

Look What is Coming In New Vaccines for Covid

The alleged or so-called novel coronavirus disease 2019 (COVID-19) is still rampant all over the world, causing incalculable losses to the world. Major pharmaceutical organizations around the globe are focusing on vaccine research and drug development to prevent further damage caused by the pandemic. The messenger RNA (mRNA) technology has got ample attention after the success of the two very effective mRNA vaccines during the recent pandemic of COVID-19. mRNA vaccine has been promoted to the core stage of pharmaceutical industry, and the rapid development of mRNA technology has exceeded expectations like never imagined.

Beyond COVID-19, the mRNA vaccine has been tested for various infectious diseases and undergoing clinical trials. Due to the ability of constant mutation, the viral infections demand abrupt responses and immediate production, and therefore mRNA-based technology offers best answers to sudden outbreaks. The need for mRNA-based vaccine became more obvious due to the recent emergence of new Omicron variant. In this review, we summarized the unique properties of mRNA-based vaccines for infectious diseases, delivery technologies, discussed current challenges, and highlighted the prospects of this promising technology in the future. We also discussed various clinical studies as well preclinical studies conducted on mRNA therapeutics for diverse infectious diseases.

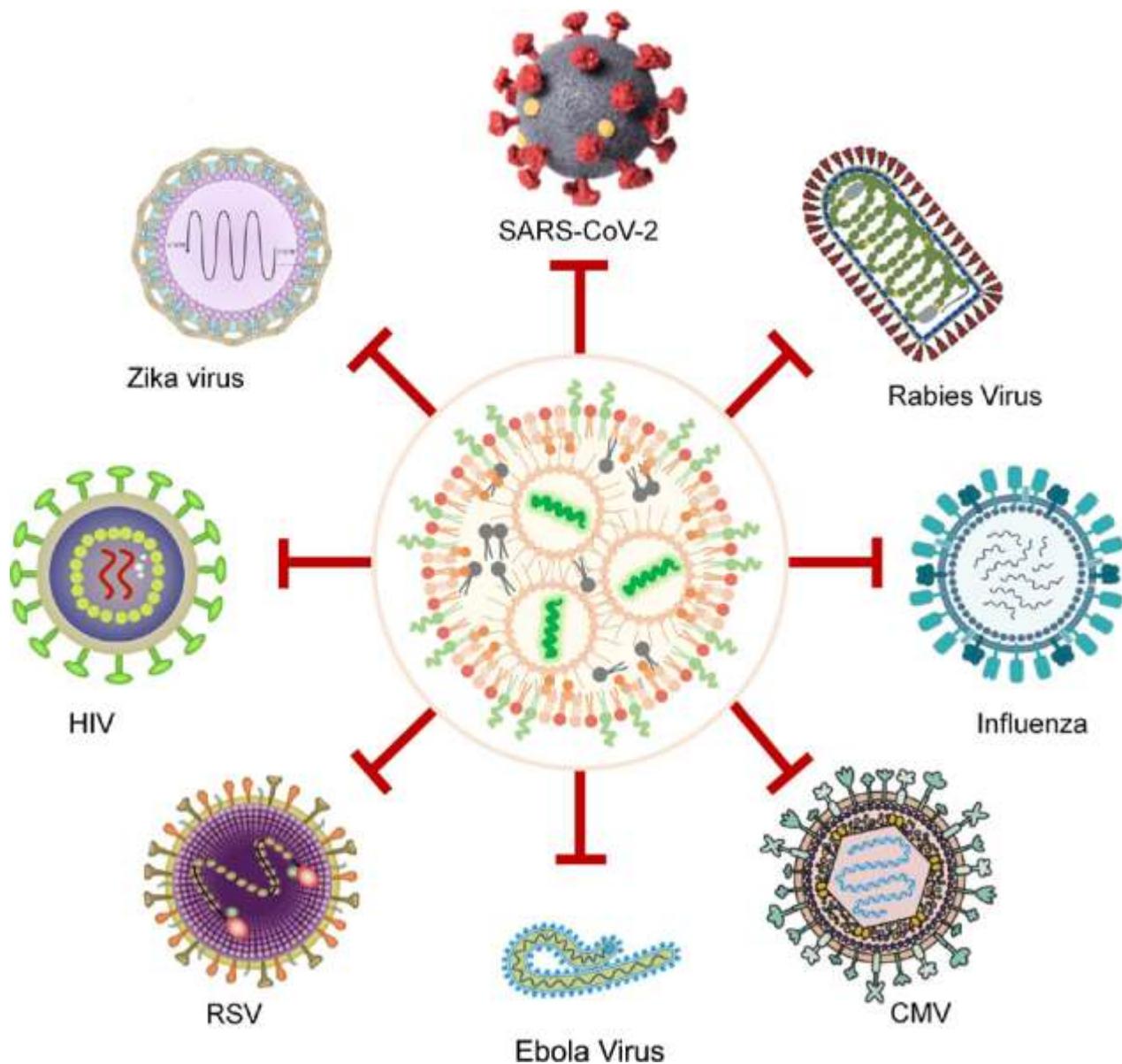
The government's NIH library known as PubMed Central site reveals that more than a hundred new vaccines are in the works for Covid-19 and its delivery. What they do not tell you is that the Covid-19 was a patented product in 2013, and 2015, and again in 2017. But it has been revealed by Dr. David L. Martin is that the U.S. has funded the "bioweapon" with taxpayer dollars going back to the 1990s. Actually from a previous statement by Dr. David L. Martin made on another interview, there are over 70 patents on the Covid-19 vaccine, between 1998 and 2019. Remember, it was Dr. Anthony Fauci of the NIAID who said Covid was a "rogue novel virus", or never seen before. Dr. Fauci is the front man for peddling the bovine excrement to frighten you!

David L. Martin was interviewed by Seth of Man In America web page back on 12/21/21. It would be worth your time to listen to a re-run of that program. You can still view it at the link just below:

[Why Does Trump Keep Promoting the Vaccine? - Gab TV](https://sage.gab.com/channel/trump_won_2020_twice/...)
https://sage.gab.com/channel/trump_won_2020_twice/...

In that hour and five minutes video you learn how our own government funded the weaponization of the virus SARSCov2. It was under enhancement for more than twenty years. Dr. Martin believes Donald J. Trump was provided false advice.

Well, get a load of what PubMed Central has coming in the months and years just ahead for all you vaccine lovers. When the government bought and paid for the vaxxes the Big Pharma had ready to roll out was an invitation to entrepreneurs wanting to make it big in the vaccine business. It is a billionaire's dream, or a budding scientist dream. PubMed Central is the NIH library of research papers dealing with all kinds of research. Below is a list of well over a hundred research papers listed for those scientists from all over the world working on the next vaccine to scare the public into taking the next time someone has discovered a "rogue novel virus". These vaccines are usually created and patented at the time of their creation as a "bioweapon" that can be released upon an unsuspecting population somewhere in the world or community that can be fear-mongered. A lot more follows the listing of research work linked to CRISPR-Cas9.



Keywords: messenger RNA (mRNA) vaccine, lipid-nanoparticle, infectious disease, drug delivery, coronavirus disease 2019 (COVID-19), virus

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It was Bill Gates of Microsoft who told Becky Quick of MSNBC at Davos, Switzerland three years ago that his investment in vaccines was a great investment opportunity, and has paid off 20-to-1. He has so many investments in vaccine technology that he has to have a manager of his investments in virus technology. Go figure how much you could have made with that kind of return. A \$10-million investment could return a profit of \$200 million. This is the reason they are going to never quit at drumming up viruses, variants, mutants, that will require a new series of vaccines.

It is sort of like the Hegelian Dialectic – “Thesis-Antithesis-Synthesis” or in everyday terms, “Problem-Reaction-Solution”.

The [Hegelian](#) dialectical formula: A (thesis) versus B (anti-thesis) equals C (synthesis). For example: **If (A) my idea of freedom conflicts with (B) your idea of freedom then (C) neither of us can be free until everyone agrees to be a slave.** The Soviet Union was based on the Hegelian dialectic, as is all [Marxist](#) writing.

I am indebted to my History professor and mentor at Waynesburg College in Pennsylvania for my knowledge and interest in how humanity is manipulated to perform on que by those wanting to enslave us, steal from us, rob us of life, liberty and the pursuit of our dreams and goals.

Hegelian Dialectic



Agenda



Thesis

Communism, Socialism ,
Bolsheviks



Anti-Thesis

National Socialism,
Fascism, Nazis



Synthesis

Oligarchy enriched by endless concocted war,
Destruction of democratic/ecclesiastical institutions,
Global Gulag and Genocide

Zionists Betrayed Jews to Holocaust
<http://wariscrime.com/news/zionists-betrayed-jews-to-holocaust/>

How The 'Problem-Reaction-Solution' Paradigm Works

1. The government creates or exploits a problem then attributes blame to others
2. The populace reacts by asking the government for protection and help to solve the problem
3. The government offers the solution that was planned by them long before the crisis occurred

Used for mainly False-Flag
Operations

Pre-Planned Problem

Pre-planned/expected
Reaction.

Pre-planned Solution.

Outcome: Rights and liberties are exchanged for the illusion of protection and help

Need I remind you that Covid-19 was pre-planned decades ago for the purpose of fear-mongering the public to take their poisoned vaxxes that are filled with nano-particles bearing unwanted gifts intended to weaken and destroy their God-given immune systems.

These so-called vaxxes are nothing but “gene” therapy that changes your DNA through a technology known as CRISPR-Cas9. They are given under EAU or Emergency Application Use. However, if you die you are considered to have voluntarily committed suicide. Insurance companies are beginning to deny death and injury claims under that provision of the law. If you survive these shots you are unable to sue for damages because you signed a release document that nullifies the vaxx maker of any liability.

Bill Gates Admits Covid Is A “Disease Mainly Of The Elderly...Kind Of Like The Flu”

[Fact checked](#)

GATES EVEN ADMITS THE VACCINES DON’T BLOCK TRANSMISSION

[August 8, 2022 Niamh Harris News,](#)

Despite pushing lockdowns and experimental vaccines and helping destroy the world’s economies, Bill Gates recently made some stunning admissions regarding Covid.

He said that the [virus was a lot like the flu and that it affected mostly elderly people](#) and that it had a low fatality rate.

His words were remarkably similar to some of the world’s top lockdown opponents who were saying the very same things since the start of the so called pandemic..

[Bill Gates Developing Vaccine That Spreads ‘Like a Virus’ To Vaccinate People Without Consent](#)

[YouTube Video VVV6MkVGRnQxczFuc091bmhwRnNHQk9RLkVad0F5STNScE1n](#)

Bill Gates Developing Vaccine That Spreads ‘Like a Virus’ To Vaccinate People Without Consent

August 1, 2022 9:14 pm

[Need to Know](#) reports: Jimmy Dore pointed out that the average age of people who were diagnosed as dying from COVID was above the life expectancy rate. Gates also admitted that COVID ‘vaccines’ do not block transmission.

Analysis from Jimmy Dore:

While Jimmy Dore subscribes to the virus theory of COVID, he does make some important points, including the fact that the average age of people who supposedly died from COVID is over the age of life expectancy! The [average lifespan](#) for a male in the US is 79 years of age, but the average age of people who died from COVID was 81.5 years of age. Dore acknowledged that it is impossible to find the actual death rate from 2020 and an account of how many people died *from* COVID rather than *with* COVID. The government’s VAERS report has the average age of death at 74 years of age.

Warning: there is some rough and vulgar language.

Full Video Interview can be found on the News Punch web site.

Sobering statements and admissions from Bill Gates in the video listed below with time stamps:

2:02 Gates promotes depopulation through birth control and said that if you improve health in poor countries, people will have only 2 children to support them in old age, instead of larger families.

12:25 Gates praised the “ruthless” contract tracing by South Korea and claims that is why it had fewer COVID deaths.

13:15 Gates recommended elderly people get vaccinated and that masks should not be viewed as a “deep infringement of freedom.”

17:50 Gates agreed that Americans should accept some restrictions on our liberties.

23:40 Gates said that in early February 2020, he was in a meeting and experts at his foundation said that there had been too much travel without a diagnosis for COVID to be contained. He said, “then, at that point, we didn’t really understand that the fatality rate, you know, we didn’t understand that it’s a fairly low fatality rate. And that it’s a disease mainly of the elderly, kind of like flu is, although a bit different than that.”

28:04 Gates said that there had never been a commercial product using mRNA, so it’s wild that it was developed so fast. He said that the COVID vaccines are imperfect in two very important ways, one, they don’t block infection. They were hoping that the vaccines would create enough antibodies in the upper respiratory tract that vaccinated people wouldn’t get infected. Said young people who don’t get very sick should take vaccines to take them out of the transmission chains.

28:50 He said that the duration of protection from COVID vaccines is going down, especially for people in their 70s, it only lasts about 5 months.

Steve Kirsch posted a tweet in which the Saudi ambassador to Egypt on Tuesday, August 8th, 2022, Muhammad al-Qahtani, fell backwards and died during a speech at a conference in the Egyptian capital, Cairo, in which he praised president A-Sisi and described him as “the dean of humanity.”

The Saudi ambassador falls back and dies instantly in public view. Yet another death in plain sight. These deaths are common after the “safe and effective” COVID vaccines were rolled out. Reality: you increase your risk of injury/death by over 20X. It is shocking how many vehicle accidents and swimming incidents are related to deaths following being vaccinated.

If you take the time to watch Dr. David L. Martin’s interview mentioned above it will not take long to conclude this is the “Final Solution” being carried out to “Depopulate” the world, as it was plainly enshrined in granite stone tablets down in Elberton, Georgia. For forty years the Georgia Guidestones stood as a beacon of “Eugenics” until it was

mysteriously bombed two months ago and then removed by a construction crew hours later.

Speaking about the “Final Solution” the global scientists are developing a pill version of the mRNA Spike Protein. This is going to be the offering to the vaxx syringe needle resistors. It is being developed by a British artificial intelligence company called DeepMind Technologies, which is a subsidiary of Alphabet, Inc. (Google). They have developed HexaPro prefusion spike protein stabilizer.

Their latest system of computerized artificial intelligence is programmed in predicting the 3D structure of proteins from sequences of amino acids, their subsequent folds, and goes by the name of AlphaFold AI.

The global agenda goal is not a benevolent solution to the SARS-CoV2 “man-made” virus. It will be a delivery system by way of “vaccines” that permanently alters the God-given design of each and every human’s DNA. Thus, condemning their soul to perdition for all of eternity, for their DNA is their actual name. I want you to think about this for a moment. “Your DNA is your real name!” You may have a name that your parents may have named you, in my case I am named after my uncle and my grandfather on my mother’s side of the family. But my name written in God’s Book of Life” is my DNA. **“And whosoever was not found written in the book of life was cast into the lake of fire.”** –(Revelation 20:15).

The convenient “final solution” to be offered to those not yet “vaxed” against SARS-CoV2, will be a sub-unit protein contained within a self-applied microneedle array patch. Bill Gates as part of his ID2020 plan showed this microneedle array patch a few years ago and in previous segments I have shown illustrations of the patch technology.

From the very beginning recipients of their first injection of any “vaccine” for SARS-CoV2 received the “Mark” of the Beast. The microneedle array patch delivery system comes later in the process and simply makes the process of receiving these technologies more conveniently for the syringe needle resistors. The initial vaccines are merely what the body recognizes as a third strand DNA segment which is then transcribed back into the DNA as RNA. The spike protein is built from amino acids, a sequence that is read by the AlphaFold AI from PDBs of existing coronavirus proteins, and thus synthesizing a new spike protein for the synthetic SARS-CoV2.

Reverse translation of these amino acids results in determining the base pair nucleotides building out as RNA. The single-strand sequence of RNA can be reverse transcribed into DNA. This defines what the entire chimeric DNA sequence will manifest as. Covid-19 became a Retrovirus once injected into the human body recipient at the time of receiving the jab.

Typically, the resultant chimeric DNA sequence would be the sequence resulting from the integration of genomic materials of the virus itself, into the host DNA. In this case, it is the reverse, with the sequence of chimeric DNA being defined by the RNA that was

translated from the amino acid sequence of the synthetic spike protein predicted and built using AlphaFold AI.

From this chimeric DNA, ordinary transcription of the DNA to RNA can take place within the nucleus. This transcribed RNA is the final product. It is the SARS-CoV2 virus itself. Thus, the AlphaFold AI designed the virus by first designing the spike protein that the virus displays around the surface membrane. Spike protein, to virus via AlphaFold AI. The name they have given this neuromorphic artificial intelligence AI is actually called "TRANSFORMER". The implications are obvious!

Over the past twenty months various spokes-people from the biochemical world or scientific community have made statements to the effect that the spike protein does not remain in the body for very long. However, the substance for these statements remains dubious at best and certainly unproven for very long. Suggestions from 90 days to six months have not been backed up with any confirming evidence.

Specifically, with respect to DNA, RNA, proteins and their *in vitro*, *in vivo* and *in silico* synthetic modifications culminating in the SARS-CoV2 "vaccine" delivery of the DNA-altering "Mark" of the Beast, found in Revelation 13:17 of the Bible, some individuals may have wanted to lessen the impact or dispute the vaxx as being the Biblical "Mark" of the Beast as a way to lessen the fear by Christians who may have regretted taken the vaxxes under duress for travel, school, and work. That said, for the FDA to approve vaxxes for children under the age of five is blatantly criminal under its shabby justification since there is no pandemic crisis for children and teens. The FDA acted arbitrarily and without concern for safety or life of the young.

The conclusion that Dr. David L. Martin makes in the interview above can be best described as "Crimes Against Humanity!" That fact becomes obvious when we have previously analyzed the medical community and its prescribed treatment of those admitted for treatment of Covid-19.

Upon admission to a once-trusted hospital, American patients with COVID-19 become virtual prisoners, subjected to a rigid treatment protocol with roots in Ezekiel Emanuel's "*Complete Lives System*" for rationing medical care in those over age 50. They have a shockingly high mortality rate. How and why is this happening, and what can be done about it?

As exposed in audio recordings, hospital executives in Arizona admitted meeting several times a week to *lower* standards of care, with coordinated restrictions on visitation rights. Most COVID-19 patients' families are deliberately kept in the dark about what is really being done to their loved ones.

The combination that enables this tragic and avoidable loss of hundreds of thousands of lives includes (1) The CARES Act, which provides hospitals with bonus incentive payments for all things related to COVID-19 (testing, diagnosing, admitting to hospital, use of remdesivir and ventilators, reporting COVID-19 deaths, and vaccinations) and

(2) **waivers of customary and long-standing patient rights** by the Centers for Medicare and Medicaid Services (CMS).

In 2020, the **Texas Hospital Association** submitted requests for waivers to CMS. According to Texas attorney Jerri Ward, “*CMS has granted ‘waivers’ of federal law regarding patient rights. Specifically, CMS purports to allow hospitals to violate the rights of patients or their surrogates with regard to medical record access, to have patient visitation, and to be free from seclusion.*” She notes that “*rights do not come from the hospital or CMS and cannot be waived, as that is the antithesis of a ‘right.’ The purported waivers are meant to isolate and gain total control over the patient and to deny patient and patient’s decision-maker the ability to exercise informed consent.*”

Creating a “National Pandemic Emergency” provided justification for such sweeping actions that override individual physician medical decision-making and patients’ rights. The CARES Act provided incentives for hospitals to use treatments dictated solely by the federal government under the auspices of the NIH. These “bounties” must be paid back if not “earned” by making the COVID-19 diagnosis and following the COVID-19 protocol. THE GOVERNMENT PAID HOSPITALS GENEROUSLY TO KILL COVID-19 VICTIMS. THIS IS NOT EVEN DEBATABLE, IT IS WELL-DOCUMENTED EVIDENCE.

The hospital payments include:

- A “free” required PCR test in the Emergency Room or upon admission for every patient, with government-paid fee to hospital.
- Added bonus payment for each positive COVID-19 diagnosis.
- Another bonus for a COVID-19 admission to the hospital.
- A 20 percent “boost” bonus payment from Medicare on the *entire hospital bill* for use of remdesivir instead of medicines such as Ivermectin.
- Another and larger bonus payment to the hospital if a COVID-19 patient is mechanically ventilated.
- More money to the hospital if cause of death is listed as COVID-19, even if patient did not die directly of COVID-19.
- A COVID-19 diagnosis also provides extra payments to coroners.

CMS implemented “value-based” payment programs that track data such as how many workers at a healthcare facility receive a COVID-19 vaccine. Now we see why many hospitals implemented COVID-19 vaccine mandates. They are paid more to do so.

Outside hospitals, physician MIPS quality metrics link doctors’ income to performance-based pay for treating patients with COVID-19 EUA drugs. Failure to report information to CMS can cost the physician 4% of reimbursement.

Because of obfuscation with medical coding and legal jargon, we cannot be certain of the actual amount each hospital receives per COVID-19 patient. But Attorney Thomas Renz and CMS whistleblowers have calculated a total payment of at least \$100,000 per patient.

What does this mean for your health and safety as a patient in the hospital? Think about the fact that re-infections of COVID are spiking to levels that will likely see an increase of victims going to local hospitals.

There are deaths from the government-directed COVID treatments. For remdesivir, studies show that 71–75 percent of patients suffer an adverse effect, and the drug often had to be stopped after five to ten days because of these effects, such as kidney and liver damage, and death. Remdesivir trials during the 2018 West African Ebola outbreak had to be discontinued because *death rate exceeded 50%*. Yet, in 2020, it was Dr. Anthony Fauci who directed that remdesivir was to be the drug hospitals use to treat COVID-19, even when the COVID clinical trials of remdesivir showed similar adverse effects.

In ventilated patients, the death toll is staggering. A National Library of Medicine January 2021 report of 69 studies involving more than 57,000 patients concluded that fatality rates were 45 percent in COVID-19 patients receiving invasive mechanical ventilation, increasing to 84 percent in older patients. Renz announced at a [Truth for Health Foundation Press Conference](#) that CMS data showed that in Texas hospitals, 84.9% percent of all patients died after more than 96 hours on a ventilator.

Then there are deaths from restrictions on effective treatments for hospitalized patients. Renz and a team of data analysts have estimated that more than 800,000 deaths in America's hospitals, in COVID-19 and other patients, have been caused by approaches restricting fluids, nutrition, antibiotics, effective antivirals, anti-inflammatories, and therapeutic doses of anti-coagulants.

We now see government-dictated medical care at its worst in our history since the **federal government mandated** these ineffective and dangerous treatments for COVID-19, and then *created financial incentives* for hospitals and doctors to use only those “approved” (and paid for) approaches.

Our formerly trusted medical community of hospitals and hospital-employed medical staff has effectively become “bounty hunters” for *your life*. Patients need to now take unprecedented steps to *avoid* going into the hospital for COVID-19.

Patients need to take active steps to plan before getting sick to use early home-based treatment of COVID-19 that can help you save your life.

Blessings,

Pastor Bob, EvanTeachr@aol.com
www.pastorbobreid.com
<http://jesusisthewaytheruththelife.com/node/22>