply to our mRNA investigational medicines irrespective of the mechanistic differences between gene therapies and mRNA. Adverse events reported with respect to gene therapies or genome editing therapies could adversely impact one or more of our programs. Although our mRNA development candidates and investigational medicines *are designed* not to make any permanent changes to cell DNA, regulatory agencies or others could believe that adverse effects of gene therapies products caused by introducing new DNA and irreversibly changing the DNA in a cell could also be a risk for our mRNA investigational therapies, and as a result may delay one or more of our trials or impose additional testing for long-term side effects.

Pg.26-27

https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm#toc577473_6

1. Anti-PEG Antibodies

LIPID MODEL

LIPID CARRYING VECTOR

The lipid carrier (vector) is problematic= aids in vulnerability

The spike in protein interaction with PEG in the body. Causing allergic reactions. (Anaphylactic)

Immunologist Says the foreign, synthetic mRNA, creates significant instability in the body: (see sources in anti-PEG section.)

“Gene therapies and mRNA based medicines may activate one or more immune responses against any and all components of the drug product (e.g., the mRNA or the delivery vehicle, such as a lipid nanoparticle) (LNP) as well as against the encoded protein, giving rise to potential immune reaction related adverse events.

Eliciting an immune response against the encoded protein may impede our ability to achieve a pharmacologic effect upon repeat administration or a side-effect.” Page 22

https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm#toc577473_6

LIPID MODEL PREVIOUSLY PROBLEMATIC

Lipid nano particles can cross the blood brain barrier. It was never proved safe enough to test in humans, according to several former Moderna employees and collaborators who worked closely on the project. Covid 19 clinical trials for both Pfizer and Moderna show increased reactions, with repeated injections, increased inflammation due to Lipid Nano Particle model.

<https://www.statnews.com/2017/01/10/moderna-trouble-mrna/>

[https://pubmed.ncbi.nlm.nih.gov/29886842/#:%7E:text=Background%3A%20Brain%20is%20a%20delicate,Blood%20Brain%20Barrier%20\(BBB\).&text=Nevertheless%2C%20lipid%20nanoparticles%20are%20taken,because%20of%20their%20lipophilic%20nature.](https://pubmed.ncbi.nlm.nih.gov/29886842/#:%7E:text=Background%3A%20Brain%20is%20a%20delicate,Blood%20Brain%20Barrier%20(BBB).&text=Nevertheless%2C%20lipid%20nanoparticles%20are%20taken,because%20of%20their%20lipophilic%20nature.)

<https://pubmed.ncbi.nlm.nih.gov/30370619/>

LNP CROSSING BLOOD BRAIN BARRIER

Impact on CNS, Brain, and entering cells, watch for danger signals

<https://pubmed.ncbi.nlm.nih.gov/30370619/>

[https://pubmed.ncbi.nlm.nih.gov/29886842/#:%7E:text=Background%3A%20Brain%20is%20a%20delicate,Blood%20Brain%20Barrier%20\(BBB\).&text=Nevertheless%2C%20lipid%20nanoparticles%20are%20taken,because%20of%20their%20lipophilic%20nature.](https://pubmed.ncbi.nlm.nih.gov/29886842/#:%7E:text=Background%3A%20Brain%20is%20a%20delicate,Blood%20Brain%20Barrier%20(BBB).&text=Nevertheless%2C%20lipid%20nanoparticles%20are%20taken,because%20of%20their%20lipophilic%20nature.)

<https://pubmed.ncbi.nlm.nih.gov/18313785/>

<https://pubmed.ncbi.nlm.nih.gov/32116044/>

LIPID MODEL RISKS, mRNA TECHNOLOGY NEVER APPROVED, SAFETY ISSUES

Previous attempts at mRNA technology from Moderna resulted in troubling effects on the liver in animal studies. Just a few years ago, Moderna could not demonstrate that its technology can safely treat a disease. In their corporate prospectus⁹ released in 2018 at the time of their stock market launch, Moderna acknowledged that their LNPs carried risks. "No mRNA drug has been approved in this new potential category of medicines, and may never be approved as a result of efforts by others or us. mRNA drug development has substantial clinical development and regulatory risks due to the novel and unprecedented nature of this new category of medicines." Before COVID, the company was teetering on bankruptcy with \$1.5 billion debt.

"Gene therapies and mRNA based medicines may activate one or more immune responses against any and all components of the drug product (e.g., the mRNA or the delivery vehicle, such as a lipid nanoparticle (LNP)) as well as against the encoded protein, giving rise to potential immune reaction related adverse events.

<https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm>

<https://www.statnews.com/2017/01/10/moderna-trouble-mrna/>

[https://pubmed.ncbi.nlm.nih.gov/29886842/#:%7E:text=Background%3A%20Brain%20is%20a%20delicate,Blood%20Brain%20Barrier%20\(BBB\),&text=Nevertheless%2C%20lipid%20nanoparticles%20are%20taken,because%20of%20their%20lipophilic%20nature.](https://pubmed.ncbi.nlm.nih.gov/29886842/#:%7E:text=Background%3A%20Brain%20is%20a%20delicate,Blood%20Brain%20Barrier%20(BBB),&text=Nevertheless%2C%20lipid%20nanoparticles%20are%20taken,because%20of%20their%20lipophilic%20nature.)

<https://pubmed.ncbi.nlm.nih.gov/30370619/>

PEG ANAPHYLACTIC REACTIONS

PEG PROTEINS ARE A PROBLEM, SERIOUS ANAPHYLACTIC REACTIONS FOR SOME

CDC, Pfizer, UK knew allergic reactions were coming. It is important to note that individuals with a "history of severe adverse reaction associated with a vaccine and/or severe allergic reaction (e.g., anaphylaxis) to any component of the study intervention(s)" were **excluded** from Pfizer's clinical trials. [Study to Describe the Safety, Tolerability, Immunogenicity, and Efficacy of RNA Vaccine Candidates Against COVID-19 in Healthy Adults. Exclusion Criteria.](#)

['Very inconsistent': 2 allergic reactions in the UK to COVID-19 vaccine puzzle researchers, USA Today Dec. 9, 2020.](#)

[https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-](https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F%2F%2Finfo-by-product%2Fpfizer%2Fclinical-considerations.html)

[considerations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F%2F%2Finfo-by-product%2Fpfizer%2Fclinical-considerations.html](https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F%2F%2Finfo-by-product%2Fpfizer%2Fclinical-considerations.html)

<https://healthimpactnews.com/wp-content/uploads/sites/2/2020/12/CDC-05-covid-clark.pdf>

<https://www.fda.gov/media/144413/download>

https://jamanetwork.com/journals/jama/fullarticle/2777417?guestAccessKey=e4d454f9-7f06-42b5-81e1-0ea01d143ed3&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jama&utm_content=olf&utm_term=030821

ANTI-PEG ANTIBODIES (Allergic Reactions)

These mRNA vaccines are coated with PEGylated lipid nanoparticles (polyethylene glycol). Unfortunately, PEGylated lipid nanoparticles (which have been used for years in several drugs) have been shown to imbalance certain immune responses and can induce allergies and even autoimmune diseases. A majority of the population unknowingly have anti-PEG antibodies.

"While we have continued to optimize our LNPs, there can be **no assurance that our LNPs will not have undesired effects**. Our LNPs could contribute, in whole or in part, to one or more of the following: immune reactions, infusion reactions, complement reactions, opsonation reactions, antibody reactions including IgA, IgM, IgE or IgG or some combination thereof, or reactions to the PEG from some lipids or PEG otherwise associated with the LNP."

PEG antibodies may also reduce vaccine effectiveness. Pfizer/BioNTech is also inserting an ingredient derived from a marine invertebrate, mNeonGreen, into its vaccine. The ingredient has bioluminescent qualities, making it attractive for medical imaging purposes, but it is unclear why an injected vaccine would need to have that quality. mNeonGreen has unknown antigenicity.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4515207/>

<https://www.tandfonline.com/doi/pdf/10.1517/17425247.2012.720969>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5747248/>

[https://www.jacionline.org/article/S0091-6749\(15\)01667-X/fulltext](https://www.jacionline.org/article/S0091-6749(15)01667-X/fulltext)

<https://www.karger.com/Article/Abstract/233512>

<https://www.sciencedirect.com/science/article/abs/pii/S0168365907002428>

<https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm>

https://www.cdc.gov/vaccines/covid-19/clinical-considerations/managing-anaphylaxis.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F%2Fcovid-19%2Finfo-by-product%2Fpfizer%2Fanaphylaxis-management.html

IMMUNE ESCAPE, VIRAL VARIANTS

VACCINE INTERFERENCE CATASTROPHIC

While a virus is transmitting through the population, vaccination interference may cause catastrophic problems. “As mass vaccination campaigns have started in the vulnerable population, not only vaccinated subjects but also not yet vaccinated younger age groups will become a breeding ground for new infectious variants. There can be no doubt that continued mass vaccination campaigns will enable new, more infectious viral variants to become increasingly dominant and ultimately result in a dramatic incline in new cases despite enhanced vaccine coverage rates. There can be no doubt either that this situation will soon lead to complete resistance of circulating variants to the current vaccines.”

(33 Studies/Links: Peer Reviewed, Resources, Science Journals supporting immune escapes, NK cells, Innate Immune System, Vaccine Induced Immune Escape, Reduced Protection from Stronger Variants) https://37b32f5a-6ed9-4d6d-b3e1-5ec648ad9ed9.filesusr.com/ugd/28d8fe_1ca60c7d40d141b89dbf26c7afb9f50b.pdf

NATURAL AND VACCINE-INDUCED IMMUNE ESCAPE

Due to the intervention of mass inoculation, Immune pressure (immune escape), redirects the virus into the asymptomatic population, creating worse viral variants, and altering natural immunity. Interventions of vaccines create “Immune pressure” which causes virus adaptation, with new worse viral variants. Immune escape. Without vaccination interventions, the virus does not have this immune escape. Before vaccine intervention, the natural immune system was equipped to limit variants. Mass inoculation of vulnerable groups does not abrupt viral transmission chains but increasingly redirects transmission events to asymptomatic carriers. Evident in the form of having transformed “a quite harmless virus into an uncontrollable monster.”

<https://www.biorxiv.org/content/10.1101/2020.12.28.424451v1>

<https://science.sciencemag.org/content/371/6527/329>

<https://journals.plos.org/plosbiology/article?id=10.1371/journal.pbio.1002198>

doi: [https://doi.org/10.1016/S2468-2667\(21\)00036-0](https://doi.org/10.1016/S2468-2667(21)00036-0)

doi: [https://doi.org/10.1016/S0140-6736\(21\)00183-5](https://doi.org/10.1016/S0140-6736(21)00183-5)

<https://immunology.sciencemag.org/content/6/57/eabg6461>

doi: [https://doi.org/10.1016/S0140-6736\(21\)00468-2](https://doi.org/10.1016/S0140-6736(21)00468-2)

<https://www.sciencedirect.com/science/article/pii/S0092867421003676?via%3Dihub>

<https://www.the-scientist.com/news-opinion/will-delaying-vaccine-doses-cause-a-coronavirus-escape-mutant--68424>

[https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(21\)00036-0/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(21)00036-0/fulltext)

<https://science.sciencemag.org/content/371/6527/329>
<https://vancouver.sun.com/news/covid-19-cases-of-vaccine-resistant-variant-more-than-doubles-in-b-c>
<https://www.tagesspiegel.de/wissen/die-angst-vor-der-supermutante-was-wenn-kein-impfstoff-mehr-wirkt/27048992.html>
<https://www.nature.com/articles/s41591-021-01318-5>

VIRAL VARIANTS SIGNS OF IMMUNE ESCAPE, POTENTIAL FOR REINFECTION

The multiple emerging, “much more infectious” viral variants, are already examples of “immune escape” from our ‘innate immunity’, and were most-likely created by the government interventions. Variants emerging in conjunction with mass inoculation.

- Ongoing mass vaccination deployments are “highly-likely to further enhance ‘adaptive’ immune escape as none of the current vaccines will prevent replication/transmission of viral variants”
- As such, “The more we use these vaccines for immunizing people in the midst of a pandemic, the more infectious the virus will become”.
- “With increasing infectiousness comes an increased likelihood of viral resistance to the vaccines”.
- “One shouldn’t use a prophylactic vaccine in populations exposed to high infectious pressure (which is now certainly the case as multiple highly infectious variants are currently circulating)”.
- To “fully escape”, the highly mutable virus, “only needs to add another few mutations in its receptor-binding domain”.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7641391/>

doi : <https://doi.org/10.1099/jgv.0.001439>

<https://science.sciencemag.org/content/371/6527/329>

(Brazil) <https://www.bmj.com/content/373/bmj.n879>

(Indian) <https://www.thehindu.com/sci-tech/science/what-is-driving-the-second-wave-in-india/article34232390.ece>

(Turkey) <https://www.aninews.in/news/world/middle-east/turkeys-daily-covid-19-cases-hit-a-new-record20210402074805>

MORE DANGEROUS STRAINS POST VACCINATION

In 2001, research with poultry viruses led to the conclusion that low-efficacy vaccines could even promote the development of more dangerous virus strains. *Deutsche Welle*, January 26,

2021, <https://www.dw.com/en/coronavirus-the-dangers-of-weak-vaccines/a-56339759>

<https://www.biorxiv.org/content/10.1101/2021.01.18.427166v2.full.pdf>

VARIANTS MORE LETHAL AND MORE INFECTIOUS

- "Covid-19 cases have soared throughout Brazil in the past month and have been attributed to the spread of P.1, which is estimated to be 1.4-2.2 times more transmissible than previous variants. Growing evidence shows that young people are not only more likely to get infected with P.1 but also to die from it, some experts have warned. (...) Yet the increase is higher in regions where P.1 is more prevalent, suggesting that it is not only more transmissible but also more lethal. (...) P.1 appears to be more lethal among young men and women than the original strain." *British Medical Journal*, April 1,

2021, <https://www.bmj.com/content/373/bmj.n879> Unresolved Questions

<https://www.geertvandenbossche.org/unresolvedquestions>

VACCINE RESISTANT VIRUS

MASS INNOCULATION CREATES VACCINE RESISTANT VIRUS

Vaccinologist Geert Vanden Bossche calls for a halt to the mass vaccination program. He has written urgent letters to the WHO and others across the world. Geert Vanden Bossche, PhD, DVM, is a vaccine research expert. He has a long list of companies and organizations he’s worked with on vaccine discovery and preclinical research, including GSK, Novartis, Solvay Biologicals, and Bill & Melinda Gates Foundation. Dr

Vanden Bossche also coordinated the Ebola vaccine program at GAVI (Global Alliance for Vaccines and Immunization). He is board-certified in Virology and Microbiology, the author of over 30 publications, and inventor of a patent application for universal vaccines.

“It is, indeed, my interpretation of the science that ongoing mass vaccination campaigns will only drive the emergence of additional, more infectious variants as a result from selective immune escape and ultimately lead to full ant-vaccine resistance.” In the middle of a pandemic alters the natural immune system AND makes the virus mutate and eventually become vaccine resistant, more serious for children, and alters the body’s ability to respond. The problem centers in interfering with the natural immune system’s NK Cells ability to respond to other strains. He wrote his letter to the WHO about immune escape and enhancing the virus to dangerous levels. Based upon the findings of Professor Bieniasz’s team and those made by several other scientists, it can no longer be denied that selective immune pressure and will, therefore, selectively drive emergence of viral variants.

[https://37b32f5a-6ed9-4d6d-b3e1-](https://37b32f5a-6ed9-4d6d-b3e1-5ec648ad9ed9.filesusr.com/ugd/28d8fe_9fe5cca1171c48b29c6a3c5af4840c90.pdf)

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<https://www.pnas.org/content/102/3/797>

(Gert Slide Show Presentation Ohio) [https://37b32f5a-6ed9-4d6d-b3e1-](https://37b32f5a-6ed9-4d6d-b3e1-5ec648ad9ed9.filesusr.com/ugd/28d8fe_1ca60c7d40d141b89dbf26c7afb9f50b.pdf)

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(Gert response to criticism and questions) [https://37b32f5a-6ed9-4d6d-b3e1-](https://37b32f5a-6ed9-4d6d-b3e1-5ec648ad9ed9.filesusr.com/ugd/28d8fe_46f8422498b94078987c32f36bc82ba2.pdf)

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5ec648ad9ed9.filesusr.com/ugd/28d8fe_d4ac099217c547ba8213783697ad85c5.pdf

(Gert Interview and Videos) <https://www.geertvandenbossche.org/>

LOSS OF INNATE IMMUNE SYSTEM

LOSS OF NATURAL ‘INNATE’ IMMUNITY’ POSSIBLE CONSEQUENCE

Experts are “beyond worried”, that the humankind may severely damage it’s own, natural immune system because of the mass deployment of vaccination programs at this critical juncture. Our ‘innate’ immunity would be lost (a rich, variant-nonspecific, form of natural immunity).

It would also mean that vaccine-induced protection would be lost.

<https://dryburgh.com/byram-bridle-coronavirus-vaccine-concerns/>

<https://dryburgh.com/wp-content/uploads/2021/02/Bryram-Bridle-PlanB-2021-Slides.pdf>

(Gert Slide Show Presentation Ohio) [https://37b32f5a-6ed9-4d6d-b3e1-](https://37b32f5a-6ed9-4d6d-b3e1-5ec648ad9ed9.filesusr.com/ugd/28d8fe_1ca60c7d40d141b89dbf26c7afb9f50b.pdf)

5ec648ad9ed9.filesusr.com/ugd/28d8fe_1ca60c7d40d141b89dbf26c7afb9f50b.pdf

(Gert response to criticism and questions) [https://37b32f5a-6ed9-4d6d-b3e1-](https://37b32f5a-6ed9-4d6d-b3e1-5ec648ad9ed9.filesusr.com/ugd/28d8fe_46f8422498b94078987c32f36bc82ba2.pdf)

5ec648ad9ed9.filesusr.com/ugd/28d8fe_46f8422498b94078987c32f36bc82ba2.pdf

(Gert 11 page Summary) [https://37b32f5a-6ed9-4d6d-b3e1-](https://37b32f5a-6ed9-4d6d-b3e1-5ec648ad9ed9.filesusr.com/ugd/28d8fe_d4ac099217c547ba8213783697ad85c5.pdf)

5ec648ad9ed9.filesusr.com/ugd/28d8fe_d4ac099217c547ba8213783697ad85c5.pdf

(Gert Interview and Videos) <https://www.geertvandenbossche.org/>

(Gert letter to the who) [https://37b32f5a-6ed9-4d6d-b3e1-](https://37b32f5a-6ed9-4d6d-b3e1-5ec648ad9ed9.filesusr.com/ugd/28d8fe_266039aeb27a4465988c37adec9cd1dc.pdf)

5ec648ad9ed9.filesusr.com/ugd/28d8fe_266039aeb27a4465988c37adec9cd1dc.pdf

https://youtu.be/1_ksalhIi5c

<https://www.washingtonexaminer.com/news/study-covid-variant-pfizer-vaccinated-unvaccinated>

<https://science.sciencemag.org/content/early/2021/03/24/science.abg9175>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3291398/>

<https://www.medrxiv.org/content/10.1101/2020.12.18.20248447v1>

<https://www.nature.com/articles/s41392-021-00525-3>

DISRUPTING NK CELLS ABILITY TO ATTACK CONSTANT MUTATING VIRUS:

Intervention with a mass inoculation program, WHILE the virus is circulating has potentially dangerous problems. TK cells and NK cells are our bodies natural protectors. With the possibility of NK cells to acquire immunological memory. The wild virus is constantly mutating. Our body is designed for a general immune response to wild infection, where you will make antibodies that are not totally specific but can protect against a wider range of changes that occur in nature. They are capable of recognizing and attacking a broad and diversified spectrum of pathogenic agents, including mutations. If this natural innate immune system is disrupted or programmed through slight alterations, it no longer may be able to recognize and attack variants or mutated strains. The shot may program your body to create specific antibodies, but may not hit the mutated strains, leaving you to think you are protected but you may not be. (mRNA programs the body for only focused set, while the virus continues to mutate, and the body is now at a disadvantage.)

<https://journals.plos.org/plosbiology/article?id=10.1371/journal.pbio.1002198>

WARNING FROM EXPERTS AROUND THE GLOBE

ADDITIONAL EXPERT VOICE CONCERN OF IMMUNE ESCAPE, VACCINE RESISTANT VARIANTS, INNATE IMMUNE SYSTEM, RETROVIRUSES, VACCINE INDUCED MORE INFECTIOUS VARIANTS, IMMUNE ESCAPE-REDUCED VACCINE EFFECTIVENESS, AND LACK OF PROTECTION

Paul Bienasz "Rolling out a partially effective vaccine regime in the peak of a highly prevalent viral epidemic is just not a great idea if one of your goals is to avoid vaccine resistance (...) There's a chance, (...) that people waiting for their second dose may have a sub-optimal level of immunity that places selective pressure on the virus. If someone were to become infected during the interval between jabs, that pressure could allow for the emergence of a mutant version of SARS-CoV-2 able to shake off a person's immune response — a so-called escape variant. Any such variant that also proved capable of causing severe disease could potentially spark a whole new, devastating wave of infections and deaths." PhD, Howard Hughes Medical Institute/Rockefeller University, New York, February 10, 2021.

Viola Priesemann (PhD, Max Planck Institut, Göttingen) According to Viola Priesemann, (PhD, Max Planck Institut, Göttingen) new Coronavirus variants capable of escaping vaccine-induced immune protection could develop. Such immune escape variants can particularly develop in places where many people are vaccinated on a background of a high incidence rate. In a worst case scenario, this would require to restart vaccinations from scratch. - March 25, 2021 - RND /ARD.

Theo Dingermann "Mutants also occur in the absence of selection pressure. However, selection pressure substantially increases if the reservoir for the virus is drying up. In this regard, Mr. Vanden Bossche is absolutely right." PhD, Goethe Universität Frankfurt, March, 2021 .

Byran Bridle "Although Geert gets there by a slightly different route, we both end up at the same conclusion: that current design of the vaccines and the way they are being rolled out creates risk of the emergence of immuno-evasive variants. (...) I can guarantee that he knows what he is talking about." - (PhD, Ontario Veterinary College, University of Guelph, Canada) March 19, 2021. Career vaccine developer, Viral Immunologist.

<https://dryburgh.com/byram-bridle-coronavirus-vaccine-concerns/>

<https://dryburgh.com/wp-content/uploads/2021/02/Bryram-Bridle-PlanB-2021-Slides.pdf>

Andrew Read "But new findings from the British government's "New and Emerging Virus Threats Advisory Group" suggest that the variant first discovered in the UK might not just be up to 70 percent more contagious, but perhaps deadlier as well. There's not enough data to prove this yet, though. (...) When weak

vaccines are used, however, or the second dose is delayed for too long, the vaccine has the exact opposite of the desired effect. In 2001, his research with poultry viruses led him to the conclusion that low-efficacy vaccines could even promote the development of more dangerous virus strains. -Pennsylvania State University virologist, *Deutsche Welle*, January 26, 2021, <https://www.dw.com/en/coronavirus-the-dangers-of-weak-vaccines/a-56339759>

Björn Meyer "We can't really put a number on it," a virologist at the Pasteur Institute in Paris, referring to the risk of delayed dosing leading to the evolution of an escape variant. Every time the virus replicates there is a chance that it could mutate into a more transmissible or more deadly form. In a single individual, the odds of this happening are vanishingly small but the picture changes somewhat when you consider that tens of millions of people are currently waiting for their second dose." *The Scientist*, Feb. 4, 2021, <https://www.the-scientist.com/news-opinion/will-delaying-vaccine-doses-cause-a-coronavirus-escape-mutant--68424>
<https://journals.plos.org/plosbiology/article?id=10.1371/journal.pbio.1002198>
<https://immunology.sciencemag.org/content/6/57/eabg6461>
<https://www.thehindu.com/sci-tech/science/what-is-driving-the-second-wave-in-india/article34232390.ece>
<https://www.aninews.in/news/world/middle-east/turkeys-daily-covid-19-cases-hit-a-new-record20210402074805>

Laetitia Atlani-Duault, Bruno Lina, Franck Chauvin, Jean-François Delfraissy, Denis Malvy, "If substantial immune evasion occurs, current vaccines are likely to still offer some benefit to individuals. At the population level, however, they could induce viral selection and escape. (...) This virological game changer has numerous consequences, not only for vaccines and treatment, but also for prevention and control strategies. The fervently awaited end of this global health crisis might be continually postponed, as new variants emerge and immune evasion reduces vaccination effectiveness in the short and medium term. (...) We scientists working against COVID-19 must have the courage to address those in power, who bear ultimate responsibility for the policies chosen and their consequences. If this responsibility is shirked or delayed, the inevitable day of reckoning might be terrible." -*Members of the French COVID-19 Scientific Council*, in *The Lancet*, Feb. 18, 2021, [https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(21\)00036-0/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(21)00036-0/fulltext)

Salim S Abdool Karim "Immune-escape variants have raised concerns about the effectiveness of vaccines as the world scales up SARS-CoV-2 immunization. (...) New variants, especially 501Y.V2 (B.1.351), which escape natural-induced and vaccine-induced immunity, have created uncertainty on whether the vaccines are effective in preventing both mild and severe COVID-19." *The Lancet, Vaccines and SARS-CoV-2 variants: the urgent need for a correlate of protection*, March 22, 2021, [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(21\)00468-2/fulltext?fbclid=IwAR1K_tzlvBP4_yJ95jnpsj0yBxqjClZrcEQDemR5xMA64HopMZMmSV1JkKw](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00468-2/fulltext?fbclid=IwAR1K_tzlvBP4_yJ95jnpsj0yBxqjClZrcEQDemR5xMA64HopMZMmSV1JkKw)

Kai Kupferschmidt "But now, they're also focusing on a potential new threat: variants that could do an end run around the human immune response. Such "immune escapes" could mean more people who have had COVID-19 remain susceptible to reinfection..." - *Science*, Jan. 22, 2021, <https://science.sciencemag.org/content/371/6527/329>

"The P1 variant is especially concerning because it contains a mutation that makes it both highly contagious and more resistant to the antibodies produced from vaccines and previous coronavirus infections. It has the potential to infect people who have been vaccinated and even reinfect people who have had COVID-19. (...) It is concerning because this is a variant that we've seen be very destructive in Brazil and there is concern about the effectiveness of vaccines." - *The Vancouver Sun, 'Cases of vaccine-resistant variant more than doubles in B.C.'* - March 28, 2021, <https://vancouversun.com/news/covid-19-cases-of-vaccine-resistant-variant-more-than-doubles-in-b-c>

Dr. Stephanie Seneff, an expert in protein synthesis who is a Ph.D. senior research scientist at MIT. “The potential for blood clotting disorders and the potential for sterilization are only part of the story. There are other potential long-term effects of these vaccines as well, such as autoimmune disease and immune escape, whereby the vaccines administered to immune-compromised people accelerate the mutation rate of the virus so as to render both naturally acquired and vaccine-induced antibodies no longer effective.” “This massive clinical trial on the general population could have devastating and irreversible effects on a huge number of people.”

<https://www.jennifermargulis.net/halt-covid-vaccine-research-scientist-urges-cdc/>

Chancellery Chief Helge Braun “Will a third pandemic wave enhance circulation of viral mutants? This is what Chancellery Minister, Helga Braun (CDU), has been warning against. If infectivity rates show a steep rise despite ongoing vaccination campaigns, there will be an increased risk that a new virus mutant resists the vaccine, as Braun told “Bild am Sonntag”. In case of a such mutation, we would be standing here empty-handed,” *Der Tagesspiegel*, March 29, 2021, <https://www.tagesspiegel.de/wissen/die-angst-vor-der-supermutante-was-wenn-kein-impfstoff-mehr-wirkt/27048992.html>

Delphine Planas, Timothee Bruel, Oliver Schwartz, “Thus, faster-spreading SARS-CoV-2 variants acquired a partial resistance to neutralizing antibodies generated by natural infection or vaccination, which was most frequently detected in individuals with low antibody levels. Our results indicate that SARS-CoV-2 variants may increase the risk of infection in immunized individuals” - “In conclusion, our results demonstrate that suboptimal or declining antibody responses are associated with a loss of cross-reactivity against novel emerging viral strains.” *Nature Medicine*, March 26, 2021, <https://www.nature.com/articles/s41591-021-01318-5>

“These data highlight the prospect of reinfection with antigenically distinct variants and foreshadows reduced efficacy of spike-based vaccines” - March 1, 2021, <https://www.biorxiv.org/content/10.1101/2021.01.18.427166v2.full.pdf>

Dr. Sucharit Bhakdi, World-renown, award winning researcher, German-Thai-American microbiologist, former head of the Institute of Medical Microbiology and Hygiene in Germany. A professor of virology and microbiology for 30 years in Germany. Dr. Sucharit Bhakdi warns, “...that the COVID “vaccines” are set to cause a global catastrophe and a decimation of the human population. He explains that the PCR test has been abused to produce fear in a way that is unscientific. He explains what the mRNA vaccines are going to do to the human body in terms and using analogies that anyone can understand.

He expects massive deadly clotting as well as immune system responses that will destroy the human body.

<https://healthimpactnews.com/2021/german-microbiologist-they-are-killing-people-with-these-covid-vaccines-to-reduce-the-worlds-population/?fbclid=IwAR1SdA7nay-51zSodkaSLXooKaynZCZ1TizEBJjFrYlz1H81XJJaXzKod0>

<https://rumble.com/vfx0h3-german-microbiologist-they-are-killing-people-with-covid-vaccines-to-reduce.html>

Dr. Carrie Madej, Dr. Lee Merritt & Dr. Christiane Northrup “Unique phenomena happening around those who recently had the shot and those who have not. Thousands of stories coming in. Uncertainty about what is happening, but this the beginning of a round table discussions below. Discussion includes blood clotting in women. Christiane Northrup is an expert gynecologist who has written numerous books, 3 New York Best Sellers, Oprah Show, 8 Public TV specials, Readers Digest most trusted Doctors, and decades of expertise in reproductive health.

<https://rumble.com/vfyvcn-critically-thinking-with-dr.-t-and-dr.-p-episode-44.html>

<https://mamm.org/could-their-shot-be-harming-you/?fbclid=IwAR14kQB40WfIQw4GS-4b9CKy7pUzMuR-tXEXxGGavm9WBj-fdYyPwvXTRc>

Dr. Lawrence Palevsky a renowned board certified pediatrician, published author, and sought-after lecture. Hundreds of thousands of women are experiencing abnormalities. Warning that something is not right. Top and Bottom video. (Youtube videos are being removed, people are taking to rumble, bitchute, etc.)

<http://www.truthunmasked.org/p/stay-away.html?fbclid=IwAR3kWEMEv6s7muV9oMArGKRKUq4y4lITNnNzdqdgE5UxykqEIXEeqjDI.5Q&m=1>

<https://www.bitchute.com/video/iN8JWKJfyP4e/>

Judy Mikovitz A 20 year veteran of the National Cancer Institute. On July 22, 2009, a special meeting was held with twenty-four leading scientists at the National Institutes of Health to discuss early findings that a newly discovered retrovirus was linked to chronic fatigue syndrome (CFS), prostate cancer, lymphoma, and eventually neurodevelopmental disorders in children. In recent interviews, she has been outspoken surrounding warnings that the CV shot will negatively impact millions. Most of her interviews are censored and removed. Here are few. Pastor Rob McCoy hosted Dr. Mikovitz for a Q&A at his church in California.

<https://rumble.com/vbsu1p-dr.-judy-mikovitz-and-rob-mccoy-deleted-by-youtube.html>

<https://rumble.com/vcri2t-dr.-judy-mikovits-and-robert-f.-kennedy-jr.-q-a-godspeak-calvary-chapel.html>

<https://drcharlieward.com/dr-judy-mikovits/> (April 15)

<https://www.bitchute.com/video/RaLH5EWWhMUh/?fbclid=IwAR2ZUDVLKy56nTQ5tLK9oHi6LebDgiLzQS7s9aURALDdxdt7WwN3H9rb4>

<https://z3news.com/w/dr-judy-mikovits-50-million-people-die-america-vaccine/>

19 DOCTORS AROUND THE WORLD WARNING

<https://rumble.com/veseil-world-doctors-warn-do-not-take-mrna-shot.html>

<https://principia-scientific.com/professor-dolores-cahill-people-will-start-dying-after-covid-vaccine/> Cahill

<https://z3news.com/w/dr-judy-mikovits-50-million-people-die-america-vaccine/>

FULLY VACCINATED BREAK OUTS: WA, HI, SC, LONG ISLAND, MI, TX, MN, KY

More examples of consequences from mass inoculation. Media calls it break through cases or blames those who have NOT gotten the shot. Governments are preparing for additional lock downs. Instead, a careful evaluation may give more credibility to the numerous experts warning of ADE, immune escape, ineffective protection from the shot, short immune protection beyond 2 months was never achieved in clinical trials, red flags inoculation previously infected with covid, including asymptomatic carriers, allergic reactions to PEG, instability in the body, toxicity, new unforeseen results from a new, investigational product, stronger variants consequentially from mass inoculation, enhanced disease as seen in failed animal trials, faulty designed clinical trials based on ineffective case definition, trials deficient in safety and efficacy, transmission not stopped after inoculation, no long term studies, no data on mass population responses to the shots, no data on mutations, no data on co-infections, no data on immunocompromised taking shot, unknown reactions to mNeonGreen, ignoring warnings of pathogenic priming, ignoring the censorship of: (scientists, doctors, researchers, virologists, whistleblowers, across the globe), and game changing altering of our innate immune systems.

(5800) https://www.pbs.org/newshour/health/the-shock-and-reality-of-catching-covid-after-being-vaccinated?utm_source=facebook&utm_medium=news_tab&utm_content=algorithm

<https://www.kiro7.com/news/local/doh-vaccine-breakthrough-cases-confirmed-washington/UXIAR3OU4JB63GQQRHTSK45QAA/>

<https://www.foxnews.com/health/ny-woman-contracts-coronavirus-month-after-covid-19-vaccination-report-says>

https://www.theepochtimes.com/over-100-fully-vaccinated-people-in-washington-state-test-positive-for-covid-19_3757218.html

<https://pix11.com/news/coronavirus/faces-of-the-pandemic/long-island-woman-tests-positive-for-covid-after-2-vaccine-shots/>

https://www.deadlinedetroit.com/articles/27635/updated_vaccinated_oakland_county_woman_gets_covid_michigan_identifies_145_others

<https://www.doh.wa.gov/Newsroom/Articles/ID/2720/Cases-of-COVID-19-vaccine-breakthrough-confirmed-in-Washington-state>
<https://www.wistv.com/2021/03/29/hospitals-see-rare-covid-cases-fully-vaccinated-patients/>
<https://www.newschannel6now.com/2021/03/30/seven-covid-vaccine-breakthrough-cases-active-wichita-county/>
<https://www.startribune.com/minnesota-reports-89-covid-19-cases-in-vaccinated-individuals/600038033/>
<https://www.lifesitenews.com/news/several-nuns-die-after-taking-first-shot-of-covid-vaccine>

RESURGENCE IN HOSPITALIZATIONS AND DEATHS DOMINATED BY 2 DOSES

In this study found on the website of the British government, entitled "SPI-M-O: Summary of further modelling of easing restrictions - Roadmap Step 2" dated March 31, 2021, states that:
"The resurgence in both hospitalizations and deaths is dominated by those that have received two doses of the vaccine, comprising around 60% and 70% of the wave respectively. This can be attributed to the high levels of uptake in the most at-risk age groups, such that immunization failures account for more serious illness than unvaccinated individuals." (in paragraphs 55 and 56)

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/975909/S1182_SPI-M-O_Summary_of_modelling_of_easing_roadmap_step_2_restrictions.pdf
https://blog.fdik.org/2021-04/S1182_SPI-M-O_Summary_of_modelling_of_easing_roadmap_step_2_restrictions.pdf

PREVIOUS CRIMINAL HISTORY AND BEHAVIOR

PFIZER, J&J, AND ASTRAZENECA PREVIOUS CRIMINAL HISTORY

Tens of billion in damages from other drugs such as Bextra, Celebrex, Thalidomide, and Opioids.
Commonality in suits: ***bringing products to market even though they knew injuries and deaths would result.*** Pfizer, Johnson and Johnson, and AstraZeneca are considered serial felons. J&J lost major suits 1995-2019. Also convicted of fraud, knowingly bringing harmful products to market, destroying documents, federal charges, billions in settlements, testing new drugs on children without parental consent, bribery settlements, improper payments, deliberately misleading about hazards and harm, fatalities unwarned, knowing dangerous side effects of (VIOXX, Bextra, Celebrex), product safety issues, environmental issues, dumping toxic waste products, chemicals released, violations of international law, human rights violations for testing on children without parental consent, labor issues with employees, worker safety problems, endless violations and lawsuits.

<https://www.mp-22.com/vax>
<https://www.justice.gov/opa/pr/johnson-johnson-pay-more-22-billion-resolve-criminal-and-civil-investigations>
<https://www.sec.gov/news/press-release/2012-2012-152htm>
<https://www.washingtonpost.com/wp-dyn/content/article/2007/07/02/AR2007070201255.html>
<https://www.justice.gov/opa/pr/pharmaceutical-giant-astrazeneca-pay-520-million-label-drug-marketing>
<https://www.reuters.com/article/us-astrazeneca-texas-lawsuits-idUSKBN1KT0Q9>

PFIZER PREVIOUS CRIMINAL HISTORY

Pfizer has the distinction of the biggest criminal payout in history. Fraud, knowingly bringing harmful products to market, federal charges, billions in settlements, testing new drugs on children without parental consent, bribery settlements, improper payments, deliberately misleading about hazards and harm, fatalities unwarned, knowing dangerous side effects of (same as VIOXX, Bextra, Celebrex), product safety issues, environmental issues, dumping toxic waste products, chemicals released, violations of international law, human rights violations for testing on children without parental consent, labor issues with employees, worker safety problems, endless violations and lawsuits. In the category of vaccine manufacturing, they have ZERO

liability. They are demanding that countries where they don't have liability protection to put up collateral, such as embassies, military bases, and bank reserves to cover vaccine-injury lawsuits.

<https://www.mp-22.com/vax>

<https://www.wionews.com/world/how-pfizer-tried-to-bully-argentina-and-brazil-in-exchange-for-vaccines-366037>

<https://www.sec.gov/news/press-release/2012-2012-152htm>

<https://www.washingtonpost.com/wp-dyn/content/article/2007/07/02/AR2007070201255.html>

J&J RITTLED WITH FRAUD, FALSE CLAIMS, HIDING PRODUCTS DEFECTS

Johnson and Johnson have never brought a vaccine to market before covid. Pfizer, Johnson and Johnson, and AstraZeneca are considered serial felons. J&J lost major suits 1995-2019. Johnson and Johnson does have a track record with previous products including: False claims, destroying documents, bribery, fraud, hiding defects from public, billions in settlements, prison, purposefully misleading products, misbranding, carcinogenic ingredients (baby powder knowingly containing asbestos), 45 states filed civil suits, illegal heart drug, 2.2 Billion more penalties (DOJ), no warning about internal bleeding, 25,000 plaintiffs, 14,000 lawsuits about talcum cancer risk, opioid crises come from same manufacturers, the company had to partner with Merck (who is no less trustworthy) to manufacture its COVID vaccine to meet demand.

<https://fcpublog.com/2020/07/27/johnson-johnson-discloses-new-fcpa-investigation/>

<https://www.justice.gov/criminal-fraud/foreign-corrupt-practices-act>

<https://www.reuters.com/article/us-brazil-corruption-healthcare-exclusiv-idUSKCN1SN0ZZ>

<https://www.sec.gov/news/press/2011/2011-87.htm>

<https://www.nytimes.com/2013/11/20/business/johnson-johnson-to-offer-2-5-billion-hip-device-settlement.html>

<https://www.washingtonpost.com/wp-dyn/content/article/2010/05/27/AR2010052705484.html>

<https://abcnews.go.com/Health/PainManagement/fda-official-testify-agency-knew-johnson-johnson-recall/story?id=11765649>

<https://www.nytimes.com/1995/04/11/business/ortho-fined-7.5-million-in-retin-a-case.html>

<https://www.ftc.gov/news-events/press-releases/1996/01/ftc-gives-final-approval-consent-agreement-johnson-johnson>

J&J CORRUPTION, FALSE LABEL CLAIMS, ILLEGAL SALES, TOXIC INGREDIENTS

The extensive track record continues. Corruption, bribery, false label claims, toxic ingredients for children, and endless settlements. There is a difference between this list of products and manufacturing the CV shot. There will be no settlements, lawsuits, or criminal proceedings. If there is foul play with yet another product in mass production to the entire population, they have full indemnity and all liability has been removed.

<https://www.nytimes.com/2001/04/18/business/johnson-johnson-settles-lawsuits-over-contact-lenses.html>

<https://www.justice.gov/opa/pr/two-johnson-johnson-subsidaries-pay-over-81-million-resolve-allegations-label-promotion>

<https://www.cbsnews.com/news/jj-settles-criminal-case-alleging-ceo-reviewed-illegal-heart-drug-sales-plan/>

<https://www.forbes.com/sites/amywestervelt/2011/11/01/as-report-reveals-toxic-ingredients-in-baby-shampoo-johnson-johnson-goes-public-with-plans-to-clean-up-products/?sh=a9b9ba94b5ad>

<https://www.justice.gov/opa/pr/johnson-johnson-pay-more-22-billion-resolve-criminal-and-civil-investigations>

<https://childrenshealthdefense.org/defender/russel-brand-opioid-crisis-pandemic/>

<https://www.nytimes.com/2019/11/15/health/opioids-oklahoma-johnson-fine.html>

J&J BRIBERY, CORRUPT PRACTICES GLOBALLY

“Brazil’s Public Prosecution Service started an investigation into J&J’s antitrust activities under the Foreign Corrupt Practices Act (FCPA) for “possible improper payments in its medical device industry. The company had to pay out a [\\$70 million penalty](#) for buying off officials in Greece, Poland and Romania. In 2010, an executive for J&J’s subsidiary DePuy was sentenced to a year in prison for corrupt payments to physicians within the Greek national healthcare system.”

<https://www.sec.gov/news/press/2011/2011-87.htm>

J&J FAILED QUALITY CONTROL AND HEALTH CITATIONS

Fifteen million doses of Johnson & Johnson (J&J's) vaccine [failed quality control](#) after workers at a Baltimore manufacturing plant negligently combined ingredients from [AstraZeneca](#) and J&J's COVID vaccine. Plant has a series of health citations already. <https://www.chicagotribune.com/coronavirus/vaccine/ct-aud-nw-johnson-and-johnson-coronavirus-vaccine-20210401-btekuav34vftlbo4iuugjroy4-story.html>
<https://www.nytimes.com/2021/03/31/world/johnson-and-johnson-vaccine-mixup.html>
<https://www.emergentbiosolutions.com/>

ASTRAZENECA SUSPENSION

<https://www.cnn.com/2021/03/31/germany-suspends-use-of-astrazenecas-covid-shot-for-the-under-60s.html>
<https://www.businessinsider.com/astrazeneca-covid-vaccine-countries-suspend-denmark-thailand-batch-blood-clots-2021-3?op=1>
https://www.rki.de/EN/Content/infections/Vaccination/Vaccination_node.html
https://gth-online.org/wp-content/uploads/2021/03/GTH_Stellungnahme_AstraZeneca_3_19032021-3.pdf
<https://apnews.com/article/germany-cities-suspend-astrazeneca-vaccine-under-60-c6da4f4ed846ebbbe24505bfbf9bfce>
<https://thehighwire.com/videos/astrazeneca-vaccine-falls-from-grace/>

NIH (NIAID IS PART OF) CLAIMS JOINT OWNERSHIP OF MODERNA'S VACCINE

Contracts reflect jointly owned-Contract between NIH and Moderna. NIH Director statement, NIH has particular stake in IP behind Moderna's Coronavirus vaccine.
<https://www.axios.com/moderna-nih-coronavirus-vaccine-ownership-agreements-22051c42-2dee-4b19-938d-099afd71f6a0.html>
<https://www.documentcloud.org/documents/6935295-NIH-Moderna-Confidential-Agreements.html#document/p105/a568569> (Contract)
<https://www.documentcloud.org/documents/6935295-NIH-Moderna-Confidential-Agreements.html> (NIH)
<https://www.economicclub.org/events/dr-francis-collins-chris-nassetta-and-mary-brady>
<https://www.nature.com/articles/nbt.2785>
https://childrenshealthdefense.org/defender/truth-rfk-jr-naomi-wolf-constitutional-rights/?utm_source=salsa&eType=EmailBlastContent&eId=26b5c090-223d-4d5d-9526-e0f692535e8c
(Patents and Fauci)

40 BILLION IN PROFITS

\$40 BILLION PROFITS AND PROFIT MARGINS:

4000% Increase in profits for Moderna, who previously couldn't get funds for CV vaccines. \$18.4 billion in revenue this year. Overall, the liability free manufacturers are expecting a \$41 Billion dollar business profits this year alone. mRNA vaccines are faster and cheaper to produce than traditional vaccines and for vaccine manufacturers, more cost-effectiveness translates to greater profits. Bernstein market analyst Ronny Gal also predicts COVID-19 vaccine sales will reach \$40 billion this year.
<https://www.fool.com/investing/2020/12/10/how-much-money-will-moderna-make-from-its-covid-vaccine/>
<https://investorplace.com/2021/03/covid-19-vaccine-orders-are-piling-up-mrna-stock-has-room-to-grow/>
<https://www.theguardian.com/business/2021/feb/25/moderna-forecasts-18bn-in-sales-of-covid-vaccine-this-year>

BILLIONS IN CONTRACTS AND MARKETING DOLLARS

BILLIONS IN SIGNED CONTRACTS AND MARKETING CAMPAIGN TO THE PUBLIC:

Governments across the world are locked into contractual deals to push the acceptance, marketing, and distribution of these new vaccines. **\$4 Billion Marketing Dollars, Marketing analysis on how to persuade people to take the vaccine.** U.S. government's [\\$1 billion deal](#) with J&J to buy 100 million doses of its experimental vaccine.

<https://www.hhs.gov/sites/default/files/strategy-for-distributing-COVID-19-vaccine.pdf>

<https://www.theguardian.com/business/2021/feb/25/moderna-forecasts-18bn-in-sales-of-covid-vaccine-this-year>

<https://www.bloomberg.com/news/articles/2020-03-30/j-j-surges-after-1-billion-vaccine-deal-with-u-s-government>

IF TREATMENTS BELOW EXIST, VACCINE MANUFACTURES AND BILLION DOLLAR CONTRACTS ARE NOT NEEDED

https://www.ema.europa.eu/en/documents/product-information/covid-19-vaccine-moderna-epar-product-information_en.pdf

<https://budesonideworks.com/validation-2/>

<https://covid19criticalcare.com/wp-content/uploads/2020/12/One-Page-Summary-of-the-Clinical-Trials-Evidence-for-Ivermectin-in-COVID-19.pdf>

<https://c19early.com>

[https://www.thelancet.com/journals/lanres/article/PIIS2213-2600\(21\)00160-0/fulltext](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(21)00160-0/fulltext)

BRAZIL AND ARGENTINA EMBASSIES, MILITARY BASES, BANK RESERVES

BRAZIL AND ARGENTINA EMBASSIES, MILITARY BASES, BANK RESERVES

Argentina and Brazil both rejected Pfizer contracts because of demands from Pfizer:

Pfizer demands from Argentina: compensations from the government from any future lawsuits, the government should buy an international insurance for any future lawsuits, sovereign assets as collateral (bank reserves, military bases, embassy buildings).

Pfizer demands from Brazil: the government should create a "guarantee fund" and deposit money in a foreign bank account, waiving sovereignty of abroad assets, Brazilian laws should not be applied to Pfizer, exempt Pfizer from all civil liability

<https://www.wionews.com/world/how-pfizer-tried-to-bully-argentina-and-brazil-in-exchange-for-vaccines-366037>

<https://greatgameindia.com/pfizer-demanding-military-bases-vaccines/>

FINANCIAL DISCLOSURE FORM FOR COVID INJECTIONS

<https://pandemic.solari.com/family-financial-disclosure-form-for-covid-19-injections/>

NOTEWORTHY LEGAL CASES

REINER IN GERMANY WON 4/22/2021 A FAVORABLE RULING

Reiner in Germany filed a case for "crimes against humanity," cases in Norway, Israel, against the WHO, and won a favorable ruling for one of them from the German court this week.

<https://m.youtube.com/watch?v=7RG3k76zTRM>

<https://www.israelnationalnews.com/News/News.aspx/297626>

<https://www.covidtruths.co.uk/2021/03/dr-reiner-fuellmich-pcr-lawsuit-update-march-2021/>

<https://goldenageofgaia.com/2021/03/30/government-of-norway-indicted-for-crimes-against-humanity/>

ROCCO GALATI IN CANADA CONSTITUTIONAL LAWYER LITIGATE AGAINST CA

<https://www.youtube.com/watch?v=OotKzj7yU9o>

https://www.youtube.com/channel/UCU_5kkoB3taGIDfwbyWh1Aw/videos

ISRAEL NUREMBERG CASE FILED

Unvaccinated threatened to be expelled, Threatening to deny unemployment benefits, Unvaccinated law proposed to prevent unvaccinated to enter work place, Preventing entry into schools, theatres, entertainment, and other receipt of services and goods. Applying social pressure, economic pressure, aggression from insurance, health authorities. Financial benefit cards and incentives promoting vaccination. Separating unvaccinated from society through green card system and passport. Heavily redacted contract agreement between Israel and Pfizer. The contract between Israel government and Pfizer is required Israel to transfer all the personal and medical records of citizens to Pfizer, without consent of the people. Israeli's were told and marketed that the vaccine was fully approved rather than EUA status. No voluntary participation or informed consent given. Nuremberg case is brought because the force upon the people is also without the ability to opt out or refuse. Including false advertisement about FDA approval.

<https://www.archyde.com/international-criminal-court-accepts-israeli-governments-nuremberg-code-violation-complaint/>

ISRAEL INFORMATION RELENTLESSLY BEING SUPRESSED REPORT SUBMITTED TO ISRAEL ATTORNEY GENERAL AND THE HEALTH MINISTER

In Israel yesterday, an independent legal body that calls itself the Civilian Probe (CP)* published its finding regarding the catastrophic impact of the Pfizer vaccine on the nation. "Every world citizen who is concerned about the future of humanity should be alarmed by the CP's findings and particularly by the **desperate and relentless attempts to suppress free academic, scientific and ethical discussion** about Covid, the so-called 'vaccines' or anything else." The CP study also presents alarming medical findings regarding the **scale of lethal side effects and possible attempt to mislead not just Israelis but also the entire world.**

<http://www.nakim.org/israel-forums/viewtopic.php?t=270812>

<https://www.francesoir.fr/videos-debriefings/vaccination-en-israel-des-chiffres-de-mortalite-qui-interpellent-video>

<https://archive.ph/o/jiIVR/https://www.israelnationalnews.com/News/News.aspx/297051>

ISRAEL PROMISED SAFETY MONITORING SYSTEM NOT IN PLACE

"Monitoring systems that enable the detection of side effects are a basic and critical condition for granting permission for mass use of any new medicine, certainly when a mass operation of treatment that is defined as experimental is given to millions, and especially when this treatment is given to an entire country..."

"In the absence of a transparent monitoring system that reports on side effects, not only have the Israeli government and the Ministry of Health failed citizens by **providing them with misleading information**, the Israeli government have failed both Pfizer and the rest of the world awaiting the results of the (so called) **'real world experiment'** (that is taking place in Israel)."

"On the one hand, the state did **not inform the citizens that Pfizer's vaccine is in experimental stages** that have not yet been completed, and that at this stage they are actually taking part in the experiment. On the other hand, the state did **not maintain transparent and open control and monitoring systems for the public**. As a result, there is a serious concern that this critical and negligent omission stems from: (a) the fear that such disclosure could interfere with the fulfilment of the objectives that may be implied by the Israel-Pfizer agreement or (b) the fear of diminishing demand for the exceptional number of vaccines that were purchased by Israel in advance, and / or (c) the fear of revealing unflattering results of the 'experiment' being carried out in Israel."

<http://www.nakim.org/israel-forums/viewtopic.php?t=270812>

<https://www.francesoir.fr/videos-debriefings/vaccination-en-israel-des-chiffres-de-mortalite-qui-interpellent-video>

<https://archive.ph/o/jiIVR/https://www.israelnationalnews.com/News/News.aspx/297051>

INTERNATIONAL COURT TAKES ON ISRAEL NUREMBERG VIOLATION CASE

The CP argues that “in order to generate demand (amongst the people) for the vaccine, the government and the Ministry of Health have **launched an unprecedented aggressive campaign, aiming to make Israelis rush to ‘get vaccinated.’** During that campaign, all the basic rules of medical caution and ethics were disregarded, and with them also key guidelines formed after WWII regarding participation in medical trials (the Nuremberg Code). Instead of transparent and clear explanations, the public was **misled by repeated official statements** that the (Pfizer vaccine) has been ‘approved by the FDA’ after passing ‘rigorous tests.’”

“the Pfizer-Israel agreement is suffocated with redacted segments, consequently, it is not possible to analyze it legally and/or fully grasp Its implications as far as public health is concerned... **This concealment casts a heavy shadow over anyone who took part in the (Israeli/Pfizer) negotiations...**”

<https://www.archyde.com/international-criminal-court-accepts-israeli-governments-nuremberg-code-violation-complaint/>

IVERMECTIN TREATMENT TESTIMONIES GIVEN TO HOMELAND SECURITY

Ivermectin, miracle drug for COVID. Dr. Pierre Kory, president of the FLCCC Alliance testifies before Senate Committee on Homeland Security and Governmental Affairs looking into early outpatient COVID-19 treatment. FLCCC discovered ivermectin has a potent real-world properties in mild, moderate, and severe disease states. Database below of all IVERMECTIN COVID-19 studies. (89 studies, 48 peer-reviewed, 52 with treatment and control groups.)

<https://www.c-span.org/video/?c4929855/user-clip-dr-pierre-kory-president-flccc-alliance-testifies-senate-committee-homeland-security>

<https://c19ivermectin.com> (Database of Ivermectin studies including 48 peer reviewed.)

<https://covid19criticalcare.com/ivermectin-in-covid-19/>

<https://covid19criticalcare.com/wp-content/uploads/2020/12/One-Page-Summary-of-the-Clinical-Trials-Evidence-for-Ivermectin-in-COVID-19.pdf>

<https://osf.io/wx3zn/>

HDROX

Database of all HCQ Covid-19 studies. 285 studies, 213 peer-reviewed, 236 comparing to control groups.

<https://c19hcq.com>

<https://pubmed.ncbi.nlm.nih.gov/33430933/>

<https://pubmed.ncbi.nlm.nih.gov/32616063/>

<https://budesonideworks.com/validation-2/>

VITAMIN D, QUERCITIN, SURAMIN

74 Studies on Vitamin D. Database of all vitamin D Covid-19 studies. Analyzing outcomes and effect.

<https://c19vitamind.com>

<https://odysee.com/@SaveMedia:5/capitol-clarity-ryan-cole-on-covid-19-vitamin-d-vaccine-concerns:2>

<https://pubmed.ncbi.nlm.nih.gov/33278625/>

BUDESONIDE CASE STUDY AND MEDICAL JOURNALS

The [most recent study by Oxford University](#) (randomized control trial) showed a 90% reduction in hospitalization for people with COVID. Below are links to a peer-reviewed studies, articles in medical journals, or news articles regarding the **efficacy of budesonide**. Medical Journals Articles and Studies in Additional Resource Section Addendum.

<https://www.medrxiv.org/content/10.1101/2021.02.04.21251134v1>

<https://www.ox.ac.uk/news/2021-02-09-common-asthma-treatment-reduces-need-hospitalisation-covid-19-patients-study>

<https://budesonideworks.com>

https://covidsilverbullet.com/wp-content/uploads/2020/07/Bartlett_COVID_Case_Study.pdf
<http://stateofthenation.co/?p=19630>

Common asthma treatment reduces need for hospitalisation [by 90%] in COVID-19 patients, study suggests (University of Oxford)

Pathophysiological Basis and Rationale for Early Outpatient Treatment of SARS-CoV-2 (COVID-19) Infection – ScienceDirect (from the American Journal of Medicine)

HOME-BASED TREATMENT RESOURCES

From the association of American Physicians and Surgeons, a group representing over 500,000 medical professionals across the United States.

<https://aapsonline.org>

Additional topics covered below in Addendum 1

Including ingredient sm-102, Moderna Patent, Spike protein injuries, Prion's Disease and Covid Vaccine, and DARPA (A program operating under the DOD specializing in BioTech.)

ADDENDUM 1
ADDITIONAL SIGNIFICANT RESOURCES

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10 BILLION IN ADDITIONAL MARKETING CAMPAIGNS

Biden approved nearly \$10,000,000,000.00 for marketing campaigns, anticipating an oversupply. The U.S. government funded vaccine research to the tune of more than \$9 billion, spent \$22 billion to support vaccine distribution, shelled out another \$10 billion to expand access and currently announced \$3 billion to spend on an ad campaign to combat vaccine hesitancy.

<https://www.nytimes.com/2021/04/01/us/politics/coronavirus-vaccine-hesitancy.html>

<https://www.nytimes.com/2021/04/01/us/politics/coronavirus-vaccine-hesitancy.html>

<https://www.aanp.org/news-feed/nurse-practitioners-mobilize-to-increase-vaccinations-across-minority-communities-and-combat-vaccine-hesitancy>

DANGER INGREDIENT SM-102 "THIS PRODUCT IS NOT FOR HUMAN OR VETERINARY USE."

Connecticut Department of Public Health recently released Moderna Ingredient (sm-102). SM-102 is an ingredient in Moderna's lipid nanoparticle mixture. The SM-102 product likely comes from Cayman Chemical, as their page lists it being used in lipid nanoparticle preparation and cites a publication by Moderna-affiliated authors. It's 10% SM-102 (ionizable lipid) and 90% chloroform (solvent). The Safety Data Sheet (SDS) for their product states it is an extremely toxic and hazardous substance, suspected of causing cancer, developmental toxicity, suspected of damaging fertility or the unborn child, damage to the central nervous system, the kidneys, the liver and the respiratory system through prolonged or repeated exposure. The company states: "This product is not for human or veterinary use."

<http://www.abovetopsecret.com/forum/thread1286756/pg1>

<https://fags.in.gov/hc/en-us/articles/360054156652-What-are-the-ingredients-in-the-Moderna-COVID-19-Vaccine->

<https://www.fda.gov/media/144637/download> (See 13. Pg. 20 DESCRIPTION of the FDA vaccine sheet)

<https://www.caymanchem.com/product/33474/sm-102>

<https://www.caymanchem.com/msdss/33474m.pdf> (pg. 1, 2, 10)

MODERNA PATENT 16 CITATIONS OF GENE THERAPY, GENE TRANSFER, GENE THERAPEUTIC, GENE EDITING, GENE LINING REFERENCES

16 Citations and references in Moderna's official patent referencing mRNA therapy medicine as gene therapy, gene transfer, gene therapeutics, gene delivery, mRNA encoding humans.

<https://www.modernatx.com/sites/default/files/US10702600.pdf>

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- Kuhn , A.N. , et al . , mRNA as a versatile tool for exogenous protein expression . Current **Gene Therapy** . Oct. 2012 ; 12 (5) : 347-361 .
- Lorenzi , J.C. , et al . , Intranasal vaccination with messenger RNA as a **new approach in gene therapy** : Use against tuberculosis . BMC Biotechnol . Oct. 2010 ; 10 (77) : 1-11 .
- Rabinovich , P.M. , et al . , Synthetic messenger RNA as a tool for **gene therapy**. Hum . Gene Ther . Oct. 2006 ; 17 : 1027-1035 .
- Schott , J.W. , et al . , Viral and non - viral approaches for transient delivery of mRNA and proteins . Current **Gene Ther** . 2011 ; 11 (5) : 382-398 .

- Segura , J. , et al . , Monitoring **gene therapy** by external imaging of mRNA : Pilot study on murine erythropoietin . Ther Drug Monit . Oct. 2007 ; 29 (5) : 612-8 .
- Smits , E. , et al . , RNA - based **gene transfer** for adult stem cells and T cells . Leukemia . 2004 ; 18 : 1898-1902 .
- Strong , V.T. et al . , Incorporation of beta - globin untranslated regions into a Sindbis virus vector for augmentation of heterologous mRNA expression . Gene Ther . Jun . 1997 ; 4 (6) : 624-7 .
- Tavernier , G. , et al . , mRNA as **gene therapeutic** : How to control protein expression . J. of Controlled Release . Mar. 2011 ; 150 (3) : 238-247 .
- Wang et al . , Systemic delivery of modified mRNA encoding herpes simplex virus 1 thymidine kinase for targeted cancer **gene therapy** . Mol Ther . Feb. 2013 ; 21 (2) : 358-67 . doi : 10.1038 / mt.2012.250 . Epub Dec. 11 , 2012 .
- Yamamoto et al . , Current prospects for mRNA **gene delivery** , European Journal of Pharmaceutics and Biopharmaceutics 71 (2009) 484-489 .
- Sahin et al . , mRNA - based therapeutics developing **a new class of drugs** . Nat Rev Drug Discov . Oct. 2014 ; 13 (10) : 759-80 . doi : 10.1038 / nrd4278 . Epub Sep. 19 , 2014 .
- Hecker , J.G. et al . , Non - Viral DNA and mRNA **Gene Delivery** to the CNS Pre - Operatively for Neuroprotection and Following Neurotrauma . Molecular Therapy . 2004 ; 9 , S258 - S258 .
- Hoerr , I. et al . , Stabilized Messenger RNA (RNActive™) as a Tool for Innovative **Gene Delivery** . Tissue Engineering . Apr. 2007 ; 13 (4) : 865-925 . Hoerr ,
- More than a messenger : A new class of drugs - mRNA - based **therapeutics . Genetic Engineering & Biotechnology** News . Jun . 18 , 2013 . <http://www.genengnews.com/gen-articles/more-than-a-messenger-a-new-class-of-drugs-mrna-based-therapeutics/4916/> [last accessed Mar. 25 , 2016] .
- Kisich et al . , Antimycobacterial agent based on **mRNA encoding human** beta - defensin 2 enables primary macrophages to restrict growth of Mycobacterium tuberculosis . Infect Immun . Apr. 2001 ; 69 (4) : 2692-9 .

GENETICALLY ENGINEERED DNA VACCINES AND TUMORS

Deoxyribonucleic acid (DNA) vaccination is one technique used to stimulate humoral and cellular immune responds to foreign antigens, such as hMPV antigens and/or PIV antigens and/or RSV antigens. The direct injection of genetically engineered DNA (e.g. naked plasmid DNA) into a living host results in a small number of its cells directly producing an antigen, resulting in a protective immunological response, including the possibility of insertional mutagenesis, which could lead to the activation of oncogenes or the **inhibition of tumor suppressor genes.**

<https://www.modernatx.com/sites/default/files/US10702600.pdf> (Modern patent Pg. 31)

DOCTORS CENSORED FOR INTRODUCING EARLY PREVENTION TREATMENTS

One of America's most-published physicians, **Peter McCullough**, MD, has been repeatedly censored. Peter A. McCullough, M.D., M.P.H., Vice Chief of Internal Medicine, Baylor University Medical Center. Doctors discuss suppression of treatment. Countless Doctors have stated their successful treatments have been suppressed. Including renowned Dr. **His Testimony to US Senate Committee Hearing:**



Video on November 19th, 2020 – **Early Outpatient Treatment: An Essential Part of a COVID-19 Solution**. Dr. McCullough and other witnesses give testimony at a US Senate Committee Hearing
<https://www.hsgac.senate.gov/hearings/early-outpatient-treatment-an-essential-part-of-a-covid-19-solution>

Video on His Treatment Publication: October 11, 2020, see video of Dr. McCullough providing a critical update: **Ambulatory Treatment of COVID-19**. (Association of American Physicians and Surgeons)
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7410805/>
http://pb-site.com/1/bB-QG0ZVx/r1_kx_WuV8jN

UNPRECEDENTED PULL OF PEER REVIEWED MANUSCRIPT

This was the second time this happened. The prior issue of IVERMECTIN manuscript was pulled at the last minute in February. Unprecedented in medicine, interference and suppression of completed and successfully acceptance of peer-review work. It was then picked up by the American Journal of Therapeutics, 3 rounds peer-review and was published on 4/29. See the full resignation LETTER and unprecedented interference below. Dr. Marik is one of eleven doctors with the Frontline Covid-19 Critical Care Alliance, and the second most published critical care doctor in the world. Dr. Pierre Kory, “I was trying to be fair and generous before now. This is clear censorship. There is no other possible rational explanation. It’s indefensible in science to reject a peer-reviewed accepted publication. It went through three rounds of peer review by experts in the field. It’s well-defended. Our conclusions in that paper match exactly the conclusions of the international effort which is the British IVM Recommendation Development Guideline Committee meeting which is experts, researchers, clinicians from all over the world. Those conclusions are the same. Yet this journal did not want to publish our paper and they removed it. It is unconscionable.”

<https://www.hartgroup.org/.../05/ResignationsFrontiers.pdf>
<https://tinyurl.com/y6yuytp7>

MOST COMPREHENSIVE LIST OF VAX SIDE EFFECTS DR. RAY SAHELIAN, M.D.

After reviewing thousands of VAERS reports, Dr. Sahelian describes side effect details more thoroughly than most. His description and summary of the spike protein covid shot is also enlightening and informative. Giving readers the most comprehensive informed consent on risks and adverse reactions.

<https://raysahelian.com/covidvaccinesideeffects.html>
<https://raysahelian.com/index.html>

CHILDREN EUA APPROVAL OF COVID SHOT WITH NO SAFETY DATA ON CO-ADMINISTRATION OF OTHER VACCINES

On May 12, 2021, the ACIP committee approved the EUA authorization of the Pfizer shot for 12-15 year old's. They also are allowing CO-ADMINISTRATION with other shots on the same day. There aren't any studies or data on the interaction of a new mRNA shot with the existing other shots.

https://www.bmj.com/content/373/bmj.n1244/rr-1?fbclid=IwAR1thWVZTPnHp_TYU9TMmCqd6K9Qah8Wtn5gnhOoriNI-H986M5oNPRWTEI
<https://www.hhs.gov/live/live-1/index.html#13231>

INJURY RELATED TO SPIKE PROTEIN

Spike protein - immobilize M2 macrophages; cardiac damage, ACE2 Receptors, spike proteins bind tightly to ACE2, multi-organ system failure, pulmonary artery hypertension, spike proteins attach to sperm and eggs, (Syncytin - "Quite simply, syncytin is critical and without it, human life could never form."), spike proteins: loss of BBB integrity, Amyotrophic Lateral Sclerosis (ALS), prion disease, damage to FUS gene and TDP-43 protein: The RNA sequence in the vaccine [3] contains sequences believed to induce TDP-43 and FUS to aggregate in their prion based conformation leading to the development of common neurodegenerative diseases, 5 Types frontotemporal lobe degeneration, FUS gene and cancer, adenoviruses and cancer, 20 mechanisms of injury (MOI). Compiled by Dr. Sherri Tenpenny. www.DrTenpenny.com
<https://insight.jci.org/articles/view/123158> (cardiac damage)
<https://www.salk.edu/news-release/the-novel-coronavirus-spike-protein-plays-additional-keyrole-> (in illness)
<https://pubmed.ncbi.nlm.nih.gov/15141377/> (ACE2 Receptors)
<https://www.preprints.org/manuscript/202003.0422/v1> (Spike Proteins bind tightly to ACE2)
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7533045/> (Multiorgan system failure)
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7827936/> (pulmonary artery hypertension)
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7941816/> (spike proteins: attach to sperm and eggs)
<http://isciencemag.co.uk/features/the-syncytin-gene-viruses-responsible-for-human-life/> Syncytin- "without it, human life could never form."
<https://www.sciencedirect.com/science/article/pii/S096999612030406X?via%3Dihub> (loss BBB integrity)
<https://carterheavyindustries.files.wordpress.com/2021/02/covid19-rna-based-vaccines-and-the-risk-> (ALS)
<https://www.hopkinsmedicine.org/health/conditions-and-diseases/prion-diseases> (prion disease)
<https://principia-scientific.com/covid-19-rna-based-vaccines-and-the-risk-of-prion-disease/> neurodegenerativ
<https://pubmed.ncbi.nlm.nih.gov/23041957/> (frontotemporal lobe degeneration)
<https://medlineplus.gov/genetics/gene/fus/#conditions> (FUS gene and cancer)
<https://www.ncbi.nlm.nih.gov/books/NBK8503/> (adenoviruses and cancer)

INJURY RELATED TO ANTI-S-ANTIBODY AND ILLNESS DUE TO IMMUNE SYSTEM SUPPRESSION

Already cited are acute reactions (anaphylaxis, cardiac arrest) and illness or damage caused by spike proteins. Cited below is injury caused by anti-S-antibody and illness/damage to immune system (macrophage damage, ADE, original antigenic sin, etc)

<https://insight.jci.org/articles/view/123158> (anti-S-antibody damage, lung damage)
<https://www.frontiersin.org/articles/10.3389/fimmu.2020.617089/full#f1> (28 of 55 tissue types react- antibody)
<https://www.frontiersin.org/articles/10.3389/fimmu.2020.01120/full> (original antigenic sin)
<https://peerj.com/articles/10112/> (flu shots and COVID deaths)
<https://jamanetwork.com/journals/jama/article-abstract/2777390> (severe and prolonged illness)
<https://www.frontiersin.org/articles/10.3389/fimmu.2020.01120/full>
<https://www.sbi-online.org/Portals/0/Position%20Statements/2021/SBI-recommendations-for-managing-axillary-adenopathy-post-COVID-vaccination.pdf> (Swollen lymph node)
<https://jamanetwork.com/journals/jama/article-abstract/2777390> (mutant strains)

<https://www.sciencedirect.com/science/article/abs/pii/S1286457920300344?via%3Dihub> (ADE on re-exposure)
<https://www.fda.gov/media/146219/download> (Injected of transgenes and DNA can lead to anti-DNA antibodies. Foreign DNA can integrate into human DNA. JJ Shot pg 12 – Transgene.
<https://www.i-sis.org.uk/transgenicLinesUnstable2.php> (Instability of transgene lines)
[https://www.academia.edu/23304303/Medical_conditions_associated_with_a_positive_anti_double_stranded_deoxyribonucleic_acid_\(dsDNA_Antibodies_associated_with_long_list_of_illnesses\)](https://www.academia.edu/23304303/Medical_conditions_associated_with_a_positive_anti_double_stranded_deoxyribonucleic_acid_(dsDNA_Antibodies_associated_with_long_list_of_illnesses))
<https://covid19-sciencetable.ca/sciencebrief/vaccine-induced-prothrombotic-immunethrombocytopenia-vipit-following-astrazeneca-covid-19-vaccination/> (deadly blood clots)
(MOI) Compiled by Dr. Sherri Tenpenny. www.DrTenpenny.com

ACUTE REACTIONS

MOI #1 anaphylaxis/PEG:

<https://www.sciencedirect.com/science/article/pii/S2451945619300352>

PRION DISEASE AND COVID VACCINE

"Covid-19 RNA Based Vaccines and the Risk of Prion Diseases," just published in MICROBIOLOGY AND INFECTIONS DISEASES, **addresses one of the many potential, unintended, adverse health effects of the experimental mRNA Covid-19 vaccines presently being deployed worldwide, namely, their possible induction of prion diseases, a category of highly fatal brain disorders.** The concluding paragraph in the 3-page journal article: "Many have raised the warning that the current epidemic of COVID-19 is actually the result of a bioweapons attack released in part by individuals in the United States government [10,11]. Such a theory is not far fetched given that the 2001 anthrax attack in the US originated at Fort Detrick, a US army bioweapon facility. Because the FBI's anthrax investigation was closed against the advice of the lead FBI agent in the case, there are likely conspirators still working in the US government. In such a scenario the primary focus of stopping a bioweapons attack must be to apprehend the conspirators or the attacks will never cease. Approving a vaccine, utilizing novel RNA technology without extensive testing is extremely dangerous. The vaccine could be a bioweapon and even more dangerous than the original infection."

<https://scivisionpub.com/pdfs/covid19-rna-based-vaccines-and-the-risk-of-prion-disease-1503.pdf>

<https://www.greenmedinfo.com/blog/study-finds-plausible-link-between-deadly-prion-brain-diseases-experimental-mrna-3>

17 YEARS OF IMMUNITY FROM PREVIOUS COVID INFECTION

Robust immune response from T-Cells with protective cross over immunity, protection, and qualities protective of other COVID viruses and infections. Memory T-cells persist with cross over protection for years. Studies include convalescent SARS-CoV-2 patients and found they had also produced similar T-cells. While SARS-CoV-2 is a new virus and distinct from SARS-CoV-1, there is strong reason to believe that T-Cell memory produced by the body to protect from future relapses of this virus would not be weaker or more short-lived than T-cell memory from SARS-1.

<https://www.nature.com/articles/s41586-020-2550-z>

<https://immunology.sciencemag.org/content/2/14/eaan5393>

<https://www.nature.com/articles/nri820>

<https://linkinghub.elsevier.com/retrieve/pii/S1074761313000526>

<https://linkinghub.elsevier.com/retrieve/pii/0140673693930637>

<https://www.frontiersin.org/articles/10.3389/fimmu.2018.02225/full>

[https://www.cell.com/cell-reports/fulltext/S2211-1247\(20\)30515-](https://www.cell.com/cell-reports/fulltext/S2211-1247(20)30515-5?returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS2211124720305155%3Fshowall%3Dtrue)

[5?returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS2211124720305155%3Fshowall%3Dtrue](https://www.cell.com/cell-reports/fulltext/S2211-1247(20)30515-5?returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS2211124720305155%3Fshowall%3Dtrue)

<https://rupress.org/jem/article/201/5/675/40209/Heterologous-T-cell-immunity-in-severe-hepatitis-C>

<https://www.sciencedirect.com/science/article/pii/S0264410X16002589?via%3Dihub>

[https://www.cell.com/cell-host-microbe/fulltext/S1931-3128\(20\)30072-X?returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS193131282030072X%3Fshowall%3Dtrue](https://www.cell.com/cell-host-microbe/fulltext/S1931-3128(20)30072-X?returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS193131282030072X%3Fshowall%3Dtrue)
[https://www.cell.com/immunity/fulltext/S1074-7613\(20\)30181-3?returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS1074761320301813%3Fshowall%3Dtrue](https://www.cell.com/immunity/fulltext/S1074-7613(20)30181-3?returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS1074761320301813%3Fshowall%3Dtrue)

COVID SURVIVORS IMMUNITY COULD LAST FOR YEARS

The human immune system is more than just antibodies. T-cells, NK cells, antibodies, and more are critical to a healthy immune system. Previous Sars Covid infections have the potential of 17 years of immunity.

<https://www.technologyreview.com/2021/01/06/1015822/covid-19-immunity-likely-lasts-for-years/?fbclid=IwAR1CcU339aQL8kxwtQY3WL5kSjb72ZPtYejH6JbZcs3I0Sve7CyLn3A2x-8>
[https://www.cell.com/cell/fulltext/S0092-8674\(20\)30610-3](https://www.cell.com/cell/fulltext/S0092-8674(20)30610-3)
<https://www.lji.org/news-events/news/post/exposure-to-common-cold-coronaviruses-can-teach-the-immune-system-to-recognize-sars-cov-2/>
<https://science.sciencemag.org/content/371/6529/eabf4063>
<https://www.psychologytoday.com/us/blog/live-better-longer/202104/are-we-immune-covid-19-if-weve-been-exposed>
<https://www.nature.com/articles/s41577-020-00436-4>

QUESTIONS SURROUNDING SPIKE PROTEIN SHEDDING

Can people shed the spike that the vaccine is asking their cells to make?

<https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciab465/6279075>

WOMEN'S PERIOD STORIES, PERIOD DISRUPTION, AND RESEARCH

Concerning stories coming from women.

https://www.risemamarise.com/cycles?fbclid=IwAR0l6utHbFeW_LD9PZFh6qqKucHHIHRQmgj3QOLuNdkjmQReCcur1_4TLAA
<https://www.risemamarise.com/cycles>
<https://mycyclestory.com/>

POSSIBLE 3RD WAVE DOMINATED IN THE UK BY 60% VACCINATED IN HOSPITAL

According to a UK government study on the government website, entitled "SPI-M-O: Summary of further modelling of easing restrictions - Roadmap Step 2" dated March 31, 2021, states that:

"The resurgence in both hospitalizations and deaths is dominated by those that have received two doses of the vaccine, comprising around 60% and 70% of the wave respectively. This can be attributed to the high levels of uptake in the most at-risk age groups, such that immunization failures account for more serious illness than unvaccinated individuals. This is discussed further in paragraphs 55 and 56." The study states that people with already two doses of vaccination now make up the rise in Corona deaths and hospitalizations. They account for about two-thirds of all cases. Link of the study & back up link below.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/975909/S1182_SPI-M-O_Summary_of_modelling_of_easing_roadmap_step_2_restrictions.pdf
https://blog.fdik.org/2021-04/S1182_SPI-M-O_Summary_of_modelling_of_easing_roadmap_step_2_restrictions.pdf (page 10)

COVID VACCINE CONSENT FORM

"I understand that these may not be all the side effects of the COVID-19 vaccine as the vaccine is still being studied in clinical trials. I also understand that it is not possible to predict all possible side effects or complications which could be associated with the vaccine. I understand that the long-term

side effects or complications of this vaccine are not known at this time.”

<https://principia-scientific.com/have-you-actually-read-a-covid19-vaccine-consent-form-yet/?fbclid=IwAR3lgpK152gzWIX9-IgeLYFlyQShPTagTL2a9q96OFDBerrA-nGfreL-128>

NEW STANFORD STUDY, INFLATED DISEASE SEVERITY IN CHILDREN

Dr. Schroeder and his team suggested that pediatric hospitalization rates are used as a marker of coronavirus disease 2019 (COVID-19) disease severity in children but may be inflated by the detection of mild or asymptomatic infection via universal screening.

<https://hosppeds.aappublications.org/content/hosppeds/early/2021/05/21/hpeds.2021-006001.full.pdf>

FORMER HHS ADVISOR WARNS VAX WILL HARM CHILDREN

Former HHS COVID advisor, Dr. Paul Alexander warns against children getting the COVID19 vaccine. Fox news is one of the few stations willing to carry this warning. “Kids have a 1 in 50,000 chance of dying if they are covid infected. It’s a very, very small risk. Again the issue is why would they be placing parents in this position to vaccinate these children with such low risk. When this is an experimental vaccine. It’s highly untested as to safety and they will not have the requisite time duration and sample size to get the power to detect any meaningful differences. So, I think they are absolutely wrong...The risk to children is so small. There is no reason too put our children in harms way at this point. Not with these untested vaccines and with a sample size of 3000...There is no way they can derive meaningful results and safety data for parents. This is reckless.”

“Exposing children to an untested Emergency Use medication implies that there is a dire risk to the children without it. There are no data to support such a potential risk.” “The key for parents to understand is this, these will NOT provide you the type of safety data to give you the level of confidence to put these vaccines in your children’s arms. Because we are talking about, children have 70-80 years more life to live. There could be devastated by these vaccines if something goes wrong. And again the issue is the liability waiver.”

<https://www.aier.org/article/why-we-must-not-be-forced-into-vaccinating-our-children-from-covid-beware/>
<https://video.foxnews.com/v/6252603254001>

<https://www.lifesitenews.com/news/its-reckless-to-vaccinate-children-for-covid-19-former-hhs-coronavirus-advisor>

TESTIMONY FROM DOCTOR SCIENTIST CALLS FOR A HALT

A sobering testimony to the CDC from a research scientist who saw ovarian destruction in novel contraceptive tests earlier. Menses disruptions, blood clotting, sperm issues, immunosuppressive issues, fertility issues, now, highlighted. She calls for a halt.

<https://www.jennifermargulis.net/halt-covid-vaccine-research-scientist-urges-cdc/>

VACCINE CHECKERS GOING DOOR TO DOOR IN CALIFORNIA

Thousands hired to go door to door.

<https://californiaglobe.com/section-2/gov-newsom-sending-vax-checkers-door-to-door/>

https://www.msn.com/en-us/news/us/knock-knock-have-you-had-your-vaccine-yet-california-sends-out-thousands-to-check/ar-BB1gUqD0?fbclid=IwAR3aG3vgKnW-Ympm4AlzR04WI2UAN_UWvq3nxQs7wz54kIMhNtrpdGtRIi0

MAMMOGRAM RESULTS SIDE EFFECT

As women get their yearly mammograms, doctors have noticed something impacting results: the presence of swollen lymph nodes, a common side effect of the COVID-19 vaccine.

<https://www.thv11.com/article/news/health/covid-vaccine-side-effect-imammogram-results/91-1ab98fb0-eda0-4bc3-9aef-100c26a93667>

75% OF VAERS INJURY REPORTS IN APRIL IS ABNORMALLY ONLY J&J REPORTS

Reporter Berenson shows evidence today that HHS is rushing to add J&J adverse event reports to VAERS while slow walking reports for Pfizer & Moderna. But the harms from Pfizer & Moderna are greater than from the J&J product. “So you've gotta ask WHY? Is this a story of financial conflicts of interest (shared patents with NIH for the mRNA products). Or something else? Why kill the adenovirus vector products and protect the mRNA product line when the mRNA safety profile is actually worse?”

<https://twitter.com/AlexBerenson/status/1392499188794003460>

PRO VACCINE PEDIATRICIAN DOCTOR TESTIFIED BEFORE TEXAS SENATE TO PROTECT CHILDREN FROM THIS SHOT

In public testimony, Pediatrician Dr. Angelina Farella said, “Never in history before have we given medications that were not FDA approved to people who were not initially studied in the trial. There were no trial patients under the age 18. There were no trial patients previously had covid...I have given tens of thousands of vaccines in my office. At the recent ACIP meeting, one of the things that is extremely troubling, and it's on their ACIP guidelines for the Pfizer vaccine in particular, is that recommendations about safety and efficacy and adverse events will come out AFTER authorization.”

“We are currently allowing children to get this vaccine, and they were never studied in the clinical trial. On top of that...they are extrapolating the data from adults down to children and adolescents...Children are not little adults. This is unacceptable. Children have a 99.997% survivability.”

<https://youtu.be/mIPb0AtEvAE>

THE CONTROL GROUP NO LONGER EXISTS

If the unblinding and the offer to placebo recipients to get vaccinated in a randomized placebo-controlled trial (RCT) began within weeks of EUA, then we had an RCT for only the duration of time till EUA (2-3 months). After that, the trial can no longer be deemed a randomized placebo-controlled trial, as the control group, which is needed to know the baseline rates of COVID and adverse events against which to compare the rates in the vaccinated group, no longer exists. They might as well terminate the trials altogether right after EUA instead of continuing with this false and pretending they are doing science.

Peter Doshi's article in the BMJ: <https://www.bmj.com/content/373/bmj.n1244/rr-1>

LINK FOR INJURY STORIES

<http://covidvaccinevictims.com/>

ESTIMATED CLINICAL TRIALS STUDY COMPLETION DATE

April 6, 2023

<https://clinicaltrials.gov/ct2/show/NCT04368728>

DARPA FUNDED MODERNA

Moderna, The [first company](#) in the United States to enter clinical trials with a vaccine for the virus was **funded by DARPA**. Additionally, the second company, working was also funded by DARPA as well. Receiving over \$1.5 Billion dollars this year. Without disclosing DARPA and government invested funds. The Defense Advanced Research Projects Agency (DARPA) is a research and development agency of the United States Department of Defense responsible for the development of emerging technologies for use by the military. The DARPA SIGMA+ program is developing networked sensors to detect a variety of chemical, biological, and explosive threats. Key to this undertaking are technologies centered on DNA and RNA—including some developed under DARPA's, ADEPT program. Using these tools, through a biological version

of **reverse engineering, manufacture genetic constructs** that, when delivered, can instruct an individual's body to produce similar protective antibodies.

<https://www.statnews.com/pharmalot/2020/08/28/moderna-covid19-vaccine-coronavirus-patents-darpa/>

<https://www.darpa.mil/work-with-us/covid-19>

<https://www.darpa.mil/news-events/2017-02-06a>

<https://www.darpa.mil/program/autonomous-diagnostics-to-enable-prevention-and-therapeutics>

DARPA+MODERNA+PROFUSA+GOOGLE+NIH+CEPHEID

DARPA funds Moderna (after years of DARPA initiatives and focused RNA and DNA vaccines technologies. DARPA funds Profusa which created a wearable injected biosensor, which syncs up to a smart phone app. Google backs Profusa, while Google also is intimately involved in surveillance programs, censorship, and contact tracing initiatives. Profusa is also partnered and funded by the NIH and DARPA. DARPA's years-old goal of creating a national, web-based database of preemptive diagnoses is noticed in the current "push" for a national contact tracing system, vaccine passports, and health pass systems based on citizens' private health data and vaccine status. The additional overlap runs deep as the co-founder of Profusa is also a co-founder in Cepheid the diagnostic company of a rapid coronavirus test, who won FDA approval.

<https://www.theguardian.com/science/2017/dec/04/us-military-agency-invests-100m-in-genetic-extinction-technologies>

<https://profusa.com/our-team/>

<https://www.theverge.com/platform/amp/interface/2020/4/14/21219289/apple-google-contact-tracing-app-android-ios-pros-cons-quarantine-testing>

<https://profusa.com/partners-investors/>

<https://techstartups.com/2020/03/21/fda-approves-rapid-coronavirus-test-results-45-minutes-test-conducted-california-based-diagnostic-testing-company-cepheid/>

DARPA (DIGET)

DARPA began the Detect It with Gene Editing Technologies (DIGET) and the Epigenetic Characterization and Observation (ECHO) programs focused on rapid discovery, validation, and manufacture of diagnostics detecting any threat, anytime, anywhere. DARPA provided near-real-time diagnostic results during a 2 month study... The team is now focusing on expanding the cohort and tracking long-term host response. DARPA Gel or hydrogel is part of the vaccines.

<https://www.darpa.mil/work-with-us/covid-19>

DARPA MICROCHIP SENSOR

Sensor under the skin.

<https://www.dailymail.co.uk/news/article-9460389/Pentagon-scientists-invent-microchip-senses-COVID-19-body-symptoms.html>

DARPA HYDROGEL

DARPA's ongoing web series highlighting the agency's active programs focused on the diagnosis, detection, treatment, prevention and manufacture of *medical countermeasures*. Over the years, DARPA-funded projects have created the building blocks of GPS, the first computer mouse, protocols that underpin the modern Internet. The agency pioneered stealth technology that made American fighter jets all but invisible to enemy radar. It advanced a bevy of new weaponry, including drones. As DARPA shifted to biotechnology, including funding Profusa's creation of a wearable sensor, it's not so far-fetched that DARPA hydrogel contains nanoparticles and nanotechnology.

<https://www.darpa.mil/work-with-us/covid-19>

<https://www.darpa.mil/>

https://www.washingtonpost.com/national-security/how-a-secretive-pentagon-agency-seeded-the-ground-for-a-rapid-coronavirus-cure/2020/07/30/ad1853c4-c778-11ea-a9d3-74640f25b953_story.html

CATEGORIES COVERED

\$10 Billion in Marketing	Sm-102
Moderna Patent 16 Gene Therapy Citations	Tumors
Early Treatment Suppression	Most Cited Doctor Censored
Peer-Reviewed Journal Problems	Most Comprehensive List of Vaccine Side Effects
No Safety Data on Co-Administration on Children	Spike Protein (MOI)- 20 Mechanisms of Injury
Prion Disease	17 Years of Immunity, Covid Survivors
DARPA Funded Moderna	Disrupted Menstruation Cycles
Projection of 3 rd Wave in the UK	Informed Consent Form
Stanford Study- Inflated Hospital Numbers in Children	HHS Advisor Warning About Children
Doctor Warns to Halt Everything	Door to Door Vaccine Checkers
Mammogram Disruption	Abnormal J&J Reporting
The Control Group No Longer Exists	

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CONCLUSION

From the beginning, professionals have raised concerns and warnings of ADE, immune escape, ineffective protection from the shot, short immune protection beyond 2 months was never shown in clinical trials, red flags concerning inoculating previously infected with covid, including asymptomatic carriers, allergic reactions to PEG, and instability in the body, toxicity. Many voiced problems about new unforeseen results from a new, investigational product, never before approved, including problems with stronger variants consequentially from mass inoculation. Others alerted of a failed injury surveillance system and enhanced disease as seen in failed animal trials.

Whistleblowers claimed faulty designed clinical trials were based on ineffective case definition with trials deficient in safety and efficacy. Still yet, clinical trials did not prove transmission would be stopped after inoculation. There are no long-term studies, no long-term data on mass population responses to the shots, no data on effectiveness on mutations, no data on co-infections, no data on immunocompromised taking the shot. Prevalent with numerous unknown reactions including to mNeonGreen. What happens if there continues to be an ignoring of warnings signs of pathogenic priming? The unexplained phenomenon is shaking women across the world to the core. A minimum of thousands of women are reporting having reproductive health issues including abnormal bleeding, bruising, clotting reactions, including women who were not injected with the new shot, but are simply around recently inoculated persons. If we ignore the censorship of: (scientists, doctors, researchers, virologists, whistleblowers, across the globe), and game changing altering of our innate immune systems, what happens to our children, this generation, and humanity?

Previously convicted criminals leading the charge in manufacturing, brand new medicine that itself had been plagued with ethical concerns and high risks. Those convicted with fraud, bribery, corruption, false labeling, defective products, toxic products, knowingly letting them stay in public circulation with consumers, NOW, have no liability or way to be held accountable if past behavior patterns transfer into these golden “liability free” products.

This list predominately comes from the original sources, credible scientific journals, peer reviewed studies, to allow people access to original source information. Information has been withheld from traditional searches or labeled with blanket misinformation stamps. Leaving truth seekers unsure what is true and reliable. Those warning from around the world are being canceled, attacked, dismissed, and their information is being deleted.

A “SHOT” heard around the world is symbolic for a historic global moment. A careful evaluation may give credence to the thousands of experts who have been censored, removed from online, targeted with removal of their licenses, as they lay it all on the line to get this information to the public. May we hear the “SHOT heard around the word” before our children are unnecessarily harmed.

****Medical disclaimer: This pdf, information, and website information was created for informational purposes only and has no ties to any drug company or physician. The content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical condition. Never disregard professional medical advice or delay in seeking it because of something you have read on this website. In addition, no one involved in this website has financial ties to any of the suggested therapies. We are merely advocates of informed consent, trying to save lives, and fight medical censorship.****

ADDITIONAL RESOURCE LINKS

MORE RESOURCES IN JOURNALS ABOUT PREVIOUS ADE IN CV FAMILY OF VIRUSES:

<https://pubmed.ncbi.nlm.nih.gov/32428113/>
<https://pubmed.ncbi.nlm.nih.gov/32229574/>
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7165470/>
<https://pubmed.ncbi.nlm.nih.gov/32092539/>
<https://pubmed.ncbi.nlm.nih.gov/12725690/>
<https://pubmed.ncbi.nlm.nih.gov/29740424/>
<https://pubmed.ncbi.nlm.nih.gov/21200427/>
<https://pubmed.ncbi.nlm.nih.gov/21401915/>
<https://pubmed.ncbi.nlm.nih.gov/30796434/>
<https://pubmed.ncbi.nlm.nih.gov/24182427/>
<https://www.ncbi.nlm.nih.gov/pubmed/28360135>
<https://pubmed.ncbi.nlm.nih.gov/12810865/> (ADE mice)
<https://www.ncbi.nlm.nih.gov/pubmed/28817732> (White rabbits)
<https://pubmed.ncbi.nlm.nih.gov/19122397/> (feline)
<https://pubmed.ncbi.nlm.nih.gov/2154621/> (feline)
<https://pubmed.ncbi.nlm.nih.gov/6754243/> (feline in Dengue)
<https://pubmed.ncbi.nlm.nih.gov/17049691/> (hamsters)
<https://www.ncbi.nlm.nih.gov/pubmed/21937658> (Mice, increase lung inflammation on challenge)
<https://pubmed.ncbi.nlm.nih.gov/29029938/> (vaccine enhanced disease)
<https://www.nature.com/articles/d41586-020-00751-9> (don't rush CV vaccine without guarantees)
<https://pubmed.ncbi.nlm.nih.gov/32179860/>
<https://pubmed.ncbi.nlm.nih.gov/32317716/> (danger antibody response in rushed CV-shots)
https://lib.dr.iastate.edu/cgi/viewcontent.cgi?article=1075&context=vmpm_pubs (Ebola)
<https://pubmed.ncbi.nlm.nih.gov/27339099/> (zika)
<https://technology.inquirer.net/69907/pharma-firm-issues-caution-anti-dengue-vaccine-sanofi-dengvaxia-vaccine-health-dengue> (Pharma firm issues caution on use of anti-dengue)
<https://pubmed.ncbi.nlm.nih.gov/30410732/>
<https://www.rappler.com/nation/child-vaccination-rate-philippines-as-of-september-2018> (Dengue distrust in free vaccines post scare of Dengue outcome.)
<https://www.telegraph.co.uk/news/2018/02/05/philippines-immunisation-rates-plummet-amid-dengue-vaccination/> (Philippines)

BUDESONIDE MEDICAL JOURNAL ARTICLES AND STUDIES

Common asthma treatment reduces need for hospitalisation [by 90%] in COVID-19 patients, study suggests (University of Oxford)
Pathophysiological Basis and Rationale for Early Outpatient Treatment of SARS-CoV-2 (COVID-19) Infection – ScienceDirect (from the American Journal of Medicine)
Multifaceted highly targeted sequential multidrug treatment of early ambulatory high-risk SARS-CoV-2 infection (COVID-19) (Reviews in Cardiovascular Medicine)
Inhaled corticosteroids and COVID-19: a systematic review and clinical perspective (from European Respiratory Journal)
Inhaled corticosteroids in virus pandemics: a treatment for COVID-19? (From The Lancet)
SARS-CoV-2 and The Case for Empirical Treatment (The Global Journal of Science Frontier Research – Volume 20, Issue 4)
Pathophysiological Basis and Rationale for Early Outpatient Treatment of SARS-CoV-2 (COVID-19) Infection (US National Library of Medicine National Institutes of Health)
Budesonide facilitates weaning from mechanical ventilation in difficult-to-wean very severe COPD patients (US National Library of Medicine National Institutes of Health)

Effect of nebulized budesonide on respiratory mechanics and oxygenation in acute lung injury/ acute respiratory distress syndrome (US National Library of Medicine National Institutes of Health)

IVERMECTIN ADDITIONAL LINKS

<https://pubmed.ncbi.nlm.nih.gov/32251768/>
<https://pubmed.ncbi.nlm.nih.gov/33234158/>
<https://pubmed.ncbi.nlm.nih.gov/33115543/>
<https://pubmed.ncbi.nlm.nih.gov/32513289/>
<https://pubmed.ncbi.nlm.nih.gov/33038449/>
<https://pubmed.ncbi.nlm.nih.gov/33341233/>
<https://pubmed.ncbi.nlm.nih.gov/33397429/>
<https://pubmed.ncbi.nlm.nih.gov/33430924/>
<https://pubmed.ncbi.nlm.nih.gov/33662102/>
<https://pubmed.ncbi.nlm.nih.gov/32493494/>
<https://pubmed.ncbi.nlm.nih.gov/33407777/>

VITAMIN D ADDITIONAL SOURCES

<https://pubmed.ncbi.nlm.nih.gov/32252338/>
<https://pubmed.ncbi.nlm.nih.gov/32755992/>
<https://pubmed.ncbi.nlm.nih.gov/32474141/>
<https://pubmed.ncbi.nlm.nih.gov/32946517/>
<https://pubmed.ncbi.nlm.nih.gov/32784601/>
<https://pubmed.ncbi.nlm.nih.gov/32605780/>
<https://budesonideworks.com/validation-2/>

JOHN HOPKINS SECOND DOSE WORSE SIDE EFFECTS

<https://www.jhsph.edu/covid-19/articles/side-effects-and-covid-19-vaccines-what-to-expect.html>
<https://pubmed.ncbi.nlm.nih.gov/30370619/>

PFIZER, ASTRAZENECA, MODERNA HEALTH CARE INFORMATION UK

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/967860/Temporary_Authorisation_Patient_Information_BNT162_7_0_UK_.pdf
https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2021/01/Information_for_UK_recipients_COVID-19_Vaccine_AstraZeneca.pdf
https://www.ema.europa.eu/en/documents/product-information/covid-19-vaccine-moderna-product-information_en.pdf
https://www.ema.europa.eu/en/documents/product-information/covid-19-vaccine-moderna-epar-product-information_en.pdf

DATA ON DEATHS AND RECLASSIFICATIONS

<https://drive.google.com/file/d/1-Xgb7aKGd5K-hOCjL4pY440R-DeWISDF/view>

RE-EXPOSURE TO S PROTEIN IN SUBJECTS PREVIOUSLY PRIMED BY NATURAL INFECTION ELICITS CROSS-VARIANT NEUTRALIZING ANTIBODIES

mRNA vaccination boosts cross-variant neutralizing antibodies elicited by SARS-CoV-2 infection (*Science*)

INFLUENZA PANDEMIC 1918: AUTOPSY SAMPLES INDICATE NO NEW VARIANTS OCCURRED

[1918 Influenza Pandemic Caused by Highly Conserved Viruses with Two Receptor-Binding Variants](#)
[1918 Influenza: the Mother of All Pandemics](#)

ABORTED FETAL CELL LINES USED IN TESTING AND VACCINE

<https://soundchoice.org/vaccines/covid-19-vaccine-chart/>

<https://cogforlife.org/wp-content/uploads/CovidCompareMoralImmoral.pdf>

ADDITIONAL REFERENCES ON IMMUNE ESCAPE, NK CELLS, INATE IMMUNITY, VARIANTS, CURRENT CDC RATES, AND MORE

NATURAL ANTIBODIES (B-1A CELLS, SIGM, NATURAL ABS & INNATE IMMUNITY TO COV AND COVID-19)

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7202830/>

doi: [https://doi.org/10.1016/S2352-4642\(20\)30135-8](https://doi.org/10.1016/S2352-4642(20)30135-8)

<https://www.frontiersin.org/articles/10.3389/fimmu.2020.02139/full>

<https://www.nature.com/articles/s41385-020-00359-2>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5526850/>

<https://www.frontiersin.org/articles/10.3389/fimmu.2020.595535/full>

https://journals.lww.com/shockjournal/fulltext/2020/11000/therapeutic_potential_of_b_1a_cells_in_covid_19.2.aspx

<https://www.frontiersin.org/articles/10.3389/fphar.2020.01309/full>

<https://pubmed.ncbi.nlm.nih.gov/23692567/>

<https://pubmed.ncbi.nlm.nih.gov/20948548/>

<https://www.sciencedirect.com/science/article/pii/S1939455120303793>

<https://www.frontiersin.org/articles/10.3389/fimmu.2019.00483/full>

ROLE OF NATURAL ABS AND NK CELLS IN ASYMPTOMATIC CARRIERS

- Substantial transmission by asymptotically infected subjects ; protection of asymptomatic carriers not due to Abs

<https://www.medrxiv.org/content/10.1101/2020.12.18.20248447v1>

<https://pubmed.ncbi.nlm.nih.gov/33391280/>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7608887/>

<https://www.nature.com/articles/s41392-021-00525-3>

NATURAL ABS FACILITATE MHC CLASS I-RESTRICTED ANTIGEN PRESENTATION

Conserved, CoV-associated cell surface-expressed MHC cl. I peptides

<https://www.nature.com/articles/nm933>

<https://pubmed.ncbi.nlm.nih.gov/19439480/>

CDC SURVIVAL RATES FOR COVID

The CDC has quietly revised its infection fatality rates estimates on 03/19/2021:

New estimates for survival rates by age: 0-17 99.998% 18-49 99.95% 50-64 99.4% 65+ 91%

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/planning-scenarios.html>

ABS MAY BIND TO SARS-COV-2 WITHOUT NEUTRALIZING THE VIRUS/ PREVENTING INFECTION

<https://www.pennmedicine.org/news/news-releases/2021/february/antibodies-to-common-cold-coronaviruses-do-not-protect-against-sars-cov2>

MECHANISM OF VIRAL SHEDDING

[https://www.thelancet.com/journals/lanmic/article/PIIS2666-5247\(20\)30172-5/fulltext](https://www.thelancet.com/journals/lanmic/article/PIIS2666-5247(20)30172-5/fulltext)

FDA MANDATED ADVERSE EVENTS REPORTING IN QUESTION

<https://www.fda.gov/media/144413/download>

<https://vaers.hhs.gov/reportevent.html>

<https://www.fda.gov/media/78526/download>
<https://journals.sagepub.com/doi/10.1177/0960327112440111>
<https://www.congress.gov/106/crpt/hrpt977/CRPT-106hrpt977.pdf>
<https://digital.ahrq.gov/ahrq-funded-projects/electronic-support-public-health-vaccine-adverse-event-reporting-system>
<https://pubmed.ncbi.nlm.nih.gov/31580725/>
<https://www.cdc.gov/vaccinesafety/ensuringsafety/monitoring/cisa/index.html>
<https://jamanetwork.com/journals/jama/fullarticle/2772137>

MORE J&J CRIMINAL RECORD

https://www.accessdata.fda.gov/drugsatfda_docs/label/2009/020272s056,020588s044,021346s033,021444s031bl.pdf
<https://www.theguardian.com/business/2019/oct/09/johnson-johnson-risperdal-female-breast-tissue-boys>
<https://www.nytimes.com/2019/03/25/health/xarelto-blood-thinner-lawsuit-settlement.html>
<https://www.nytimes.com/2018/12/14/business/baby-powder-asbestos-johnson-johnson.html>
<https://www.cnn.com/2019/07/19/judge-denies-jjs-request-to-transfer-talc-lawsuits-to-federal-court.html>

JOHNSON & JOHNSON INFO:

[Polysorbate 80](#), an ingredient in J&J's vaccine, is a [suspected](#) underlying cause of [anaphylactic](#) COVID vaccine [adverse reactions](#). [Studies show](#) that polysorbate 80 disrupts the normally protective blood-brain barrier. J&J 1 Billion contract with US government, promise of 100 Million doses. Is this why it has resumed?

<https://snacksafely.com/2021/03/johnson-johnson-covid-19-vaccine-list-of-ingredients/>
<https://www.bloomberg.com/news/articles/2020-03-30/j-j-surges-after-1-billion-vaccine-deal-with-u-s-government>

SWITZERLAND REJECTS ASTRAZENECA, CANADA SUSPENDS EXPERIMENTAL COVID BIOLOGIC, INDIA REJECTS PFIZER <https://www.express.co.uk/news/politics/1392962/eu-vaccine-latest-astrazeneca-switzerland-ban-oxford-vaccine-uk-latest>
<https://www.cbc.ca/news/politics/astrazeneca-under-55-1.5968128>
<https://theprint.in/health/why-indias-expert-panel-rejected-emergency-use-nod-for-pfizer-vaccine/599529/>

50 TOPICS COVERED BELOW WITH RESOURCE LINKS

1. Operating under Emergency Use Authorization
2. Biologics Application
3. Full Licensure
4. Previous Approval Problems
5. Capturing Adverse Reactions AFTER Licensure
6. Injuries, Injury Backlog, Underreporting
7. Liability Removed
8. PREP Act
9. Animal Studies Bypassed
10. Failure in Previous Animal Studies
11. ADE (antibody enhancement, cytokine storm, pathogenic priming)
12. Blood Clots
13. Increase in Autoimmune issues
14. Increase in Liver Toxicity Problems
15. HIV Vector Increase in Aids Susceptibility in Men
16. Safety and Effectiveness Questions and Problems
17. Safety Not Properly Done
18. Short-term Safety Data Without Robust Monitoring System

19. 2 Month Immunity
20. Unknowns (Mutations, Co-Infection, Transmission, Long-term Effect, Stopping Death)
21. Safety Data on Children under 16, elderly 85+, Immunocompromised
22. Red Flags in People Previously Infected with Covid
23. Heavier Periods in Women (25,000 reports)
24. Abnormal Phenomenon Alarming Women
25. Fertility, Breast Feeding, Pregnancy
26. Concerns Around Formation of Placenta
27. Lower Sperm Count
28. Pfizer Clinical Trial-Defective Design Claim
29. No Data
30. Gene Therapy
31. Genetically Engineered RNA, DNA Sequence
32. Epitranscriptomics
33. Reverse Transcription Concerns (mRNA and DNA)
34. Gene Therapy Risks
35. Lipid Carrying Vector
36. Lipid Model Previously Problematic
37. PEG Anaphylactic Reactions
38. Anti-PEG Antibodies
39. Immune Escape, Viral Variants
40. Vaccine Resistant Virus
41. Loss of Innate Immune System
42. Warning from Experts Around the Globe
43. Fully Vaccinated Outbreaks
44. Profits and Profit Margins
45. Billions in Marketing and Contracts
46. Brazil, Argentina, Switzerland, California, India, Israel
47. Closer Look at Israel
48. Note Worthy Lawsuits
49. Previous Track Record and Criminal Behavior
50. Successes with Ivermectin and More (Direct Links to hundreds of clinical trials & peer reviewed)
51. Additional References

Communication from Public

Name: S. Sakuma

Date Submitted: 03/29/2022 02:35 PM

Council File No: 21-0878-S4

Comments for Public Posting: Councilmembers: It is time to get back to rebuilding our lives. Two years of Pharma lobbying, Pharma dinners, Pharma bill & ordinance writing as well as Pharma acting as scientific and personal advisors has been a disaster. We in California have suffered terribly by slavishly following the scientism of Big Pharma. We can start by looking at Covid SURVIVAL RATES—The percentage of people that have NOT died from Covid19. This is hardly a pandemic. UK: 99.972% Belgium: 99.944% Spain: 99.956% Italy: 99.957% Brazil: 99.935% Africa: 99.99725% Australia: 99.99669% USA: 99.954% China: 99.99967% India: 99.9935% Sources: WHO, Johns Hopkins Covid Resource Ctr, Wikipedia, Google. If you still think these jabs are 'safe and effective' consider the following: The mainstream media/Pharma might not want to tell the truth about the gene therapy, but Wall Street is paying attention—Moderna down 70%, Pfizer on it's way down also. The insurance industry is paying attention to the rising body counts: "Summation of Major Insurance company corporate group policy Loss Ratios (DEATH CLAIMS) Q4 (2020) rate vs 2019 rate: OneAmerica Life + 40% Unum \$UNM +36% Lincoln \$LNC +57% Pru \$PRU +41% \$RGA +21% Hartford \$HIG +32% MetLife \$MET +24% Principal Financial Group \$PFG +37% Two experts have analyzed the All Cause Excess Mortality data and have found that millennials (ages 25-44) have experienced an 84% increase in excess mortality. During the second half of last year — 61,000 died — surpassing the fatality rate of Americans killed during the Vietnam war: 58,000 people over the course of 10 years.
<https://twitter.com/DowdEdward/status/1508885890780712960/photo/1>
Councilmembers, step away from the fraud—lawsuits are coming.
<https://thehighwire.com/videos/financial-insider-exposes-covid-fraud/>
Former BlackRock Portfolio Manager, Edward Dowd, gives Del an explosive financial perspective about everything from why he believes Pfizer and Moderna committed fraud during their clinical trials, to the dam that is breaking on the concealment of covid vaccine injuries and deaths. Let us drop ALL of the covid restrictions now. Thank you.