

Mass Murder

Part 30

MANIPULATION: 40-45% of “COVID Hospitalizations” Had Some Other Reason for Admission, New Study Reveals

by: [Sara Middleton, staff writer](#) | September 22, 2021

[NaturalHealth365](#)) The main message last year of Big Pharma, news media, and government officials was that getting a COVID shot would help stop the spread of SARS-CoV-2. It was your “duty” as a citizen to do the right thing and help protect others (never mind that there are both known and unknown risks to these mRNA jabs – risks you must assume in full).

Lately, officials have changed their tune since data shows fully jabbed people can still catch and spread the so-called pandemic virus. Now, if you end up testing positive for COVID-19 even after your jabs, at least you’re less likely to get seriously ill or be sent to the hospital. While data suggests this is true, a new study reveals that the number of COVID hospitalizations is entirely misleading.

COVID-19 hospital rates exaggerated, breaking study reveals:

A new study available for preprint only (yet to be peer-reviewed) revealed some jaw-dropping clarifications about coronavirus hospitalization rates across the country.

The study, called “The COVID-19 Hospitalization Metric in the Pre- and Post-vaccination Eras as a Measure of Pandemic Severity: A Retrospective, Nationwide Cohort Study,” analyzed admissions data of patients in the U.S. Department of Veterans Affairs (VA) healthcare system from March 1, 2020, through June 30, 2021.

Incredibly, the study authors found that only 52% of people admitted with COVID-19 to VA hospitals during this time had a moderate-to-severe disease, whereas 48% had only mild or asymptomatic disease. (The authors defined moderate-to-severe COVID-19 disease as the use of any supplemental oxygen or documented blood oxygen levels of less than <94% among people testing positive for [SARS-CoV-2](#).)

Even before widespread jab availability, nearly 40% of all [COVID hospitalizations](#) were classified as mild or asymptomatic. Disease severity, the authors continue, is currently lower for both unvaccinated and vaccinated patients compared to disease severity before the jab rollout.

In other words:

Close to half of all hospitalizations linked with a positive COVID-19 test are essentially due to incidental findings. Given how hospital rates influence public policy measures, patients admitted with (and not from) COVID-19 should *not* be counted as COVID hospitalizations, says study co-author and infectious disease epidemiologist, Dr. Shira Doron.

With more people in hospitals – and fewer staff members to care for them – is firing healthcare workers really in the best interest of American communities?

Back in late August, over 100,000 people in the United States were hospitalized with COVID-19, according to the U.S. Department of Health and Human Services. In the context of the preprint study we just learned about, it's important to pay attention to language here: these were people hospitalized *with* COVID-19, and not necessarily *for* COVID-19.

Indeed, it's a tragedy to see anyone hospitalized, but there's one factor routinely being ignored: hospitals around the country are facing critical staffing shortages – many have been since *before* the pandemic. The added strain of the pandemic appears to have heightened an issue long facing many of our country's medical systems.

This genuinely calls into question the push to fire healthcare workers who are choosing not to get the COVID shot right now. After all, if staff shortages are that dire and hospitals that full – *and if fully jabbed people can still spread the disease anyway* – why not provide reasonable accommodations to anyone who declines the jab so that they can continue working and helping with this crisis?

Evidence, including a 2021 study published in *Occupational & Environmental Medicine*, does suggest that healthcare workers are considered high risk for COVID-19 and are more likely to get seriously ill than people in other professions. But so far, most of this data is observational (no cause and effect links can be drawn), and the absolute likelihood of healthy people getting seriously ill is still low.

In any case, none of these points supersede the fact that people reserve the right to bodily autonomy and informed consent.

WORLD BOMBSHELL: Leaked DARPA document, DRASTIC analysis confirms attack on humanity using aerosolized, skin-penetrating nanoparticle spike proteins

Thursday, September 23, 2021 by: [Mike Adams](#)



(Natural News) Prepare for a flood of intel in today's Situation Update podcast shown below. Beyond the world bombshell **DARPA document leaked to DRASTIC**, which shows that **EcoHealth Alliance and Fauci conspired to release aerosolized, skin-penetrating spike protein nanoparticles into wild bat populations in China (which would immediately leap to humans as planned)**, we also have bombshell intel about something else that makes it even worse.

DRASTIC has confirmed that Daszak and Fauci, working via the Wuhan Institute of Virology (WIV) were able to create 180 strains of coronavirus bioweapons and put them under the control of the communist Chinese (an act of treason). We now know from other sources that CCP-run bioweapons deployment teams have crossed the U.S. border, carrying MERS-augmented biological weapons with at least a 30% fatality rate, with plans to release them in major U.S. cities when commanded to.

With full credit to DRASTIC, we have mirrored their PDF analysis of the DARPA documents [at this link on NN servers \(PDF\)](#).

The original EcoHealth Alliance proposal to DARPA is numbered HR001118S0017-PREEMPT-PA-001

Investigative journalist Lara Logan has confirmed all this through her own sources, as she is now warning that [the migrant crisis in Texas is the "perfect](#)

[cover” for America’s enemies to sneak in a dangerous biological weapon.](#) Our sources, who have been in touch with Logan, have confirmed she knows much more but isn’t yet at liberty to go public with the full details.

We have the full details here. Read these bullets carefully. **This is the plan that’s now under way, to the best of our knowledge. It’s far worse than you probably imagined. The “Super MERS” attack is now imminent, and the bioweapons deployment operators are already pre-positioned across US cities, likely armed with drones and aerosolizing drone attachments. We are about to be sprayed with a super dangerous biological weapon:**

- DARPA originally funded MERS but refused to support any effort to release it into the wild. They wanted to keep it as a strategic, last-ditch biological weapon for extreme emergencies.
- Fauci and EcoHealth Alliance finagled a way to get their hands on MERS, which became the template for the gain of function research that was laundered through the WIV, using US taxpayer money. Elements from MERS, HIV, SARS and other viral strains were engineered together to create the “chimeric” bioweapons with special affinity for human ACE2 receptors.
- Daszak and Fauci approached DARPA to request funding to release their bioweapons in China. DARPA refused. But they found funding through globalist sources that support depopulation.
- Had DARPA agreed to the funding, Daszak and Fauci had planned to invite Shi Zheng Li (the “Bat Lady”) to a celebration announcement at DARPA headquarters!
- SARS-CoV-2 was never designed to kill. It was designed to spread rapidly, with low fatality, to create worldwide panic and demand for vaccines, along with government lockdowns and global communism due to “cases” diagnosed via fraudulent PCR tests.
- But MERS is a super deadly bioweapon. This will be released next, a souped-up version of MERS that has been weaponized via Fauci, the NIH and the WIV under the control of the PLA (People’s Liberation Army).
- The EcoHealth Alliance project proposal to DARPA mentions their plans to develop three to five coronavirus bioweapon strains each year. This was to be an ongoing, never-ending assault on humanity via biological weapons, all funded by the US military working with communist China.
- We don’t yet know the official designation of this MERS bioweapon, but I’ll call it “Super MERS” for now. Super MERS is already in the hands of PLA

operators who have crossed into the United States via Mexican narco smuggling routes. The CCP / PLA have hundreds of military advisors working with Mexican narcos, with the promise that the narcos will receive a piece of the southern USA once China occupies and defeats the United States.

- These Chinese bioweapons operatives are told to simultaneously release “Super MERS” across US cities when given the activation command, which could come via public means such as the ‘*New York Times*’ being ordered by China to use a certain phrase on a certain day. (The NYT has long been on China’s payroll, just like most Democrats, half the U.S. Senate and all of Big Tech). The White House is almost completely controlled by the CCP, and Biden is China’s puppet.
- This Super MERS strain will kill at least 30% of those who are infected, under normal circumstances. But because the covid vaccines have destroyed the immune response among vaccinated individuals, the death rate in the vaccinated may be significantly higher. (50%?)
- The Super MERS strain is effectively the second half of the binary weapon system, with the first half being the vaccine. This is why tyrannical government has pushed so hard for mass vaccinations. It’s the setup for the kill. The Biden administration has been working with China all along to try to achieve a 70% vaccination rate in the USA, which would translate into an overall kill rate of at least 20% of the US population once Super MERS is released. This translates into about 70 million people, roughly speaking. Or more than ten times the death statistics of the Nazi Holocaust.
- The release of Super MERS cannot be stopped. The agents are already in place. The border has long been penetrated. America’s military was ordered to stand down during all this, via treasonous Pentagon criminals like Milley and Austin. The left-wing media is all in on this, as is Big Tech. They are all taking orders from China.
- The release of Super MERS will be called a “variant” by the criminal government, and they will blame the unvaccinated while activating the CDC’s covid death camps to round up political dissidents and begin mass executions.

Map of the CDC’s current “quarantine stations” which will be transmorphed into covid death camps. Source: [CDC.gov](https://www.cdc.gov)

From the CDC.gov website:

“CDC has the legal authority to detain any person who may have an infectious disease that is specified by Executive Order to be quarantinable.”



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“CDC has the legal authority to detain any person who may have an infectious disease that is specified by Executive Order to be quarantinable.”

Treasonous imposter Joe Biden [recently signed an EU adding measles to this list of quarantinable diseases](#). Thus, any political dissident can be “diagnosed” with measles via fraudulent PCR testing, then forcibly thrown into a quarantine death camp run by the CDC.

The State of Washington recently [posted a public jobs ad calling for “Isolation & Quarantine strike team” coordinators](#) to help run its own quarantine camp in Centralia, WA. When the public became aware of this ad, Washington government goons scrambled to remove the “strike team” phrase from the job listing and stealth edited it to pretend that it was just an ad for people to do laundry and change bed sheets. (Yes, really.)

Menu > STATE OF WASHINGTON JOB OPPORTUNITIES Sign In

Isolation & Quarantine Strike Team Consultants (PS2) – Non-Permanent – DOH5814 APPLY

Salary	\$3,294.00 - \$4,286.00 Monthly	Location	Lewis County – Centralia, WA
Job Type	Full Time - Non-Permanent	Department	Dept. of Health
Job Number	DOH5814		

[DESCRIPTION](#) [BENEFITS](#) [QUESTIONS](#)

At the same time, we are hearing rumors that military personnel who refuse vaccinations are being loaded onto buses and forcibly isolated / quarantined by the military until they agree to be vaccinated. This isn't happening everywhere (yet). Our report is from a single military base, but this practice could spread.

China will very shortly initiate the bioweapons release in America, likely followed by cyber attacks and financial system tactics

While the exact timing on all this is always difficult to know, it appears China will soon initiate its bioweapons attack on America, making covid look like child's play. Once this commences, anyone who doesn't take Super MERS seriously will be in grave danger. This will be a time to truly stay away from public places and avoid large cities where it is likely that Chinese operatives will use drones to disperse aerosolized, skin-penetrating toxic nanoparticles based on the MERS research.

Yes, America's cities are about to be "gassed" / sprayed with deadly poison, much like Zyklon B (except at a much larger scale).

Cyber attacks will likely be timed to coincide with this planned chaos and biowarfare death wave, and it seems almost certain that China will choose this moment of vulnerability to assault America's financial standing — i.e. the world reserve currency status of the petro dollar.

Very quickly, America could lose:

- A third of its active duty military personnel, due to the mass vaccinations.
- A third of the US population living in targeted cities.
- World reserve currency status for its fiat currency dollar, which would collapse to near-zero value overnight.
- The power grid could go down, regionally, due to cyber attacks, plunging areas of the country into darkness.

At the same time, armed state and federal government agents would be unleashed as “strike teams” against the population, aiming to achieve:

- Nationwide gun confiscation
- Mass executions of political dissidents
- Medical kidnappings, quarantines and executions of large populations in order to achieve depopulation
- Total government control over all movement, speech and medical interventions

Expect highway checkpoints, vaccine papers, on-site executions, door-to-door medical kidnappings and every nightmare of government terrorism against the people that you could possibly imagine.

More details are found in today’s Situation Update podcast:

[Brighteon.com/358dc7fe-2580-40c6-8a90-13a13175caf5](https://www.brighteon.com/358dc7fe-2580-40c6-8a90-13a13175caf5)

Prepare to be sprayed with aerosolized, skin-penetrating toxic nanoparticles. It’s all in the DARPA proposal (which DARPA refused to fund, thankfully), and the depopulation agenda is now abundantly obvious to everyone paying attention.

[The fact is we have been sprayed with aerosol chemtrails for more than 25 years from altitudes used by aviation. Drones are restricted to height below 400 feet by the FAA. This is considered ideal for direct attacks on specific targeted individuals, groups, populations.]

The Emperor Has No Clothes: COVID Math Simply Doesn’t Add Up

[The Defender | September 23, 2021](#)

From the beginning of the series of events branded as a global health emergency, many people have smelled a rat.

Whether one looks at leaders’ willingness to engage in wanton [economic destruction](#), or the rapidity with which billionaires have [amassed new wealth](#) or the [multisectoral efforts](#) to [link](#) and [mine](#) people’s intimate data, it is not hard to recognize that something much [larger than a health crisis](#) is afoot.

However, even if one restricts oneself to the narrow confines of the health narrative, 18 months of data — emerging in spite of ferocious censorship — have repeatedly illustrated that the official story is full of lies and omissions.

One of the biggest holes in the story is the trail of destruction that the [experimental COVID vaccines](#) are leaving in their wake, with [hundreds of thousands](#) of reported injuries in the U.S. alone and, [according to some statisticians](#), as many as 150,000 dead Americans.

With this level of damage after just nine months, now is as good a time as any to reexamine “COVID math” and highlight some of the embedded falsehoods that

cast serious doubt on official and corporate [pronouncements](#) about risks and benefits.

The false case for vaccinating kids:

Pfizer's CEO, veterinarian Albert Bourla, is currently drumming up buzz in anticipation of a likely decision by the U.S. Food and Drug Administration (FDA) to green-light emergency use of his company's COVID vaccine in [children ages 5-11](#). To buttress his arguments, Bourla [claims](#) that pediatric COVID cases are on the rise.

However, setting aside the [questionable PCR testing](#) methodology being used to identify these "cases" (that is, until the Centers for Disease Control and Prevention (CDC) [retires](#) the PCR test at the end of the year), recent studies show reported COVID-19 hospitalizations — "one of the primary metrics for tracking the severity of the coronavirus pandemic" — have been [grossly inflated](#) for children. In actuality, pediatric COVID hospitalization rates are "vanishingly small."

One fact, especially, bears repeating: Through age 19, children and adolescents have a [99.9973%](#) COVID-19 survival rate. This information, which has been a constant throughout the reported pandemic, is reiterated in the most recent analyses by Stanford physician, epidemiologist and statistician John Ioannidis, who has been a steadfast [critic](#) of COVID alarmism from the very beginning.

And Ioannidis's good news does not stop with the 19-and-under. Until people hit their seventies, all age groups have survival rates [well over 99%](#):

- 0-19: 99.9973%
- 20-29: 99.986%
- 30-39: 99.969%
- 40-49: 99.918%
- 50-59: 99.73%
- 60-69: 99.41%
- 70+: 97.6% (non-institutionalized)
- 70+: 94.5% (institutionalized and non-institutionalized)

As *Off-Guardian's* Kit Knightly [wrote](#) about [another Ioannidis study](#) this past spring, "With every new study, with every new paper, the 'deadly' pandemic gets less and less, well, deadly."

At that time, Ioannidis ascertained that the global infection fatality rate was 95% lower than the one disseminated by the World Health Organization (WHO).

Risks: the example of myocarditis:

Commenting on the pediatric hospital studies — in which more than half of the children entered the hospital for reasons having nothing to do with anything resembling COVID — a reporter [wrote](#), "*The implications ... are enormously*

important, as reports of pediatric hospitalizations have regularly made headlines over the past year, greatly affecting public perceptions about risks to children.”

Those headlines and perceptions likely will prompt some parents to rush into the waiting arms of their local vaccinator.

Bourla and other [Pfizer](#) executives have remained mum about the many 12- to 17-year-olds who are ending up [hospitalized](#) and [injured](#) after taking the company’s experimental mRNA product.

Sadly, the [post-job statements](#) made by these disabled teens and their parents share a common refrain: influenced by skewed media reports from some corners, and without the benefit of information censored in other corners, they were not aware of the risks.

What are some of those risks?

A study out of Ottawa recently estimated that one of every 625 [Moderna](#) doses administered results in [myocarditis](#) (heart inflammation), as does an estimated one in 2,500 doses of the [Pfizer](#) shot, with a “tight temporal association between receipt of mRNA vaccine and subsequent development of symptoms in a relatively short time frame afterwards.”

The Ottawa authors pointed out that their estimates — based on “direct investigation of patients” that were *“largely in the vulnerable 18- 30 age category” — were tenfold higher than the incidence produced by a less rigorous study that looked only at “administrative health data.”*

The authors also noted the relevance of their findings for the “ongoing public debate regarding proposals for vaccination of children under the age of 16.”

According to another [new study](#), healthy boys between the ages of 12 and 15, with no underlying medical conditions, were four to six times more likely to be diagnosed with vaccine-related myocarditis than they were to be hospitalized with COVID.

The Ottawa study may have pointed more of a finger at the Moderna shot, but a late August [CDC update](#) on heart problems reported to the [Vaccine Adverse Event Reporting System](#) (VAERS) in the aftermath of COVID vaccination suggests the Pfizer injection may be equally treacherous, especially for young men.

Using a statistically credible estimate that VAERS data are [underreporting COVID injuries by a factor of 41](#), [Steve Kirsch](#) (founder of the COVID-19 Early Treatment Fund) has [calculated](#) (slide #15) that roughly one in 318 boys ages 16 and 17 can be expected to develop myocarditis after two Pfizer doses, and a third booster dose of the Pfizer vaccine could escalate that risk to a frightening one in 25.

Another [recent look at VAERS data](#) by *Health Impact News* showed that in 2021, to date, 12- to 19-year-olds have been 50 times more likely to experience heart problems after receiving experimental COVID shots — and nearly eight times more likely to die — compared to all other FDA-approved vaccines combined.

Considering adverse events reported to VAERS over the past decade for all vaccines combined, there has been a “highly anomalous” [1,000% increase](#) in total adverse events reported thus far for 2021.

With these kinds of findings, the [pushback](#) against giving children the shots is growing louder and stronger.

The authors of a [just-published study](#) in *‘Toxicology Reports’* openly ask, “*Why are we vaccinating children against COVID-19?*” They warn that younger age groups could experience longer-term effects (such as myocarditis) “that, if serious, would be borne by children/adolescents for potentially decades.”

Safe treatments withheld, dangerous protocols incentivized.

John Ioannidis’s new study shows that [institutionalization](#) negatively skews outcomes for the 70-plus age group. Whereas the survival rate is 97.5% for the community-dwelling elderly 70 or older, it falls to 94.5% when institutionalized elderly in that age group are included in the count.

Why are the institutionalized elderly faring so poorly? In the UK, [reporters](#) and [undertakers](#) have furnished one possible answer, sharing troubling on-the-ground descriptions about illegal euthanasia alleged to be taking place on a widespread basis in care homes as well as hospitals.

In the U.S., meanwhile, regulators, hospitals and pharmacies have implemented equally disturbing policies that require [withholding](#) inexpensive drugs, such as [ivermectin](#) and [hydroxychloroquine](#) — shown elsewhere to be effective and safe — while essentially forcing hospitalized COVID patients onto protocols that are not only unhelpful but [murderous](#).

Mexico City achieved up to a [76% reduction](#) in COVID hospitalizations by making ivermectin-based home treatment kits widely available. With evidence like this, why are U.S. hospitals stubbornly adhering to life-threatening protocols involving remdesivir (known to produce [fluid in the lungs](#) and [longer hospital stays](#)) and intubation?

One rather dark answer is that hospitals are not only [immune from liability](#) for any fatal outcomes resulting from this approach but receive hefty federal [payments](#) — including a 20% Medicare “[add-on](#)” that may sum up to as much as [\\$40,000](#) for patients who spend four or more days on a ventilator.

Although hospitals may hasten to refute that these factors are at play, the growing number of [hospital whistleblowers](#) is becoming hard to ignore.

In March, Baylor University's Dr. Peter McCullough lamented that as many as [85% of COVID deaths](#) could have been prevented with early treatment using ivermectin and other formerly commonplace drugs disallowed by regulators and for which [U.S. pharmacies](#) will no longer fill "off-label" prescriptions.

There is [international agreement](#) with McCullough's position that "*large reductions in COVID-19 deaths are possible using ivermectin,*" and the U.S.-based Front Line COVID-19 Critical Care (FLCCC) Alliance [describes](#) the drug as potentially the "global solution to the pandemic."

However, instead of applauding these advocates of early intervention for their efforts to save lives, they have become, according to mRNA vaccine inventor Dr. Robert Malone, the focus of intense "[coordinated strategies](#)" to subject them to "derision and attacks and character assassination."

Those 'anomalous' deaths:

In analyses presented by Steve Kirsch to the FDA (slide #6), Kirsch summarized data showing the COVID vaccines are [killing more people than they are saving](#) — including producing six excess deaths for each life reportedly saved in nursing home residents, and five excess deaths per life saved according to Pfizer's early clinical trial data.

Independent statisticians estimate the injections are linked to roughly [470 deaths per million doses administered](#). (By way of comparison, CDC researchers once conceded that smallpox vaccination was responsible for [one death per million](#).)

In February, studies out of Israel were already showing the Pfizer shot (the only one used in Israel) was causing "*mortality [hundreds of times greater](#) in young people compared to mortality from coronavirus without the vaccine, and dozens of times more in the elderly.*"

Investigative journalist Corey Lynn of *Corey's Digs* pointed out the CDC's methodology for calculating COVID vaccine-related deaths is [highly misleading](#) because it is based on the number of doses administered, rather than on the number of people who receive injections.

Lynn's analysis shows this methodology reduces the percentage of deaths almost by half, "[an incredible mathematical error, surely done with intention.](#)"

Another CDC ploy for undercounting the damage done by the COVID injections has to do with the agency's [definition](#) of "fully vaccinated. The CDC currently considers as "unvaccinated" anyone who is not two weeks out from their second dose (in a two-dose series) or two weeks out from a single-dose vaccine. (And

as [Children's Health Defense](#) President Mary Holland recently [pointed out](#), “unvaccinated” could “soon mean anyone who’s missing the latest booster dose,” with even more boosters likely in store down the road.)

Given that 17% of the deaths reported to VAERS have occurred [within 48 hours](#) of COVID vaccination, it is clear many U.S. vaccine deaths are being counted as “unvaccinated” deaths and misattributed to COVID-19 or other causes.

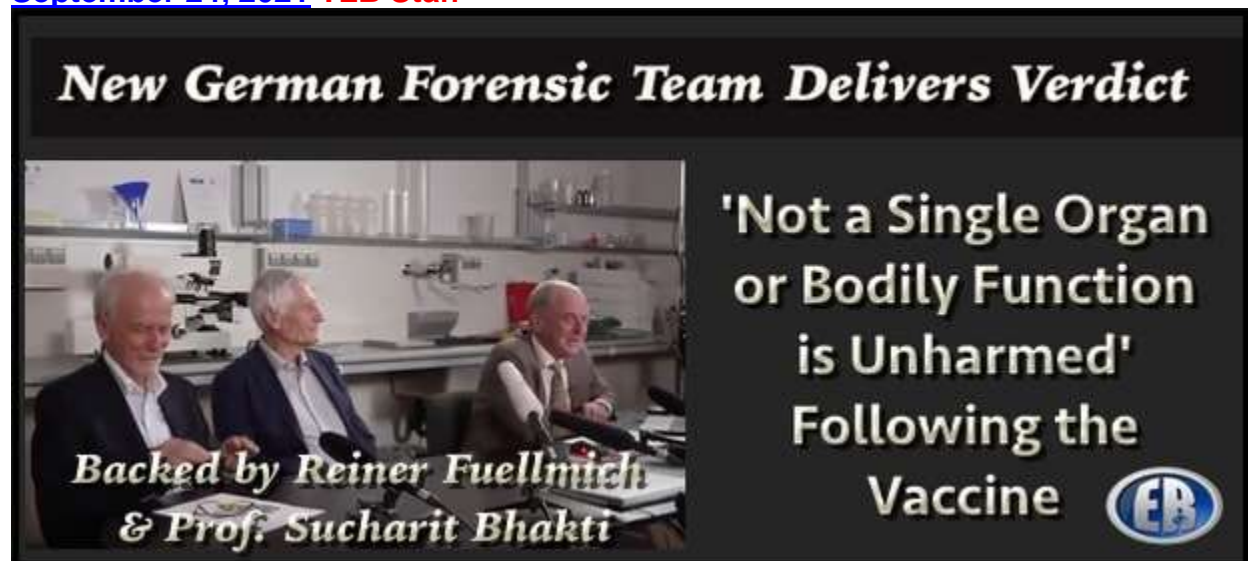
In the UK, however, public health data show that [80%](#) of “COVID-19” deaths in August were in people who had been vaccinated, and hospitalization rates were 70% higher in the vaccinated than in the unvaccinated.

Increasingly, members of the public are not fooled by the statistical shenanigans. When a Detroit TV channel recently tried to drum up hostility against the unvaccinated by asking viewers to submit tales of recalcitrant uninjected relatives dying from COVID-19, they instead got [more than 182,000 comments](#) about loved ones who had died or been injured after receiving one or more COVID shots.

These replies provide [compelling evidence](#) that what we are now experiencing is a “pandemic of the vaccinated.”

Germany: Out of 10 Autopsies, 7 Deaths are ‘Probably’ Linked to the Vaccines

[September 24, 2021](#) TLB Staff



Germany: out of ten autopsies, five deaths would be “very probably” linked to vaccines
FRANCE SOIR

Backed by Professors Sucharit Bhakdi, Stefan Homburg and Reiner Fuellmich's Corona Ausschuss, a new forensics institute held its first press conference on Monday to present the evidence now available on the fatal accidents that may have resulted from so-called anti-covid injections.

According to a report in the German newsletter Corona Transition, forensic scientists Prof. Arne Burkhardt and Prof. Walter Lang presented the results of ten autopsies performed on six Germans and four Austrians, all of whom died as a result of the injections, in Reutlingen on Monday 20 September. The autopsies are the result of a collaborative effort by several forensic experts in Austria and Germany; other autopsies are still being evaluated.

They were performed at the formal request of the families. Of the ten deaths, seven are "probably" related to the injections, five of which are "very probably" related. For the last three cases, one remains to be evaluated, another appears to be "coincidental", and for the last, the link "is possible but not certain".

A "crisis of lymphocyte madness"

Accompanied in Reutlingen by Prof. Werner Bergholz, a quality expert who was responsible for monitoring their work, Prof. Burkhardt and Prof. Lang summarized the consequences of the injections as a "lymphocyte madness crisis" (Lymphozyten-Amok). Lymphocytes are a subset of white blood cells associated with immune responses.

The main factors of this lymphocyte madness that they observed were these:

- Excessive immune response with risk of autoimmune disease (self-to-self attack)**
- Excessive production of lymphocytes (hyperplasia)**
- Appearance of lymph nodes in organs where they should not be, unless they are destructive (in the liver, lungs, uterus, thyroid gland, salivary glands etc.)**
- And also, a "destocking" (Entspeicherung) of the lymphatic organs, which decreases the external immune capacities.**

During these autopsies, the two forensic doctors were confronted with disease profiles that were unknown to them until then. While it cannot be said that vaccination was the sole cause of death – because death is always multifactorial, "not a single organ, not a single bodily function, is unharmed" following an injection, according to Professor Burkhardt.

Three extremely rare autoimmune diseases:

Particularly strange and unexpectedly, Dr. Arne Burkhardt discovered three extremely rare autoimmune diseases during these autopsies: Sjögren's syndrome, leukoclastic vasculitis of the skin, and Hashimoto's disease.

As for lymphocytic myocarditis, the most common diagnosis, it is difficult to detect even under the microscope and is often interpreted as simple infarction. Currently under investigation: the risk of post-vaccination death caused by pathologies of the endothelium, vasculitis, perivasculitis and erythrocyte agglutination.

Prof. Bergholz, a quality expert, explained how the term “probability” should be understood in this specific context. In recent years, only 20 deaths in Germany have been linked to vaccinations. In contrast, between January and July 2021, i.e. since the start of the anti-covid campaign, 80 to 90 million injections have been administered in Germany, followed by 1,230 reports of deaths as vaccine accidents. This is at least ten times the number of deaths compared to conventional vaccines, not to mention the tens of thousands of vaccine accidents that did not immediately result in death.

“Never in the history of medicine...”

The forensic scientists observed that the Paul Ehrlich Institute, which is responsible for recording vaccine accidents in Germany, makes access to accurate data very arduous, even for a specialist, unlike the Norwegian or English pharmacovigilance. The forensic scientists showed many slides, some of which showed foreign bodies lodged in the tissue, such as steel. The manufacturers replied that steel is used for prostheses, which they consider unacceptable. One of the first to perform autopsies was Prof. Klaus Püschel from Hamburg: he concluded that the vast majority of the people he autopsied, who theoretically died of “Covid-19”, had in fact died of other diseases.

Supported by Prof. Dr. Sucharit Bhakdi and by Reiner Fuellmich’s Corona Ausschuss, Prof. Burkhardt agreed in July 2021 to lead this work within an association of type 1901 Mediziner und Wissenschaftler für Gesundheit, Freiheit und Demokratie, e.V.” (MWGFD – Doctors and Scientists for Health, Freedom and Democracy) because “never in the history of medicine (...) have so many serious accidents and deaths occurred in the vicinity of a vaccination”. The costs of the autopsies are covered by the association, which is managed by Prof. Dr. Stefan Homburg, professor emeritus of public finance at Leibniz Universität Hannover.

The conspiracy theorists were right; it IS a “poison-death shot”
Thursday, September 23, 2021 by: [News Editors](#)

([Natural News](#)) “I’ll do one more mind experiment with you: If everyone on the planet were to get Covid and not get treated, the death-rate globally would be less than half a percent. I’m not advocating for that, because 35 million people would die. However, if we follow the advice of some of the global leaders– like Bill Gates who said last year said “7 billion people need to be vaccinated”– then the death-rate will be over 2 billion people! SO, WAKE UP! THIS IS WORLD WAR 3! We are seeing a level of malevolence that we haven’t seen in the history of humanity!”

Dr. Vladimir Zelenko, Author of The Zelenko “Early Treatment” Protocol that saved thousands of Covid-19 patients. ([“Zelenko schools the Rabbinic Court”](#), Rumble; start at 11:45 minutes)

(Article by Mike Whitney republished from [Unz.com](#))

Did the regulators at the FDA know that all previous coronavirus vaccines had failed in animal trials and that the vaccinated animals became either severely ill or died?

Yes, they did.

Did they know that previous coronavirus vaccines had a tendency to “enhance the infection” and “make the disease worse”?

Yes.

Did Dr. Anthony Fauci know that coronavirus vaccines had repeatedly failed and increased the severity of the infection?

Yes, he did. (See here: [Fauci on ADE](#))

Did the drug companies conduct any animal trials prior to the FDA’s approval that would have convinced a reasonable person that the vaccines were safe to use on humans?

No, they didn’t.

Did they complete long-term clinical trials to establish whether the vaccines were safe?

No, there were no long-term clinical trials.

Did they conduct any biodistribution studies that showed where the substance in the injection goes in the body?

They did, but the data was not made available to the public.

Do the contents of the vaccine largely collect in various organs and in the lining of the vascular system?

Yes, they do.

Do large amounts of the substance accumulate in the ovaries?

Yes.

Will this effect female fertility and a woman's ability to safely bring a baby to term?

The drug companies are currently researching this. The results are unknown.

Does the vaccine enter the bloodstream and collect in the lining of the blood vessels forcing the cells to produce the spike protein?

Yes.

Is the spike protein a "biologically active" pathogen?

It is.

Does the spike protein cause blood clots and leaky blood vessels in a large percentage of the people that are vaccinated?

It does, although the blood clots are mostly microscopic and appear in the capillaries. Only a small percentage of vaccinees get strokes or suffer cardiac arrest.

Should people be made aware of these possible bad outcomes before they agree to get vaccinated? ("Informed consent")

Yes.

Did the FDA know that Pfizer had "identified vaccine-associated enhanced disease, including vaccine-associated enhanced respiratory disease, as an important potential risk"?

Yes, they did, but they did not demand that Pfizer fix the problem. Here's more:

"The FDA noted that Pfizer, "identified vaccine-associated enhanced disease, including vaccine-associated enhanced respiratory disease, as an important potential risk". The EMA similarly acknowledged that "vaccine associated enhanced respiratory disease" was "an important potential risk... that may be specific to vaccination for COVID- 19".

Why neither regulator sought to exclude such dangers prior to emergency use authorization is an open question that all doctors and patients are entitled to ask. Why medical regulators failed to investigate the finding that large vaccine particles cross blood vessel walls, entering the bloodstream and posing risks of blood clotting and leaky vessels is yet another open question again." ([Open Letter to the EMA and European Parliament](#)“, Doctors for Covid Ethics)

Did the drug companies vaccinate the people in the placebo group after the clinical trials in order to conceal the difference in the long-term health outcomes between the two groups?

That is the conclusion a rational person would make.

So, they nuked the trials?

Yes.

Did the FDA largely shrug-off its regulatory duties and abandon its normal standards and protocols because

a– It wanted to rush the Covid vaccines into service as rapidly as possible?

b– It knew the Covid-19 vaccine would never meet long-term safety standards?

We don't know yet, but the adverse events report strongly suggests that the Covid-19 vaccine is hands-down the most dangerous vaccine in history.

Is the FDA rushing the “boosters” without proper testing?.

Yes, it is. Here's a clip from author Alex Berenson's latest at Substack:

“Pfizer basically hasn't bothered to test the booster AT ALL in the people actually at risk – it conducted a single “Phase 1” trial that covered 12 people over 65. The main Phase 2/3 booster trial (beware efforts to cover multiple “phases” of drug research at once, you want it bad you get it bad) included no one over 55.

No one.

As in NONE.” ([“Are you kidding me, Pfizer, volume 1 gazillion“](#), Alex Berenson, Substack)

Have the boosters been modified or improved to meet the changes in Delta variant?

No.

Is there any additional risk in taking a booster-shot after already taking two experimental gene-based vaccines in less than a year?

Considerable risk. Here's more from the Doctors for Covid Ethics:

“Given that booster shots repeatedly boost the immune response to the spike protein, they will progressively boost self-to-self immune attack, including boosting complement-mediated damage to vessel walls.

Clinically speaking, the greater the vessel leakage and clotting that subsequently occurs, the more likely that organs supplied by the affected blood flow will sustain damage. From stroke to heart attack to brain vein thrombosis, the symptoms can range from death to headaches, nausea and vomiting, all of which heavily populate adverse reactions to COVID-19 vaccines.

As well as damage from leakage and clotting alone, it is additionally possible that the vaccine itself may leak into surrounding organs and tissues. Should this take place, the cells of those organs will themselves begin to produce spike protein, and will come under attack in the same way as the vessel walls. Damage to major organs such as the lungs, ovaries, placenta and heart can be expected ensue, with increasing severity and frequency as booster shots are rolled out.” ([“Open Letter to the EMA and European Parliament”](#), Doctors for Covid Ethics)

So, it’s the double-whammy. On the one hand, the booster will perform largely like the original vaccine, penetrating cells and forcing them to produce spike protein which, in turn, generates blood clots and leaky blood vessels. And, on the other, the newly-produced S proteins trigger a damaging immune response in which the complement system attacks and destroys the cells that line the inside of the blood vessels. **Every additional booster will intensify this process weakening the vascular system and increasing the clotting. If the Doctors are correct in their analysis, then we could see a sharp uptick in all-cause mortality in the heavily-vaccinated countries in less than a year. Cardiac arrests are already rising.**

Here’s another question that’s worth mulling over: Was there any reason for the regulators at the FDA to think that these problems would not arise following the launching of the vaccine campaign?

No. They should have known there would be problems as soon as they saw that the vaccine did not stay in the shoulder as it was supposed to. The vaccine wasn’t supposed to enter the bloodstream and spread across the body leaving billions of spike proteins in its wake. (The spike protein is a cytotoxin, a cell killer. It is not an appropriate antigen for stimulating an immune response. It is a potentially-lethal pathogen that poses a threat to one’s health even if it is separated from the virus.) Nor was the vaccine supposed to trigger Antibody-Dependent Enhancement (ADE) which is the condition we hinted at above when referring to “vaccine-associated enhanced disease”. Here’s a brief explanation:

“ADE has proven to be a serious challenge with coronavirus vaccines, and this is the primary reason many have failed in early in-vitro or animal trials. For example, rhesus macaques who were vaccinated with the Spike protein of the SARS-CoV virus demonstrated severe acute lung injury when challenged with SARS-CoV, while monkeys who were not vaccinated did not. Similarly, mice that were immunized with one of four different SARS-CoV vaccines showed

histopathological changes in the lungs with eosinophil infiltration after being challenged with SARS-CoV virus. This did not occur in the controls that had not been vaccinated. A similar problem occurred in the development of a vaccine for FIPV, which is a feline coronavirus.” (**“Is the Coronavirus Vaccine a Ticking-Time Bomb?”**, Science with Dr. Doug)

Is this what we are seeing right now? **In all the countries that launched mass-vaccination campaigns early (Israel, Iceland, Scotland, Gibraltar and UK) cases, hospitalizations and deaths are rising faster in the vaccinated portion of the population than the unvaccinated. Why?**

Are they really experiencing a fourth or fifth wave or have the vaccines generated “inactivity-enhancing” antibodies that make the disease worse? This 2-minute video helps to clarify what’s going on:

“Vaccines are made to a specific variant. And when that variant mutates, the vaccine no longer recognizes it. It’s like you are seeing a completely new virus. And, because that is so, you actually get more severe symptoms when you are vaccinated against one variant and it mutates and then your body sees the other variant. The science shows, that if you get vaccinated in multiple years (for the flu), you are more likely to get severe disease, you are more likely to get viral replication, and you are more likely to be hospitalized.... We are seeing the same thing in Covid with the Delta variant. So we are actually mandating that people get a vaccine when they can actually get more sick when they are exposed to the virus...In fact, this week, a paper came out that showed that—with the Delta variant— when you are vaccinated your body is supposed to make antibodies that neutralize the virus, but they were supposed to neutralize the old variant. When they see this new variant, the antibodies take the virus and help it infect the cells.” (**“Expert testimony on mandatory vaccinations”**, Dr. Christina Parks PhD., Rumble, start at minute 5:05)

Repeat: *“If you get vaccinated in multiple years, you are more likely to get severe disease, you are more likely to get viral replication, and you are more likely to be hospitalized.... With the Delta variant— when you are vaccinated the antibodies take the virus and help it infect the cells.”*

This is ADE, and this is probably why hospitalizations and deaths are rising among the vaccinated in Israel, UK and the rest. True, the Delta variant is less lethal than the Wuhan virus but, unfortunately, that rule does not apply to those who have been vaccinated and whose antibodies promote the uptake of the virus into their cells. This increases the viral replication function that increases the severity of the disease. In short, people are getting sicker because they were vaccinated. Here’s another short video that helps to explain:

“...The vaccine-induced antibodies will stand up against the virus. and once a virus is under pressure; it changes, it becomes a variant, and the variant cannot

be stopped by vaccine-induced antibodies. Vaccine-induced antibodies. also shut down your innate immune system... so variants can come straight through and infect those that are vaccinated. That is viral immune escape, and that means that the vaccinated are defenseless against variants. This is no longer a pandemic of Covid-19. It is a pandemic of variants...

And there is something called recombination, and recombination means a vaccinated host can be infected by more than one variant at a time. ...If a vaccinated host is co-infected by more than one variant, the variants will mix DNA, and change and camouflage and produce a super variant. And if super variants are produced, nothing can stop them. And already they are saying that the latest variant to come out is vaccine resistant. And this is just the beginning. Dr. Geert Vanden Bosche warns that if we do not immediately stop mass vaccination campaigns around the world, the world will experience an international catastrophe of mass mortality. I didn't say that, he did. The vaccinated are a threat to us all." (["Viral Immune Escape Explained"](#), Dr. Michael McDowell, Rumble)

It's not the variant that intensifies the disease; it's the fact that the vaccine targets one narrow endpoint, the spike protein that gradually adapts to survive. As the virus progressively learns to avoid the vaccine, vaccine-induced immunity wanes. Natural immunity produces broad, robust immunity to the whole virus not merely one part of it. It is strong and enduring.

So how will the vaccinated fight new forms of the virus, after all, the vaccine is not a medicine that overpowers a particular pathogen. It is a subtle (genetic) reprogramming of the immune system that forces one's cells to produce a particular version of the spike protein. Boosters that stimulate production of the same protein will have only modest impact. In short, boosters are still fighting the last war.

Also, as we mentioned above, coronavirus vaccines tend to create antibodies that "enhance infectivity" when they encounter adapted forms of the virus. That means that millions of inoculated people will now face forms of the virus for which they have almost no protection and for which their compromised immune systems can only provide limited help. Here's more from the article above:

"Right now, the fatality rate of the virus is estimated to be approximately 0.26%, and this number seems to be dropping as the virus is naturally attenuating itself through the population. It would be a great shame to vaccinate the entire population against a virus with this low of a fatality rate, especially considering the considerable risk presented by ADE. I believe this risk of developing ADE in a vaccinated individual will be much greater than 0.26%, and, therefore, the vaccine stands to make the problem worse, not better. It would be the biggest blunder of the century to see the fatality rate of this virus increase in the years to come because of our sloppy, haphazard, rushed efforts to develop a vaccine with such

a low threshold of safety testing and the prospect of ADE lurking in the shadows.” ([“Is the Coronavirus Vaccine a Ticking-Time Bomb?”](#), Science with Dr. Doug)

“Blunder”, he says?

It wasn't a blunder. It was deliberate. The Covid-19 vaccine was supposed to fail like all the coronavirus vaccines before it. That's the point. That's why the drug companies skipped the animal testing and long-term safety trials. That's why the FDA rushed it through the regulatory process and suppressed the other life-saving medications, and silenced all critics of the policy, and pushed for universal vaccination regardless of the risks of blood clotting, cardiac arrest, stroke and death. And that's why the world is on the threshold of an “international catastrophe of mass mortality.” It's because that's how the strategy was planned from the very beginning.

The vaccine isn't supposed to work, it's supposed to make things worse. And it has! It's increased the susceptibility of millions of people to severe illness and death. That's what it's done. It's a stealth weapon in an entirely new kind of war; a war aimed at restructuring the global order and establishing absolute social control. Those are the real objectives. It has nothing to do pandemics or viral contagion. It's about power and politics. That's all.

It's All About Depopulation!

More Than 726,000 COVID Vaccine Injuries Reported to VAERS as CDC, FDA Overrule Advisory Committees' Recommendations on Third Pfizer Shot

VAERS data released Friday by the CDC included a total of **726,965** reports of adverse events from all age groups following COVID vaccines, including **15,386 deaths** and **99,410 serious injuries** between Dec. 14, 2020 and Sept. 17, 2021. By [Megan Redshaw](#)

Data released Sept. 17 by the Centers for Disease Control and Prevention (CDC) showed that between Dec. 14, 2020 and Sept. 17, 2021, a total of [726,965 adverse events](#) following COVID vaccines were reported to the Vaccine Adverse Event Reporting System (VAERS). The data included a total of [15,386 reports of deaths](#) — an increase of 461 over the previous week.

There were [99,410 reports of serious injuries](#), including deaths, during the same time period — up 7,887 compared with the previous week.

Excluding “[foreign reports](#)” filed in VAERS, [569,294 adverse events](#), including [6,981 deaths](#) and [44,481 serious injuries](#), were reported in the U.S. between Dec. 14, 2020 and Sept. 17, 2021.

Of the 6,981 U.S. deaths reported as of Sept. 17, [12% occurred](#) within 24 hours of vaccination, [17% occurred](#) within 48 hours of vaccination and [30% occurred](#) in people who experienced an onset of symptoms within 48 hours of being vaccinated.

In the U.S., 383.6 million COVID vaccine doses had been administered as of Sept. 17. This [includes](#): 220 million doses of [Pfizer](#), 149 million doses of [Moderna](#) and 15 million doses of [Johnson & Johnson \(J&J\)](#).





Search Results

From the 9/17/2021 release of VAERS data:

Found 726,965 cases where Vaccine is COVID19

Table

Event Outcome	Count	Percent
Death	15,388	2.12%
Permanent Disability	20,789	2.86%
Office Visit	114,126	15.7%
Emergency Room	57	0.01%
Emergency Doctor/Room	82,708	11.38%
Hospitalized	66,456	9.14%
Hospitalized, Prolonged	105	0.00%
Recovered	201,285	27.57%
Birth Defect	475	0.07%
Life Threatening	16,056	2.21%
Not Serious	312,402	42.57%
TOTAL	† 860,016	† 118.3%

† Because some cases have multiple vaccinations and symptoms, a single case can account for multiple entries in this table. This is the reason why the Total Count is greater than 726965 (the number of cases found), and the Total Percentage is greater than 100.

The data come directly from reports submitted to VAERS, the primary government-funded system for reporting adverse vaccine reactions in the U.S.

Every Friday, [VAERS](#) makes public all vaccine injury reports received as of a specified date, usually about a week prior to the release date. Reports submitted to VAERS require further investigation before a causal relationship can be confirmed.

[ORDER TODAY: Robert F. Kennedy, Jr.'s New Book — 'The Real Anthony Fauci'](#)

This week's U.S. data for 12- to 17-year-olds show:

- [20,238](#) total adverse events, including [1,213 rated as serious](#) and 21 [reported deaths](#). Two of the 21 deaths were suicides.

The most recent deaths involve a 17-year old male (VAERS I.D. [1689212](#)) with cancer who was vaccinated April 17, tested positive for COVID on July 20, was hospitalized and passed away Aug. 29; and a 16-year old female (VAERS I.D.

[1694568](#)) who died from a pulmonary embolism nine days after receiving her first Pfizer dose.

Other recent reported deaths include two patients [VAERS I.D. [1655100](#)] who died after their second dose of Pfizer, including a 13-year old female, a 15-year-old boy (VAERS I.D. [1498080](#)) who previously had COVID, was diagnosed with cardiomyopathy in May 2021 and died four days after receiving his second dose of Pfizer's vaccine when he collapsed on the soccer field and went into ventricular tachycardia; and a 13-year-old girl (VAERS I.D. [1505250](#)) who died after suffering a heart condition after receiving her first dose of Pfizer.

- [3,058 reports](#) of anaphylaxis among 12- to 17-year-olds with 99% of cases attributed to [Pfizer's vaccine](#).
- [502 reports](#) of myocarditis and pericarditis (heart inflammation) with [494 cases](#) attributed to Pfizer's vaccine.
- [108 reports](#) of blood clotting disorders, with all cases attributed to Pfizer.

This week's U.S. VAERS data, from Dec. 14, 2020 to Sept. 17, 2021, for all age groups combined, show:

- 20% of deaths were related to cardiac disorders.
- 54% of those who died were male, 42% were female and the remaining death reports did not include gender of the deceased.
- The [average age](#) of death was 72.9.
- As of Sept. 17, [3,726 pregnant women](#) reported adverse events related to COVID vaccines, including 1099 reports of [miscarriage or premature birth](#).
- Of the [2,835 cases of Bell's Palsy](#) reported, 50% were attributed to [Pfizer](#) vaccinations, 42% to [Moderna](#) and 8% to [J&J](#).
- 606 reports of [Guillain-Barré syndrome](#), with 39% of cases [attributed to Pfizer](#), 33% to [Moderna](#) and 27% to [J&J](#).
- [152,309 reports of anaphylaxis](#) with 42% of cases attributed to [Pfizer's vaccine](#), 50% to [Moderna](#) and 7% to [J&J](#).
- [9,441 reports](#) of blood clotting disorders. Of those, [4,047 reports](#) were attributed to Pfizer, [3,442 reports](#) to Moderna and [1,903 reports](#) to J&J.
- [2,537 cases](#) of myocarditis and pericarditis with [1,608 cases](#) attributed to Pfizer, [825 cases](#) to Moderna and [95 cases](#) to J&J's COVID vaccine.

CDC overrules agency's own vaccine safety committee, sides with FDA on boosters

In an "[unusual move](#)," Dr. Rochelle Walensky, CDC director, on Thursday overruled her agency's vaccine advisory committee recommendation to limit Pfizer's COVID booster shot for people 65 and older, long-term care facility residents and certain people with underlying conditions.

Instead, Walensky aligned with the U.S. Food and Drug Administration's (FDA) authorization of a third dose of [Pfizer's](#) vaccine for a broader population, including healthcare workers, grocery store workers, teachers and others whose

jobs put them at “high risk” of infections, plus residents of prisons and homeless shelters.

CDC director disregarded advice of agency’s vaccine advisory committee, clearing way for healthcare workers, teachers, and residents of long-term care facilities, homeless shelters and prisons to get a third Pfizer COVID shot.<https://t.co/sYxt7S8y2t>

— Robert F. Kennedy Jr (@RobertKennedyJr) [September 24, 2021](#)

President Biden today acted on the news, announcing his administration will begin to deliver booster shots this week, [Politico reported](#).

The CDC’s vaccine advisory panel in a meeting Thursday [voted unanimously to approve](#) booster doses of Pfizer’s COVID vaccine for people 65 and older, long-term care facility residents and certain people with underlying conditions. The booster dose would be given at least six months after being fully vaccinated.

However, the advisers voted against recommending a booster dose for people whose jobs or situations put them at high risk of vaccine [breakthrough infection](#).

Government whistleblowers break wide open a federal conspiracy to suppress injury and death from COVID-19 vaccines
09/23/2021 / [By Lance D Johnson](#)



According to whistleblowers from the *Department of Health and Human Services*, there is a federal conspiracy to suppress widespread injury and death [caused by the experimental covid-19 vaccines](#). The *Centers for Disease Control and Prevention* (CDC) created a [set of deceptive coding rules](#) that hospitals must follow. These rules allow doctors to mis-classify severe illness and death in the recently vaccinated, coding it instead as an unvaccinated covid case or an unvaccinated covid death.

In the past eight months, over six hundred thousand medical emergencies and over fourteen thousand deaths have been documented by the Vaccine Adverse Events Reporting System (VAERS). Most of these injuries occur within the first two weeks after vaccination. The CDC rules classify almost all of these issues as unvaccinated covid cases and deaths because a patient is not considered “fully vaccinated” under the CDCs rules until fourteen days after their second dose. By obscuring hospital data in this manner, the CDC can falsely advertise deaths, using the data as propaganda to claim that the unvaccinated are causing a health crisis, when the medical system is actually being engineered to cover up all the deaths and injuries caused by the vaccines.

HHS whistleblower exposes government conspiracy to cover up vaccine deaths and coerce compliance.

Now a federal whistleblower from the Department of Health and Human Services is coming forward with [new testimonial evidence about this conspiracy](#). Jodi O’Malley, a registered nurse with HHS, reached out to Project Veritas to expose how the experimental covid vaccine is “not doing what it’s purpose was.” (This is assuming the intentions behind the vaccine were good in the first place.)

In the interview, O’Malley said, “I’ve seen dozens of people come in with adverse reactions.” She said that the [government is not gathering covid vaccine data](#) and is hesitant to report it. “If we are not gathering data and reporting it, then how are we going to say that this is safe and approved for use?” O’Malley questioned.

O’Malley recorded her conversations in the DHHS emergency room with Dr. Maria Gonzales, Dr. Dale McGee and registered nurse Deanna Paris. O’Malley told Gonzales: “So how come after 18 months, we haven’t had any research? Isn’t that fishy to you?”

Gonzales responded: “It does — it is fishy.”

O’Malley said: “It’s super fishy.”

McGee stated: “It’s not that it hasn’t been done. It hasn’t been published, that’s why.”

Gonzales said: “It hasn’t probably been done because the government doesn’t want to show that the darn [COVID] vaccine is full of sh*t.”

In another exchange, Paris said: “It’s a shame they [government] are not treating people [with COVID] like they’re supposed to, like they should. I think they want people to die.”

O’Malley asked: “How many have you seen that have gotten vaccinated here?”
Paris responded: “That got sick from the side effects? A lot.”

O’Malley said: “A lot!”

Paris stated: “Have you seen it too?”

O’Malley added: “Yeah, and I’m like, who’s writing the VAERS reports?”

Paris said: “Nobody because it takes over a half hour to write the damn thing.”

HHS is not reporting vaccine injury and death, as required by law.

Doctors are required to report any adverse reaction or fatality to VAERS, but according to these testimonies, this legal process is being circumvented to protect the vaccine industry. **According to HHS testimony, many vaccine injury reports aren’t even being documented as vaccine deaths are swept under the rug en masse. O’Malley explained she had a moral obligation to speak out about this.**

“You know, like what kind of person would I be if I knew all of this — this is evil at the highest level. You have the FDA, you have the CDC, that are both supposed to be protecting us, but they are under the government, and everything that we’ve done so far is unscientific,” O’Malley said.

She chose to speak up after watching one of her colleagues be coerced into taking the shot even though she didn’t want to, then dying from it. “At the end of the day, it’s about your health, and you can never get that back — and about your freedom, and about living in a peaceful society, and I’m like, ‘no.’ No. This is the hill that I will die on,” she said, explaining that she is [not afraid to speak out](#) and face retaliation from the government because her “faith lies in God and not man.”
Watch the interview on Brighteon:

[Biden Rambles During ‘Booster-Jab’ Presser, Then Gives Away the CDC’s Agenda by Blurting Out Two Little Words](#)
[September 24, 2021](#) [This article was posted by TLB Staff](#)



Biden Rambles During 'Booster Shot' Presser, **Then Gives Away the CDC's Agenda by Blurting Out Two Little Words**
Becker News

President Biden delivered a rambling press conference on Friday about the CDC's blatantly political decision to overrule a scientific panel and issue guidance for more Covid-19 'booster shots.'

[Biden Rambles During 'Booster Shot' Presser Then Gives Away CDC Decision Was 'As Planned'](#) "And this week, **as planned**, we took a key step to protecting the vaccinated with booster shots," Biden said. "Which our top government doctors believe provides the highest level of protection available today."

In other words, the CDC was following orders from the White House and disregarded the scientific advice of its panel with its latest booster shot decision, which will be discussed further below.

"The Food and Drug Administration, the FDA, the Centers for Disease Control and Prevention, the CDC, they've completed their independent scientific review," he continued.

"And based on that review, the majority of Americans who are 'fully vaccinated' with the Pfizer vaccine are now able to receive the booster shot six months after they've received their second shot," he added.

"Six months after you've received your second shot you are eligible," he added.

However, this is a far cry from what was actually recommended and it is a gross misrepresentation of the independent panels' findings, as is the standard operating procedure for the Biden administration.

On Friday, CDC Director Rochelle Walensky overruled the guidance provided by her scientific advisers and instead recommended that health workers, teachers and other essential workers actually get the 'booster shots' in what even the [New York Times](#) is characterizing as an 'unusual' ruling.

The director of the Centers for Disease Control and Prevention on Friday overruled a recommendation by an agency advisory panel that had refused to endorse booster shots of the Pfizer-BioNTech Covid vaccine for frontline workers. It was a highly unusual move for the director, Dr. Rochelle Walensky, but aligned C.D.C. policy with the Food and Drug Administration's endorsements over her own agency's advisers.

The C.D.C.'s Advisory Committee on Immunization Practices on Thursday recommended the boosters for a wide range of Americans, including tens of millions of older adults and younger people at high risk for the disease. But they excluded health care workers, teachers and others whose jobs put them at risk. That put their recommendations at odds with the F.D.A.'s authorization of booster shots for all adults with a high occupational risk.

The 'New York Times' then noted that the White House had been 'getting ahead of the regulatory process,' which is a euphemistic way of stating that it has been politicizing the entire process.

Dr. Walensky's decision was a boost for President Biden's campaign to give a broad segment of Americans access to boosters. The White House had come under criticism for getting ahead of the regulatory process.

The White House could begin promoting and rolling out a plan for booster shots as soon as Friday. That would be in keeping with the administration's previously announced plan to offer the additional doses this week.

The FDA's advisers recently delivered the Biden administration a policy defeat and rejected a plan to offer booster shots of the Pfizer-BioNTech Covid vaccine to those ages 16 to 65. The FDA's Vaccines and Related Biological Products Advisory Committee delivered the Biden proposal a defeat of 16-2. However, the vote was non-binding and a final FDA vote is forthcoming.

"Over several hours of discussion, members of the Food and Drug Administration panel of outside experts voiced frustration that Pfizer had provided little data on safety of extra doses," the Associated Press reported. "And they complained that data provided by Israeli researchers about their booster campaign might not be suitable for predicting the U.S. experience."

“It’s unclear that everyone needs to be boosted, other than a subset of the population that clearly would be at high risk for serious disease,” Michael Kurilla, a committee member with the National Institutes of Health, said.

Dr. Rochelle Walensky’s overruling of the CDC panel would not be the first illustration of the politicized nature of the agency’s decision-making. The CDC in May issued guidance that it was unnecessary for vaccinated Americans to wear masks indoors and outside. But a subsequent [flurry of emails](#) show that displeased teacher’s unions — not the “science” — caused the CDC to back out on its guidance. It would subsequently issue stricter school guidelines that contradicted its previous May 13 guidance.

The CDC’s “government doctors” are clearly doing what is best for the “government” and not so much for the best practice of actual medicine. Americans had better figure this out sooner rather than later.

Pfizer Recalls Popular Drug Approved By FDA 14 Yrs. Ago, After Findings Show It Contains High Levels of Cancer Causing Agents...But Yeah, You Should Totally Trust Vaccine Used On General Public For 21 Months

After 14 years of being available for consumer use, Pfizer is recalling their popular anti-smoking drug Chantix.

[Daily Mail](#) reports- Pfizer has recalled its popular anti-smoking drug Chantix after it was found to contain high levels of cancer-causing agents called nitrosamines. According to a notice posted on the Food and Drug Administration’s (FDA) website Thursday, the drugmaker is ‘voluntarily recalling all lots of Chantix 0.5mg and 1mg tablets to the patient level due to the presence of a nitrosamine, N-nitroso-varenicline (NDMA), at or above the FDA interim acceptable intake limit’.

Then, in an update posted on Friday, the FDA advised ‘patients taking recalled varenicline to continue taking their current medicine until their pharmacist provides a replacement or their doctor prescribes a different treatment’.

“The health benefits of stopping smoking outweigh the cancer risk from the nitrosamine impurity in varenicline,” it added.

Pfizer paused the distribution of Chantix back in July after finding elevated levels of nitrosamines in the pills and announced it was recalling 12 lots of the anti-smoking drug.

The drug giant – currently best known for its COVID vaccine – insisted there was no immediate risk to patients taking this medication and said the recall is out of an abundance of caution.

In the past, the US drug regulator has reached out to companies whose drugs had NDMA over accepted levels.

Chantix was approved by the FDA in May 2006 as a prescription medication that helps adults aged 18 and over quit smoking and is used for 12 to 24 weeks.

Pfizer said in its July 2021 release that people who smoke cigarettes are 15 to 30 times more likely to get lung cancer than people who do not smoke.

Nitrosamines are naturally occurring organic compounds found in a variety of foods, including meat, dairy, and vegetables, according to the FDA. Everyone is exposed to the chemicals at some level.

However, if ingested in high amounts over long periods of time, nitrosamines could increase someone's risk of developing cancer.

Pfizer didn't indicate how the nitrosamines got in Chantix. The source of the chemicals in medication could come from its manufacturing process, its chemical structure or even the conditions under which they are stored and packaged.

Pfizer first announced that it was planning a recall of the drug on June 24 after discovering the likely carcinogen.

On June 16, 2020, it was announced that the first doses of the COVID-19 vaccine were going to be offered elderly patients and other vulnerable populations.

On December 18, 2020, the Pfizer COVID-19 vaccine received emergency use authorization.

On August 23, 2021, Pfizer's COMIRNATY (COVID-19 Vaccine, mRNA) was approved.

Pfizer's COVID-19 vaccine approved under Emergency Use Authorization (EUA) and the COMIRNATY vaccine have the same formulation and can be used interchangeably to provide the COVID-19 vaccination series.

So, what are the ingredients in the vaccine?

According to the [FDA website](#), the Pfizer COVID vaccines contain the following ingredients: The vaccine includes the following ingredients: mRNA, lipids ((4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate), 2 [(polyethylene glycol)-2000]-N,N-ditetradecylacetamide, 1,2-Distearoyl-sn-glycero-3-phosphocholine, and cholesterol), potassium chloride, monobasic potassium phosphate, sodium chloride, dibasic sodium phosphate dihydrate, and sucrose.

How do we know all of the ingredients used to create the COVID-19 vaccinations are safe? Do you trust the pharmaceutical companies making these vaccines?

We don't! Never forget 65 million American children got SV40-laced virus in the Polio Vaxx which led to millions of cancer deaths. Then millions of infants and small children were given doses of the enzyme Nagalase in childhood vaccines that cause cancer as recent as twenty years ago. It has been all part of the solution to reduce the population through *"Silent Weapons for Quiet Wars"* The Vaxx industry is a killing machine and the evidence is there for you to see!



CDC Now Lists Vaccinated Deaths as ... Unvaccinated!

September 15, 2021 [This article was posted by TLB Staff](#)

CDC Now Lists Vaccinated Deaths as ... Unvaccinated !!!

Analysis by Dr. Joseph Mercola

Anyone who dies within the first 14 days post-injection is counted as an unvaccinated death ... ???

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The graphic features a headline in large, bold, black letters. Below the headline is a photograph of a 'Medical Record' form with fields for 'Name' and 'Date of Birth'. To the right of the photograph is the text 'Analysis by Dr. Joseph Mercola' and a paragraph stating 'Anyone who dies within the first 14 days post-injection is counted as an unvaccinated death ... ???'. At the bottom right is the logo for 'TLB THE LIBERTY BEACON™'.

Story at-a-glance

- *According to the U.S. Centers for Disease Control and Prevention, you're not counted as fully vaccinated until a full 14 days have passed since your second injection in the case of Pfizer or Moderna, or 14 days after your first dose of Janssen, despite the fact that over 80% of deaths after the vaccines occur in this window. How convenient*
- *Anyone who dies within the first 14 days post-injection is counted as an unvaccinated death. Not only does this inaccurately inflate the unvaccinated death toll, but it also hides the real dangers of the COVID shots, as the vast majority of deaths from these shots occur within the first two weeks*
- *The CDC also has two different sets of testing guidelines — one for vaccinated patients and another for the unvaccinated. If you're unvaccinated, CDC guidance says to use a cycle threshold (CT) of 40, known to result in false positives. If you're vaccinated, they recommend using a CT of 28 or less, which minimizes the risk of false positives*
- *The CDC also hides vaccine failures and props up the “pandemic of the unvaccinated” narrative by only counting breakthrough cases that result in hospitalization or death*
- *Hospitals are still also reporting non-COVID related illnesses as COVID-19*

Shockingly, CDC Now Lists Vaccinated Deaths as Unvaccinated

Analysis by Dr. Joseph Mercola

While public health officials and mainstream media claim the COVID-19 pandemic is now “a pandemic of the unvaccinated,”¹ we now know this claim is based on highly misleading statistics.

In a July 16, 2021, White House press briefing,² U.S. Centers for Disease Control and Prevention director Dr. Rochelle Walensky claimed that “over 97% of people who are entering the hospital right now are unvaccinated.” A few weeks later, in an August 5, 2021, statement, she inadvertently revealed how that statistic actually came about.³

As it turns out, the CDC was looking at hospitalization and mortality data from January through June 2021 — a timeframe during which the vast majority of the U.S. population were still unvaccinated.⁴

But that's not the case at all now. The CDC is also playing with statistics in other ways to create the false and inaccurate impression that unvaccinated people make up the bulk of infections, hospitalizations and deaths. For example, we now find out the agency is counting anyone who died within the first 14 days post-injection as unvaccinated.

Not only does this inaccurately inflate the unvaccinated death toll, but it also hides the real dangers of the COVID shots, as the vast majority of deaths from these shots occur within the first two weeks.⁵ Now their deaths are counted as unvaccinated deaths rather than being counted as deaths due to vaccine injury or COVID-19 breakthrough infections!

How CDC Counts Breakthrough Cases

According to the CDC,⁶ you're not counted as fully vaccinated until a full 14 days have passed since your second injection in the case of Pfizer or Moderna, or 14 days after your first dose of Janssen. This is how the CDC defines a vaccine breakthrough case:

"... a vaccine breakthrough infection is defined as the detection of SARS-CoV-2 RNA or antigen in a respiratory specimen collected from a person ≥ 14 days after they have completed all recommended doses of a U.S. Food and Drug Administration (FDA)-authorized COVID-19 vaccine."

In other words, if you've received one dose of Pfizer or Moderna and develop symptomatic COVID-19, get admitted to the hospital and/or die from COVID, you're counted as an unvaccinated case. If you've received two doses and get ill within 14 days, you're still counted as an unvaccinated case.

The problem with this is that over 80% of hospitalizations and deaths appear to be occurring among those who have received the jabs, but this reality is hidden by the way cases are defined and counted. A really clever and common strategy of the CDC during the pandemic has been to change the definitions and goalposts so it supports their nefarious narrative.

For example, the CDC has quietly changed the definition of "vaccine," apparently in an attempt to validate calling the COVID mRNA gene therapies vaccines. In an August 26, 2021, archived version⁷ of vaccine, the CDC defines it as a "product that stimulates a person's immune system to produce immunity to a specific disease, protecting the person from that disease."

But a few days later, a new definition appeared on the CDC's website,⁸ which now says a vaccine is a "preparation that is used to stimulate the body's immune response against diseases." The differences in the definitions are subtle but distinct: The first one defined a vaccine as something that will "produce immunity."

But, since the COVID-19 vaccines are not designed to stop infection but, rather, to only lessen the degree of infection, it becomes obvious that the new definition was created to cover the COVID vaccines.

Different Testing Guidelines for Vaxxed and Unvaxxed

It's not just the CDC's definition of a breakthrough case that skews the data. Even more egregious and illogical is the fact that the CDC even has two different sets of testing guidelines — one for vaccinated patients and another for the unvaccinated.

Since the beginning of the pandemic, the CDC has recommended a PCR test cycle threshold (CT) of 40.⁹ This flies in the face of scientific consensus, which has long been that a CT over 35 will produce 97% false positives,¹⁰ essentially rendering the test useless.^{11,12,13}

In mid-May 2021, the CDC finally lowered its recommended CT count, but only for patients who have received one or more COVID shots.¹⁴ So, if you have received a COVID injection, the CDC's guidelines call for your PCR test to be run at a CT of 28 or less. If you are unvaccinated, your PCR test is to be run at a CT of 40, which grossly overestimates the true prevalence of infection.

The end result is that unvaccinated individuals who get tested are FAR more prone to get false positives, while those who have received the jab are more likely to get an accurate diagnosis of infection.

Only Hospitalization and Death Count if You're COVID Jabbed

Even that's not all. The CDC also hides vaccine failures and props up the "pandemic of the unvaccinated" narrative by only counting breakthrough cases that result in hospitalization or death.

In other words, if you got your second COVID shot more than 14 days ago and you develop symptoms, you do not count as a breakthrough case unless you're admitted to the hospital and/or die from COVID-19 in the hospital, even if you test positive. So, to summarize, COVID breakthrough cases count only if all of the following apply:

- The patient received the second dose of the Pfizer or Moderna shot at least 14 days ago (or one dose in case of Johnson & Johnson's single-dose injection)
- The patient tests positive for SARS-CoV-2 using a CT of 28 or less, which avoids false positives
- The patient is admitted to the hospital for COVID-19 and/or dies in the hospital

Vaccinated Probably Make Up Bulk of Hospitalizations

If vaccinated and unvaccinated were not treated with such varying standards, we'd probably find that the vaccinated now make up the bulk of hospitalizations, making the COVID pandemic one of the vaccinated. An August 30, 2021, exposé by The Epoch Times reveals what's really happening on the front lines:¹⁵

"After a battery of testing, my friend was diagnosed with pancreatitis. But it was easier for the hospital bureaucracy to register the admission as a COVID case ... The mainstream media is reporting that severe COVID cases are mainly among unvaccinated people ... Is that what's really going on?"

It's certainly not the case in Israel, the first country to fully vaccinate a majority of its citizens against the virus. Now it has one of the highest daily infection rates and the majority of people catching the virus (77 percent to 83 percent, depending on age) are already vaccinated, according to data collected by the Israeli government ...

After admission, I spoke to the nurse on the COVID ward ... The nurse told me that she had gotten both vaccines but she was feeling worried: 'Two thirds of my patients are fully vaccinated,' she said. How can there be such a disconnect between what the COVID ward nurse told me and the mainstream media reports?"

The heart of the problem is that the U.S. is not even trying to achieve an accurate count. As noted by The Epoch Times, *“the Centers for Disease Control and Prevention have publicly acknowledged that they do not have accurate data.”*

So, when you hear that cases are rising, and that most of them are unvaccinated, you need to ask: *“Are these people who have had one vaccine and gotten sick, two vaccines and gotten sick, or no vaccines at all? Without more details, it is impossible to know what is really going on,”* The Epoch Times says.¹⁶

All we do know, according to one doctor who spoke with The Epoch Times, is *“the vaccines are not as effective as public health officials told us they would be. ‘This is a product that’s not doing what it’s supposed to do. It’s supposed to stop transmission of this virus and it’s not doing that.’”*

Counting Non-COVID Illness as COVID Cases

On top of all of that, hospitals are still also reporting non-COVID related illnesses as COVID. As reported by The Epoch Times:¹⁷

“Health authorities around the world have been doing this since the beginning of the COVID crisis. For example, a young man in Orange County, Florida who died in a motorcycle crash last summer was originally considered a COVID death by state health officials ...

And a middle-aged construction worker fell off a ladder in Croatia and was also counted as a death from COVID ... To muddy the waters further, even people who test negative for COVID are sometimes counted as COVID deaths.

Consider the case of 26-year-old Matthew Irvin, a father of three from Yamhill County, Oregon. As reported by KGW8 News, Irvin went to the ER with stomach pain, nausea, and diarrhea on July 5, 2020. But instead of admitting him to the hospital, the doctors sent him home.

Five days later, on July 10, 2020, Irvin died. Though his COVID test came back negative two days after his death and his family told reporters and public health officials that no one Irvin had been around had any COVID symptoms, the medical examiner allegedly told the family that an autopsy was not necessary, listing his death as a coronavirus case. It took the Oregon Health Authority two and a half months to correct the mistake.

In an even more striking example of over-counting COVID deaths, a nursing home in New Jersey that only has 90 beds was wrongly reported as having 753 deaths from COVID. According to a spokesman, they had fewer than twenty deaths. In other words, the number of deaths was over-reported by 3,700 percent.”

No Need to Fear the Delta Variant if You’re Unvaccinated

In a June 29, 2021, interview,¹⁸ Fauci called the Delta variant “a game-changer” for unvaccinated people, warning it will devastate the unvaccinated population while vaccinated individuals are protected against it. Alas, in the real world, the converse is turning out to be true, as the Delta variant is running wild primarily among those who got the COVID jab.

The Delta variant contains three different mutations, all in the spike protein. This allows this variant to evade the immune responses in those who have received the COVID jabs, but not those who have natural immunity, which is much broader.

In a June 30, 2021, appearance on Fox News, epidemiologist and cardiologist Dr. Peter McCullough pointed out that *“It is very clear from the U.K. Technical Briefing¹⁹ that was published June 18 that the vaccine provides no protection against the Delta variant.”*²⁰

The reason for this is because the Delta variant contains three different mutations, all in the spike protein. This allows this variant to evade the immune responses in those who have received the COVID jabs, but not those who have natural immunity, which is much broader.

Even so, the Delta variant is far milder than previous variants, according to the U.K.’s June 18, 2021, Technical Briefing.²¹ In it, they present data showing the Delta variant is more contagious but far less deadly and easier to treat. As McCullough told Fox News:

“Whether you get the vaccine or not, patients will get some very mild symptoms like a cold and they can be easily managed ... Patients who have severe symptoms or at high risk, we can use simple drug combinations at home and get them through the illness. So, there’s no reason now to push vaccinations.”

Contrast that with the following statement made by President Biden during a CNN town hall meeting in Cincinnati, Ohio, in late July 2021:²²

“We have a pandemic for those who haven’t gotten a vaccination. It’s that basic, that simple. If you’re vaccinated, you’re not going to be hospitalized, not going to the ICU unit, and not going to die. You’re not going to get COVID if you have these vaccinations.” A huge lie!

However, Dr. Leana Wen, an emergency doctor and visiting professor of health policy and management at George Washington University’s Milken School of Public Health in Washington, D.C., contradicted the president, saying he had led the American astray by telling them you don’t need a mask if you’re vaccinated, or that you can’t get it or transmit it. As reported by CNN Health:²³

“In particular, Wen took issue with Biden’s incorrect claims that you cannot contract Covid-19 or the Delta variant if you are vaccinated. ‘I was actually disappointed,’ Wen said. ‘I actually thought he was answering questions as if it were a month ago. He’s not

really meeting the realities of what's happening on the ground. I think he may have led people astray.”

CNN added that Wen had told their political commentator Anderson Cooper that “many unknown answers remain related to Covid-19, and that it is still not known how well protected vaccinated individuals are from mild illness ... [or] if you're vaccinated, could you still be contagious to other people.”

Vaccinated Patients Flood Hospitals Around the World

The U.K. data showing the Delta variant is far milder than previous SARS-CoV-2 viruses deflates the claim that avoiding severe illness is a sign that the shots are working. Since the Delta variant typically doesn't cause severe illness in the first place, it doesn't make sense to attribute milder illness to the shot.

But if Delta is the mildest coronavirus variant yet, why are so many “vaccinated” people ending up in the hospital? While we still do not have clear confirmation, this could be a sign that antibody dependent enhancement (ADE) is at work. Alternatively, it could be that vaccine injuries are being misreported as breakthrough cases.

Whatever the case may be, real-world data from areas with high COVID jab rates show a disturbing trend. For example, August 1, 2021, the director of Israel's Public Health Services, Dr. Sharon Alroy-Preis, announced half of all COVID-19 infections were among the fully vaccinated.²⁴ Signs of more serious disease among fully vaccinated are also emerging, she said, particularly in those over the age of 60.

A few days later, August 5, 2021, Dr. Kobi Haviv, director of the Herzog Hospital in Jerusalem, appeared on Channel 13 News, reporting that 95% of severely ill COVID-19 patients are fully vaccinated, and that they make up 85% to 90% of COVID-related hospitalizations overall.²⁵

In Scotland, official data on hospitalizations and deaths show 87% of those who have died from COVID-19 in the third wave that began in early July were vaccinated.²⁶

In Gibraltar, which has a 99% COVID jab compliance rate, COVID cases have risen by 2,500% since June 1, 2021,²⁷ and in Iceland, where over 82% have received the shots, 77% of new COVID cases are among the fully vaccinated.²⁸

Data from the U.K. show a similar trend among those over the age of 50. In this age group, partially and fully “vaccinated” people account for 68% of hospitalizations and 70% of COVID deaths.²⁹

A CDC investigation of an outbreak in Barnstable County, Massachusetts, between July 6, 2021, through July 25, 2021, found 74% of those who received a diagnosis of COVID19, and 80% of hospitalizations, were among the fully vaccinated.^{30,31} Most, but not all, had the Delta variant.

The CDC also found that fully vaccinated individuals who contract the infection have as high a viral load in their nasal passages as unvaccinated individuals who get infected.³² The same was found in a British study, a preprint of which was posted mid-August 2021.^{33,34} This means the vaccinated are just as infectious as the unvaccinated.

Interestingly, a Lancet preprint study³⁵ that examined breakthrough infections in health care workers in Vietnam who received the AstraZeneca COVID shot found the “viral loads of breakthrough Delta variant infection cases were 251 times higher than those of cases infected with old strains detected between March-April 2020.”

What’s more, they found no correlation between vaccine-induced neutralizing antibody levels and viral loads or the development of symptoms. According to the authors:

“Breakthrough Delta variant infections are associated with high viral loads, prolonged PCR positivity, and low levels of vaccine-induced neutralizing antibodies, explaining the transmission between the vaccinated people.”

Not All Vaccinated Are Confirmed Vaccinated

As if all of that weren’t enough, there’s yet one more confounder. Just because you got the COVID shot does not mean you’ve been confirmed as having gotten the shot. You’re only confirmed “vaccinated” if your COVID injection is added to your medical record, and this sometimes doesn’t happen if you’re going to a temporary vaccination clinic, a drive-through or pharmacy, for example. As reported by CNN:³⁶

“If you are among the countless people who didn’t get the doses at a primary care doctor’s office, there may not be any record of the vaccination on file with your doctor.”

To actually count as a “confirmed vaccinated” individual, you must send your vaccination card to your primary care physician’s office and have them add it to your electronic medical record. If you got the shot at a pharmacy, you’ll need to verify that they forwarded your proof of vaccination to your doctor. Primary care offices are then responsible for sharing their patients’ immunization data with the state’s immunization information system.

Patient-recorded proof of vaccination is only accepted for influenza and pneumococcal vaccines, not COVID-19 injections.³⁷ What this all means is that, say you got the shot several weeks ago at a drive-through vaccination clinic and get admitted to the hospital with COVID symptoms. Unless your COVID shot status has actually been added into the medical system, you will not count as “vaccinated.”

This too can skew the statistics, because we know the CDC ascertains vaccination status by matching SARS-CoV-2 case surveillance and CAIR2 data using person-level identifiers and algorithms.³⁸

As noted by John Zurlo, division director of infectious disease at Thomas Jefferson University, “the lack of reliable vaccine records complicates efforts to precisely

understand vaccine effectiveness and determine how many local hospitalizations and deaths are resulting from COVID-19 breakthrough infections.”³⁹

We’re in the Largest Clinical Trial in Medical History

In closing, it’s worth remembering that the COVID injection campaign is part and parcel of a clinical trial. As noted Dr. Lidiya Angelova in a recent Genuine Prospect article:⁴⁰

“Many people are unaware that they are participating in the largest clinical trial test of our times. It is because World Health Organization, healthcare authorities, politicians, celebrities, and journalists promote the experimental medical treatments (wrongly called COVID-19 vaccines) as safe and efficient while in fact these treatments are in early clinical research stage.

It means that there is not enough data for such claims and that the people who participate are test subject.”

As shown in a graph on Genuine Prospect, under normal circumstances, clinical research follows a strict protocol that begins with tests on cell cultures. After that comes tests on animals, then limited human testing in four phases. In Phase 1 of human testing, up to 100 people are included and followed anywhere from one week to several months.

Phase 2 typically includes several hundred participants and lasts up to two years. In Phase 3, several hundred to 3,000 participants are tested upon for one to four years. Phase 4 typically includes several thousand individuals who are followed for at least one year or longer. After each phase, the data is examined to assess effectiveness and adverse reactions.

The timelines for these stages and phases were not followed for the COVID “vaccines.” Most Phase 3 trials concluded by the end of 2020, and everyone who got the shots since their rollout under emergency use authorization is part of a Phase 4 clinical trial, whether they realize it or not.⁴¹ And since the trials are not completed, you simply cannot make definitive claims about safety, especially long-term safety. As noted by Angelova:⁴²

“When I worked at the National Institute of Allergy and Infectious Diseases (NIAID) ... I went to the course Ethical and Regulatory Aspects of Clinical Research ... The first rule we learnt was ‘Clinical research must be ethical’ ... All ethical aspects of clinical research are dismissed with the COVID-19 vaccines.

People should know that nobody can require such to participate in everyday activities like using public transportation, shopping, going to school and even hospital. People should know that they should not be punished for refusing to take the experimental medical treatments.

COVID-19 vaccines mass use and COVID-19 measures are an infringe[ment] of the Articles 2, 3, 5, 9, 11, 12, 13, 18, 20, 25, 27, 28 of The Universal Declaration of Human Rights (UDHR).”

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For twenty months the National and Global public health agencies have LIED CONTINUOUSLY SINCE MARCH 1ST OF 2020. THEY SERVE A DIFFERENT MASTER!

Covid Deaths in Perspective: Propaganda vs. Facts!

In the U.S.A., **an average of 7,900 people dies every day**, from dozens of different reasons. There are **3,142** counties in the continental U.S.A., and **we have not had a day since February 14th, 2021, when there were more than 1 death per county attributed to the alleged Covid-19.** Think about that for a minute, **there are 100 counties in the United States with a population of 1 million or more!** Are you able to see how the public is being deceived by exaggerated or misleading data.

I can tell you with total certainty that mortality trends have not deviated from yearly data for the past ten years. I know this from the insurance industry actuarial tables used to calculate insurance premiums have not changed in this hoaxed alleged “pandemic” declared in March of 2020. **The World Health Organization hoaxed this on a lie that 65-million would die.** It was based upon a computer model by an Oxford University professor which was rigged to create a problem through fear. Bill Gates and Dr. Anthony Fauci then stated it on the major media networks and the fear-mongering campaign was off to the races.

To claim a virus exists, virologists must confirm it exists through what is known as Koch’s Postulates. No lab of any U.S. health facility or world health agency followed protocol to validate their claim; a critical mistake in the scientific process of confirmation that the Covid-19 existed. It was all a lie, a psy-op to deceive the public that a so-called pandemic existed. Every health agency and the politicians, and the medical community are complicit in the deaths from those who were vaxxed with “gene” therapy. **To this very day, not a single lab around the world has produced “hard evidence” proof that Covid-19 or any of the so-called variants actually exist.** No one has produced the evidence of a so-called Covid virus. I am not saying that thousands of viruses, even hundreds of thousands for that matter exist. **What I am saying is that proof of “contagion” does not exist.** It has to be evaluated by the Principles of Koch Postulates, and that has simply not been done by the CDC or any virology lab.

The pharmaceutical “gene” therapy tests on the lab animals all died within two days, and so the lab tests were suspended, and then the FDA given EAU or Emergency Application Use to vaxx the public. They counted on the public to be ignorant of the facts, and so frightened that they would never ask what it was they were being jabbed into their arm.

Dr. Judy Mikovits said early on in 2020, that 55-million would die from the vaxx in five years. Those numbers were also confirmed by Dr. Luc Montagnier, the 2008 Nobel Peace Prize winner in Medicine for his discovery of the HIV virus. Dr.

Montagnier says the variants are the result of the vaxxes. Dr. Montagnier said in May 18, 2021, ***“it is the vaccination that is creating the variants.”***

While it is understood that viruses mutate, causing variants, Dr. Montagnier contends that ***“it is the vaccination that is creating the variants. It is the antibodies produced by the virus that enable an infection to become stronger. It’s what we call Antibody Dependent Enhancement (ADE), which means antibodies favor a certain infection. The antibody attaches to the virus, from that moment it has the receptors, the antibodies, we have them in the macrophage (a white blood cell that consumes infectious cells).”***

Professor Dr. Montagnier referred to the vaccine program for the coronavirus as an “unacceptable mistake”. Mass vaccinations are a ***“scientific error as well as a medical error,”*** he said. ***“It is an unacceptable mistake. The history books will show that, because it is the vaccination that is creating the variants.”***

“There are antibodies, created by the vaccine, forcing the virus to find another solution or die. This is where the variants are created. It is the variants that are production and result from the vaccination. You see it in each country, it’s the same: the curve of the vaccination is followed by the curve of deaths.”



- 4 criteria designed to **verify that the microorganism** is the **causal agent** for the disease.
- 4 rules / steps:
 - The suspected pathogen must be consistently **associated** with the diseased plant
 - The microorganism must be isolated from the diseased organism and **grown in pure culture**.
 - The cultured microorganism **should cause disease** when inoculated into a healthy organism.
 - The microorganism must be **reisolated** from the inoculated plant and grown in a pure culture. The microorganism should have the same characteristic with the original culture.

Dr. Judy Mikovits based her remarks on the Xenotropic murine leukemia virus-related virus (XMRV) is *"a laboratory-derived mouse virus that was generated through recombination between two endogenous murine retroviruses during propagation of a prostate cancer xenograft in the mid-1990's"*. In 2007, Mikovits met a co-discoverer of xenotropic murine leukemia virus-related virus (XMRV), Robert Silverman, at a conference. Silverman had found XMRV sequences, which are highly similar to mouse genomic sequences, in prostate cancer specimens several years earlier. Using tools obtained from Silverman, Mikovits began to look for XMRV in her CFS samples. **Dr. Mikovits pointed out that the national blood supply was contaminated with the XMRV virus with CFS and HIV1 viruses. CFS or Chronic Fatigue Symptoms was later redesignated as the HIV1 by Dr. Robert Gallo and Dr. Anthony Fauci.**

Former FDA Commissioner: Fauci funded gain of function on EVEN DEADLIER MERS-like coronaviruses

Wednesday, September 15, 2021 by: News Editors

(Natural News) Former FDA head and current Pfizer board member Scott Gottlieb reacted to further revelations this week regarding the funding of dangerous gain of function research by Anthony Fauci, noting that a previously unknown fact has emerged that lab tampering was undertaken on MERS-like coronaviruses, which are even deadlier than their SARS-like relatives.

(Article by Steve Watson republished from Summit.news)

Gottlieb noted that documents obtained under the FOIA also show that the viruses were made more deadly to humans in several labs around Wuhan, including a level three biocontainment facility, which has lesser security than the level four labs previously mentioned in relation to the outbreak.

"Whether or not this was gain-of-function is a political and legal discussion," Gottlieb said in an interview with CNBC.

He added, ***"The bottom line is they were doing research on viruses in that institute that was making those viruses potentially more dangerous to humans. And handling the viruses in ways that could potentiate their release, particularly by infecting transgenic animals that have fully-humanized immune systems."***

"They were doing things in that lab that could have led to circumstances where a virus that was purposefully evolved in ways that it could be more dangerous to humans could have escaped," Gottlieb further emphasized.

He continued, ***"What's revealed by these documents are two interesting details I previously didn't know. First, there was experimentation being done on MERS-like coronaviruses, not just SARS-like coronaviruses. Second, they affirmed what***

we suspected about coronavirus research being done at other institutes around Wuhan... at a level three biocontainment facility.”

“They were doing things in that lab that could have led to circumstances where a virus that was purposefully evolved in ways that it could be more dangerous to humans could have escaped,” says

[@ScottGottliebMD](#)

— Squawk Box (@SquawkCNBC) September 8, 2021

Gottlieb previously noted that *“These kinds of lab leaks happen all the time,”* further warning that *“in China, the last six known outbreaks of SARS-1 have been out of labs, including the last known outbreak, which was a pretty extensive outbreak that China initially wouldn’t disclose that it came out of lab.”*

“It was only disclosed finally by some journalists who were able to trace that outbreak back to a laboratory,” Gottlieb explained back in May.

Gottlieb also recently revealed that Fauci briefed world health leaders in the spring of 2020 that a lab leak was a possible cause of the COVID outbreak.

Appearing on CBS News, Gottlieb admitted that Fauci told government health advisors that the virus *“looked unusual,”* and that scientists he was working with *“had suspicions”* that it was manipulated.

Former FDA commissioner Scott Gottlieb says he was informed by a senior Trump administration official in spring that Dr. Fauci briefed world health leaders in Europe *“that this could have been a potential lab leak...so those discussions were going on.”*

Face The Nation (@FaceTheNation) June 6, 2021

For almost 18 months now, the former FDA head has been calling for a robust investigation into China’s cover up of the outbreak:

It also recently emerged that there was an [outbreak of a DIFFERENT virus](#) from another Chinese bio-facility at around the same time as the COVID outbreak.

[Reports also indicate](#) that China is planning on opening scores of bio-facilities over the next five years.

The *‘Financial Times’* reports that *“some Chinese officials have warned about poor security at existing facilities. In 2019 Yuan Zhiming, the director of the Wuhan Institute of Virology’s BSL-4 lab, wrote a review of the safety deficiencies in China’s laboratories. ‘Several high-level BSLs have insufficient operational funds for routine yet vital processes,’ Yuan wrote, adding that maintenance costs were ‘generally neglected.’”*

The report adds that Yuan warned *“Due to the limited resources, some BSL-3 laboratories run on extremely minimal operational costs or in some cases none at all.”*

As both Senator Rand Paul and former CIA director and secretary of state Mike Pompeo also [warned recently](#), the Wuhan Institute of Virology is still up and running, and there is evidence pointing to its involvement with the Chinese military in bioweapons research.

The accumulating [scientific evidence](#) that points to a potential coronavirus lab leak, as well as China’s record on bio-security, and its constant stonewalling, warrants an adequate independent investigation, which hasn’t happened.

TOTAL FRAUD: CDC allows hospitals to classify dead vaccinated people as “unvaccinated deaths”

09/17/2021 / By [Lance D Johnson](#)

The *Centers for Disease Control and Prevention* (CDC) have devised a set of rules pertaining to the classification of infectious disease and death. Hospitals and laboratories are required to follow these rules and report official covid-19 data based on these rules. It appears that these rules were designed in a way to conceal the number of Covid cases in the vaccinated and to [conceal the number of deaths caused by the covid-19 vaccines](#). These rules simultaneously inflate the number of covid cases in the unvaccinated and allow hospitals to classify dead vaccinated people as “unvaccinated” deaths.

This medical fraud and morbid treachery allows the CDC to continue on with the false narrative that the nation is suffering from a “pandemic of the unvaccinated.” People who die from the vaccine are used as props to falsely advertise the need for more of these deadly vaccines.

Suspicious CDC rules obfuscate hospital data, deceiving the nation. When an individual receives their first dose of a covid-19 vaccine, they are still classified as “unvaccinated” for several weeks after the shot. If they test positive for covid-19 in the month following the injection, they are officially registered as an “unvaccinated case.” If the vaccine elicits physical symptoms of disease (as was reported in [50 percent of recipients in the clinical studies](#)), this sickness is classified as a healthy immune reaction to the vaccine or is advertised as a milder sickness compared to a hypothetical case of Covid.

Even though there is no way to compare a vaccine injury with a hypothetical, nonexistent case of illness, vaccinated patients are told to accept this conjecture as fact. It doesn’t matter how many drugs the patient needs to manage the pain after they [get sick from the vaccine](#). It doesn’t matter how many times the vaccinated patient needs to see a doctor or seek the ER after being vaccinated.

The vaccinated patient is told that these issues are much better than a potential covid infection.

After three to four weeks, a vaccinated patient is instructed to return for a second dose. Even after they take the second dose, they are not considered “fully vaccinated.” **If the doubly vaccinated patient has a reaction to the vaccine or tests positive for covid-19 in the following two weeks after the second dose, they are still considered “unvaccinated.”**

According to the CDC’s rules, no one is counted as “fully vaccinated” until a full 14 days have passed from the second injection of Pfizer or Moderna’s mRNA vaccine, or 14 days have passed after the first dose of the Johnson & Johnson shot. **This rule conveniently hides 80 percent of the deaths that occur after vaccination and slyly mis-attributes these deaths as “unvaccinated deaths.”** This fraudulent rule inflates the unvaccinated death toll and hides the real medical issues that are the result of covid shots. The vast majority of deaths occur within the first two weeks after vaccination, yet all these deaths are advertised as “unvaccinated deaths.”

CDC’s covid testing fraud creates an illusion of outbreaks in the unvaccinated. The CDC’s morbid distortion of death is not the only process that obfuscates data and deceives the nation. The CDC also devised a different set of testing guidelines for the vaccinated and the unvaccinated. The CDC is pushing many industries to punish the unvaccinated at their place of employment and education, forcing them to take more frequent covid-19 test swabs and nasal probes. **CDC guidance allows laboratories to use a cycle threshold (CT) of 40 or greater for the unvaccinated. The CDC recommends that laboratories use a CT of 28 or less for the vaccinated.** This disparate testing guideline minimizes the risk of false positives for the vaccinated, but continues to generate a pandemic of false positives in the unvaccinated, artificially raising the number of cases for the unvaccinated.

The CDC forces healthy people to take falsely calibrated covid tests, resulting in false reports of outbreaks. Meanwhile, the CDC only reports covid cases in the vaccinated if these cases are 15 days past the second dose vaccine and only if these cases result in hospitalization or death. This fraud is further exacerbated by another cavalier rule by the CDC, which allows hospitals to claim covid-19 is the cause of hospitalization or death, when it cannot be ruled out or is suspected of causing the illness.

Covid-19 was the sole cause of death for only six percent of the reported covid-19 deaths in 2020, revealing widespread medical fraud. Former CDC chief, Robert Redfield blew the whistle in a hearing by the House Oversight and Reform Select Subcommittee on the Coronavirus Crisis. He said hospitals are given a “perverse economic incentive” to inflate covid deaths in the unvaccinated. There are hundreds of common infections that are still being reported as covid-19, as

evidenced by the [near eradication of hundreds of thousands of influenza cases in 2020](#). All this medical fraud, force and deception paints a harrowing picture: the CDC is part of a VAX-all agenda and is desperately trying to cover up for crimes against humanity.

In this interview, Dr. Peter Breggin — known as “the conscience of psychiatry” for his instrumental role in preventing the return of lobotomy as a psychiatric treatment in the early 1970s — discusses his latest book, [“COVID-19 and the Global Predators: We Are the Prey,”](#) available on [wearetheprey.com](#).

There’s no doubt anymore that we are in the middle of the biggest, most effective propaganda war in the history of the world. Nothing even comes close. As a result, a mass psychosis has developed, where many normally rational people have completely lost their capacity to reason. You can show them reams of solid indisputable information and they’ll simply refuse to believe any of it. What’s at the heart of this mass psychosis? Breggin explains:

“It’s extremely important to get over this attempt to make us all helpless, obedient and docile. We have to know, who are the masters driving this? On the other hand, we have to understand the mechanisms for this [manipulation] ... It’s a subtle reign of terror ... We’re looking at a revolution against us that wants to make us feel helpless like children.

In psychotherapy, we often see people who’ve been terribly abused by their parents, but they cannot face it. They can’t identify it as evil ... We can’t bear to think there are people out to harm us and manipulate us. You can’t bear to think there are people different from us — people who actually take pleasure from injury and domination ...

So, I want to identify first who these people are. Who’s doing this to us? It’s time to face it and to get rid of the idea that this is chance, or is this is crazy, or this is bizarre, or this makes no sense.

How does it make sense that they’re absolutely ignoring the fact that, in America, we now have over 14,000 reports of deaths from the [COVID] ‘vaccine’ and no one is investigating it? No one’s doing anything. In the years before this, if a vaccine had more than 20 or 30 [deaths], and certainly over 100, it would be a catastrophe.

Now we have a vaccine that has more deaths than all the other vaccines put together. How can we ignore that? On the other hand, we get all these huge [falsely inflated] numbers of deaths from COVID-19 ... So, we’re looking at this situation and [asking] is that crazy?

Well, no, it makes perfect sense. If you're trying to intimidate and overwhelm a population, you exaggerate the danger. You take a flu-like illness that is safer than the flu in terms of how it spares children and young adults and attacks people my age, I'm 85. [It's] killing people who are already past their predicted lifespan. So, you take this relatively benign epidemic and make it into a horror show by exaggerating everything."

What's the Goal?

The question that must be asked and answered is: What is the goal? We can determine the goal by looking at what we know. We know:

Health leaders are ignoring COVID job injuries and deaths

They do not want anyone to use early treatment. They've done everything in their power to dismiss and vilify any and all potential treatments, from vitamin D to hydroxychloroquine and ivermectin

Western countries that have been icons of freedom and liberty are being hit the hardest by the pandemic and put under the harshest countermeasures

The risk of dying from COVID-19 is less than 0.5% for all but the very old who have multiple comorbidities

Vaccine makers have no financial liability for vaccine injuries and deaths

Government started out enticing people to get the experimental shot using a variety of bribes, then moved on to forcing the shots using threats such as loss of employment, higher health insurance rates, loss of travel privileges, loss of right to health care in general and more

The PCR test cannot be used to diagnose COVID-19; the FDA recalled the Innova Antigen Rapid Test in mid-June 2021¹ and the CDC has withdrawn the FDA's Emergency Use Authorization of the CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel, as of December 31, 2021,² due to its inaccuracy

What do these facts, taken together, tell us? What are "the powers that be" getting out of this? Breggin explains:

"The spike protein is the spearhead of an assault on humanity. That has nothing to do with COVID-19 whatsoever, but is planned through COVID-19 in order to vastly increase the wealth of numerous institutions and individuals ... many of them unfortunately originating from America, who are working in collaboration with the communist, Chinese Communist Party, to increase this vast exploitation of the world ...

The Chinese have been sinking their teeth into us for a long time, because we are the seat of liberty in this world ... So, it all begins to make sense ... The forces are most locked into those of us who are now free, and they're aiming to destroy us. This is terrifying, but it shouldn't make you ... helpless. It should rouse you to look with reason at what is happening in the world."

The Decade of Vaccines

In 2010, Bill Gates announced "the decade of vaccines." A partner in that declaration was Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases (NIAID), as well as a number of other globalists, including the United Nations.

A decade later, we have COVID-19. Is that a coincidence? In 2015, a scientific paper³ assured that gain-of-function researchers had the means to create a pandemic. This research was funded by the NIAID and carried out by two top Chinese researchers at the Wuhan Institute of Virology (WIV) and, according to Breggin, all scientists in China work on behalf of the Chinese Communist Party (CCP).

"It's called military civil fusion," Breggin says. "They all work together ... That's the nature of the totalitarian state. People don't realize that, but Fauci had to know he was funding a potential pandemic virus.

In fact, in the last few days, it's come out from his emails obtained through a Freedom of Information Act (FOIA) request ... that he [Bill Gates] actually gave them instructions for how to combine ... several SARS-Cov-type virus systems to make an actual source code."

COVID Shot Failure Was Entirely Predictable

According to Breggin, the CCP has been working with SARS-CoV-type viruses since at least 2003, and there have been four different leaks of SARS viruses since then.

"So here we have China and America making what are essentially biological weapons, the excuse being, 'We're going to make vaccines.' But ... the vaccines aren't going to work and they know it, because the coronavirus mutates all the time.

So, if you make a vaccine for the Chinese virus, it's not going to last long because it'll just help force these mutations to come out because if you're suppressing [strain] of a virus, then one of the many others that are floating around will take its place ..."

Bill Gates' Pandemic Business Plan

The failure of the COVID shots was predicted by many physicians and scientists well before the middle of 2020, and there's virtually no chance the vaccine makers were unaware of the many objections brought forth, and the scientific rationale behind them.

"So, Bill Gates knows, in 2015, that a pandemic virus can be made and [that] labs in China and the U.S. are collaborating and he knows Fauci, who's been his key guy since at least 2010. So, Gates, in 2016, creates a business plan. I don't know how I found this one. I think it was God just pulling the strings of my fingers, but I pulled out of [Klaus] Schwab's website [Bill Gates' business plan for the world for the next pandemic](#).

It's about 65 pages long. You can find it on my website. [Go to the coronavirus resource center on breggin.com](#) and then look for the [background materials for the book](#), and you will become one of the first people in the world outside of the predators to see the business plan they made in 2016.

That business plan lays out everything that's happening to us now. In particular, it lays out that Bill Gates will be working with CEPI [Coalition for Epidemic Preparedness Innovations], an organization that Gates founded in 2017 — but that he's describing in 2016 — with Schwab, the man who will eventually announce the Great Reset in 2020 that he's been working on his whole life."

In that document linked above, "CEPI Preliminary Business Plan 2017-2021," it is stated that the drug industry will incur no expenses during the coming pandemic. All expenses, including indirect costs, will be covered. Yet another document describes the enormous profits expected. Gates' business plan also describes the creation of what eventually became Operation Warp Speed.

In July 2017, [CEPI created a PowerPoint presentation for the World Health Organization](#), which you can also view on Breggin's website. That presentation reviews Gates' plan and explains the WHO's role in setting the standards for pandemic science and medicine.

Amazingly, the PowerPoint includes a statement that CEPI has created a Memorandum of Understanding of what the WHO is. According to Breggin, that's "the next thing to an absolutely binding contract with the WHO."

Who Are the Predators?

In his book, Breggin also details the other partners in this scheme, which include the U.S. Food and Drug Administration, the U.S. Centers for Disease Control and Prevention, the National Institutes of Health, NIAID and the Biomedical Advanced Research and Development Authority (BARDA).

In short, the evidence points to the COVID-19 pandemic — with all the senseless and irrational decisions made in its name — being a scheme to enrich certain individuals, companies and organizations at the expense of everyone else.

“Rick Bright, [director of] BARDA, was key, a point man, [in] preventing everybody from having easy access to very effective treatments,” Breggin says. “Again, why? Because it was a decade of vaccines. It's all it was ever about. It was never about anything else. [It was always about] finding a way to get rich and powerful.”

So far, then, we can list the following predators:

Bill Gates and his organizations	Klaus Schwab and the World Economic Forum (WEF)
Drug companies	Fauci and the NIH/NIAID
The Wellcome Trust	FDA
CDC	BARDA
The WHO	

What Are the Predators Working Toward?

So, just what are they working toward? In videos dating back to 2017, Gates discusses the development of RNA vaccines. Fast-forward to 2020, and mRNA injections were the immediate choice for the fast-tracked COVID shots. And, as detailed in Gates’ business plan, Pfizer and Moderna were both given billions of dollars from the U.S. federal government through BARDA and the NIH/NIAID.

Don't get scared. Get angry, but don't get demoralized. They want that. You know, there's a whole school of public health that talks about how to intimidate and engender fear to get people to do what you want. It's called fear appeal. So, it's systematic, and public health people have always been totalitarian in nature. ~ Dr. Peter Breggin

This, despite the fact that no mRNA injection has ever made it to market before this, and the fact that no coronavirus vaccine has ever made it to market in the 20 years they've been working on it. For some reason, coronavirus vaccines routinely cause severe illness and increased lethality when exposed to the wild virus, a phenomenon known as antibody dependent enhancement (ADE).

In his book, Breggin cites a 2020 paper by independent researchers warning that all of the COVID vaccines, not just the mRNA and the DNA shots but also those using killed viruses, are too dangerous to even try on humans.

“So, they know all of this,” Breggin says. “There are no surprises to them. They knew what they were doing ... But don’t get scared. Get angry, but don’t get demoralized. They want that. You know, there’s a whole school of public health that talks about how to intimidate and engender fear to get people to do what you want. It’s called fear appeal.

So, it’s systematic, and public health people have always been totalitarian in nature. It’s all about public health people telling the communities what they must do come the next public health threat. They don’t say preserve the Bill of Rights. They don’t say, ‘make sure we check this out in the courts or a body supervising us for our ethics to protect the folks.’”

Recognize the Abuse, Then Stand Up Against It

So, how can we break the mass psychosis spell that so many are currently under, which makes them unable to see reality and understand that complying with the globalist predators will result in their own ruin? Breggin comments:

“Human beings are born into a state of helplessness ... And the reason for that, I believe, is that we are a social animal. The brain doubles in size in the first year of life, which occurs in a social environment. So, we have a social brain. We are very tied to each other. That’s the whole purpose of that socialization, that slow growth, that dependency over the years ...

Being social allowed us as an extended family to survive and to be different than all other creatures. It’s our social relationships that make us unique. They also give us our pleasure.

In the grief now built into all of us is that potential for feeling very helpless. We can become in moments [like] little children again. When we start feeling guilt or shame or anxiety or overwhelmingly afraid, we can easily become helpless. And that’s basically what’s going on. I think it’s fine to call it a psychosis, but I prefer to call it an overwhelming helplessness that overcomes the nation.

Now, if in childhood you’re abused, then that helplessness remains with you into adulthood. That’s how powerful those early years are, and you have to work hard to overcome it ... We to identify what was done to us. If you’re an adult, it really helps to identify that, yes, you were sexually abused or, yes, you really were bullied by your older brother or your big sister ...

You look back and you see what’s going on and what happened. And that helps you ... We are being oppressed by evil people. Nothing is by chance. We might as well be children being tormented. We have to say to each other, ‘No more. No more helplessness, no more lamenting, no more complaining, no more saying What’s happening to us? It’s very clear, what’s happening to us.’

It's not crazy. It's intentional and purposeful and we must stand up to it. We must understand and not allow ourselves to be abused and rendered out again. We need to give each other comfort and love and inspiration. We need to support from a tactical viewpoint.

We need to get involved together. [My wife] Ginger and I made the terrifying decision to take on COVID-19 ... [and] join many other people fighting for America's freedom. It was a scary choice, but once we did, we started meeting tons of people.

I never imagined knowing Peter McCollough, a great cardiologist who wrote an introduction to [my book], who risked his life and his whole reputation to declare that there is a good treatment ... We're all re-founders of America in a critical moment in time.

And instead of feeling sorry for ourselves, think to yourself, 'God put us in a place where we can make one of the hugest differences, or we can have effects beyond anything we imagined' ... We need to know that there is a war against us ... They have a stealth war against us ... So be proud, be an American, be a patriot. Stand up for liberty.

Look at the Declaration of Independence, the Constitution, especially the Bill of Rights. That's your legacy. You were throwing it away. You were doing nothing to protect it, probably since the civil war. This is the biggest threat to freedom in America. And it's much bigger than the civil war. It's a war against all of Western democracy."

More Information

As made clear in Breggin's book, "[COVID-19 and the Global Predators: We Are the Prey](#)," the end goal is complete totalitarian control of all nations, very similar to the kind of societal control already in place in China, and unless we unite against the implementation of this plan, there will be no happy ending for any of us.

It's not going to be easy, because the globalist predators have infiltrated government, NGOs, academia, entertainment, business and every other major aspect of American life. The way forward will necessitate taking back control over each and every area, one by one.

In the days just after this interview, President Biden made clear his intention to force vaccinate Americans by mandating corporations with 100 employees or more to require COVID vaccination or face fines. It's as unconstitutional as you can get, but he's doing it anyway because, again, the end goal is totalitarianism and the means is medical tyranny.

We can also see that COVID-19 was nothing more than a means to an end because the same globalist elite are now calling for sanctions on the world to combat the health threat of global warming.

More than 200 journals, including The Lancet, The New England Journal of Medicine⁴ and The BMJ simultaneously published the identical editorial calling for “society-wide changes” in the name of saving the environment. Interestingly, one of the authors, Richard Smith, chairs The Lancet Commission on the Value of Death. As noted by Breggin:

“It is quite stunning and signals that the lockdowns, passports and other abuses will continue and be ramped up as people catch on to the fraud behind COVID-19. Such a spectacular coordinated effort to get worldwide medical and health journals lockstep into progressive and globalist goals for humanity is astonishing and requires the disclosures in our book to explain.”

“COVID-19 and the Global Predators” is being self-published and is only available on wearetheprey.com for the time being. At 650 pages, it’s a big book, and it goes over the chronology of how we got here, from start to finish. It also has a detailed index, so you can look up names and organizations.



by Brian Shilhavy, Editor, Health Impact News

Last Friday an FDA vaccine advisory committee voted 16 to 2 against authorizing a 3rd Pfizer COVID-19 “booster” shot. And yet inexplicably, they later took a second vote among the same committee members to authorize a 3rd Pfizer booster shot for people over the age of 65, which was passed unanimously.

Why?

Beliefs that vaccines actually help prevent disease, and that therefore those “most vulnerable” need them most, seemed to prevail here among the vaccine cultists, even though most people do not even know that Pfizer has never claimed their COVID-19 shots stop transmission of COVID-19. They allegedly only “lessen the effects.”

This religious-like belief which has no basis in anything that can remotely be considered “science,” is seen in its absurdity among their believers when a fully vaccinated individual dies after receiving these shots, and their loved ones exclaim: “*Thank goodness they were fully vaccinated! Otherwise they would have suffered much more before they died.*” See:

[Belief in COVID “Vaccines” Now Reaching Religious Fervor: The Shot “Reduces Suffering” Before Death](#)

As a result of this belief system, seniors are always targeted more than the general population to get as many vaccines as possible, and the version of the flu shot people over the age of 65 get is usually four times as strong (toxic) as flu shots for the general population, based on this belief. See this article we published back in 2013:

[23 Seniors Died After Receiving Flu Shot Sold by Pharmacies](#)

It is no surprise then that the vast majority of recorded deaths in VAERS following the COVID-19 injections is among people over the age of 65. Here is the breakdown by age according to statistics in the VAERS government database, which was just updated today (9/24/21).

[Source.](#)

As one can clearly see, people over the age of 65 die the most following COVID-19 shots.

If we separate the “Unknown” age category, we see that about 77% of all deaths following COVID-19 shots are among people over the age of 65. Applying that same percentage to the “Unknown,” we can conclude that about 4,414 out of the 5,770 deaths were probably also people over the age of 65.

That brings the total amount of deaths in people over the age of 65 following a COVID-19 shot to about 11,770 deaths.

Throughout this week we have published [whistleblower testimonies](#) stating that tremendous pressure is put on healthcare workers to NOT report adverse reactions to VAERS, and we also now have [Dr. Jessica Rose’s very detailed analysis on the underreporting of adverse reactions in VAERS](#) where she concludes that a safe estimate would be to multiply adverse events in VAERS by a factor of 41X.

That would mean then that a conservative estimate of deaths in people over the age of 65 following a COVID-19 shot for the past 9 months is about 482,570 senior deaths represented by the U.S. VAERS. (While the majority of these are in the U.S., there are also some from outside the U.S.)

Did you think I was exaggerating when I chose to use the word “genocide” for this age group in the headline to this article?

By way of comparison, I searched the government VAERS database for deaths in this age group following ALL vaccines for the past 30 years, since VAERS was started, and it returned a result of 1,311 deaths in people above the age of 65 following ALL non-COVID vaccines for the past 30 years. ([Source](#))

So we have seen almost ten times more deaths in this age group following COVID-19 shots during the past 9 months than the past 30 years following all other vaccines COMBINED.

And for those people in this age group who survived the first two doses of the Pfizer COVID-19 shot, the FDA and the CDC just authorized a third shot to be given to this age group with the highest recorded deaths already following COVID-19 shots.

THIS IS MASS MURDER!!

This is also the largest age group where medical kidnapping happens, as about 1.3 million seniors have court-appointed guardians where their custody is removed from their families, even if someone in their family has power of attorney, and turned over to the State. ([Source](#).)

State appointed guardianship of seniors is a \$273 BILLION industry. ([Source](#).) And the criminal truth to all these tens of thousands of deaths among seniors following COVID-19 shots is that not a single senior needed to die from an experimental “vaccine”!!

There are effective, non-vaccine treatments!

Just as I was writing this article today, a person emailed me a study published in Spain earlier this year, that saw 84 seniors from two different nursing homes all diagnosed with COVID-19 have a complete recovery from simply using antihistamines and an antibiotic.

[Antihistamines and azithromycin as a treatment for COVID-19 on primary health care – A retrospective observational study in elderly patients](#)

The results:

None of the patients treated progressed to severe disease, required hospital referral, or had adverse effects related to treatment. All residents recovered in a few days after beginning treatment, and were confirmed later as COVID-19 cases by seroconversion by rapid test when available. ([Source](#).)

**Euthanizing our seniors through vaccination is mass murder, and these mass murderers allowing this to happen need to be executed over this.
Does Pfizer Now Rule the World?**



Albert Bourla, CEO of Pfizer.

In the article we published last weekend about the controversy in the FDA regarding authorizing a 3rd Pfizer booster shot, I speculated that there could be two reasons why there was infighting at the FDA regarding these 3rd Pfizer booster shots:

First, this could be a “drug war,” where Pfizer’s competitors are upset that Pfizer is getting so much of the market share on the COVID-19 vaccines, and they are applying pressure through their contacts at the FDA to start discrediting Pfizer and slow down their rapid race to dominate this market.

Or, secondly, people are starting to abandon ship on the Biden Administration as the current COVID-19 vaccine narrative is now falling apart very quickly, as hundreds of thousands of people are now screaming to have their voices heard regarding their negative experiences with the COVID-19 shots, and the FDA and others are trying to cover their butts in the event that there is a regime change and people start getting arrested for crimes against humanity.

I hope for the second scenario, but fear it is probably the first one. ([Source.](#))

I think this question was answered this week, as the CDC ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES (ACIP) met to discuss the Pfizer booster shots. Here are some comments about this meeting published by Politico:

Experts are worried about confusing the public.

Members of the CDC's vaccine advisory committee expressed concerns Wednesday about green-lighting boosters from one brand over others with authorized Covid vaccines available to Americans, noting the potential for public perception and logistical issues. The panel is tasked with recommending to the CDC how the FDA's vaccine policy should be implemented in real-world settings.

Long suggested that the group wait for more information on so-called mix-and-match doses — the ability to vaccinate someone with one brand's primary series with the option for a different manufacturer's booster later — before signing off on just the Pfizer booster, asking “whether we're willing to panic half the recipients of Moderna.”

“I don't want to jeopardize anyone,” she said of delaying a booster decision. “At the same time, it'll be very, very difficult to have a little less than half of the population who would be eligible to receive” a booster if people can only get the brand that matches their initial series.

Moderna has asked FDA to authorize its booster shot, and Johnson & Johnson has begun submitting booster data to the agency with an eye to filing an application.

Amanda Cohn of the CDC urged committee members to consider the recommendations they're making now as “interim policies” that will change as more data surfaces. The National Institutes of Health is conducting a study on mixing vaccine doses, with results expected later this year.

“This is a rapidly moving target,” she said. ([Source.](#))

Like the FDA advisory committee, this CDC panel voted 9-6 not to recommend boosters, but did recommend them for people above the age of 65.

It seems like Moderna and J&J wanted to get in on this lucrative market and restrict Pfizer to only the senior population.

But the FDA, headed by Janet Woodcock, and the CDC, headed by Rochelle Walensky, both went against their respective committee recommendations, and included ALL adults over the age of 18 for the 3rd Pfizer booster shots.

Hours after the panel voted 9-6 not to recommend boosters for those groups, Walensky overruled them.

“As CDC Director, it is my job to recognize where our actions can have the greatest impact,” Walensky said in a statement late Thursday, according to [The Associated Press](#).

“At CDC, we are tasked with analyzing complex, often imperfect data to make concrete recommendations that optimize health.”

Walensky noted her recommendation aligned with the [Food and Drug Administration](#), which recommended on Wednesday that adults “in an occupational or institutional setting” that increases their risk of getting COVID-19 also be eligible for the shot. ([Source.](#))

Moderna and J&J lost. Pfizer won. Pfizer obviously has a firm control over both the CDC and FDA.

Can anyone stop Pfizer now? They are 100% in control of their laboratory country, Israel, where it has been revealed that no other pharmaceutical company can provide COVID-19 shots to Israel, as the Israeli people are Pfizer’s personal lab rats. See:

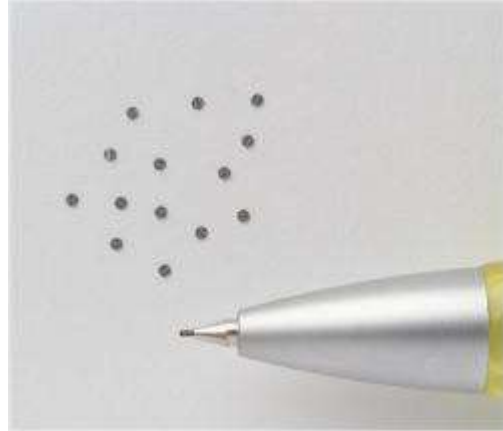
[The Holocaust in Israel Exposed in Leaked Zoom Call with Pfizer Scientist Admitting that Israelis are Laboratory for Pfizer COVID Shot](#)

Here is a video report from whistleblowers that have seen firsthand the mass murder of our seniors via COVID-19 shots. This is on our [Rumble channel](#), and will also be on our [Bitchute channel](#).

The Vaxxes are the Biblical Mark of the Beast of Revelation 13:17; 14:9, 11; 15:2; 16:2; 19:20; and 20:4! [Pay close attention]

This will likely surprise many who have been hoping it was not so, but we have ample evidence to the effect that the Vaxxes; **all four, AstraZeneca, Moderna, Pfizer, and J&J contain Graphene Oxide, a poison that will be part of the QuantumDot: Hydrogel ID2020.** I saw it coming twenty-two years ago when the “Digital Angel” was unveiled on the NBC “Today” morning news. The company that produced the “Digital Angel” went bankrupt from financial problems and then IBM bought the company and its patents and research work. **Since 2002, IBM and Bill Gates of Microsoft teamed up to produce what is known today as the “QuantumDot:Hydrogel ID2020”.** **This is the Biblical “MARK” of the Beast System.** I first wrote about this 18-months ago.

The public was self-deceived, into thinking the tiny RFID “microchip” could never be miniaturized even smaller, even to the point of being invisible to the eye. On the left below is a microchip from 2001, and on the right is a “microdot” from around 2008. The bottom is from around 2010.



Much more information on Covid Vaxxes is the “Mark” of the Beast can be found in Blessed Hope #72, posted on Thursday, September 2nd, 2021. This will take you to link: [The Blessed Hope, Part 72](#)



The bottom “microdots” have been so further reduced in size that they can only be seen under a microscope. In testimony before a government commission in Barbados, I listened a scientist stated that a present day Vaxx payload can contain 15-billion nano-particles. Once injected into the body they are capable of attaching themselves to specific targeted locations throughout the human body.

You have no way of knowing what nano-particles are in your vaxx, or for what they might be programmed to do, intentionally, or accidentally, once inside your body. People who were tested early on with the long cotton swab inserted into the upper most region of the nasal cavity were found to be placing nano-aluminum RFID locator dots which transmitted one’s GPS location.

It is at this point you need to understand how these nano-particles make the Vaxx the “Mark” of the Beast. The Vaxx contains “messenger DNA”, and when it is injected into

the human body, it modifies, changes your DNA, and in essence adds a third-strand DNA. **Once inside the body, there is no way to get it out of the body!** Once inside the body, the “messenger DNA” spike Protein (PEG) immediately begins to self-replicate itself and takes control over your God-given DNA and immune system. Anthony Patch, a Canadian researcher and publisher of *‘Entangled’* magazine, has been researching the world of nano-technology and nano-particles. **Through his research and writing he has been able to show how Covid-19 is a Retrovirus. In plain simple terms it was made into a bioweapon to cause harm!**

In addition to the Graphene Oxide, there are two other toxins in the “gene” therapy being passed off as vaccines: There is the spike protein (PEG), and Polysorbate 80. **All three are toxic poison.** They can be injected, ingested, or inhaled into the body. The spike protein (PEG) is antifreeze and Polysorbate 80 is a cleaning solvent. Graphene Oxide is an element that will hold a magnetic charge, which will be activate through **5G** wireless energy as the human body is upgraded with “booster: shots intended to include a person’s personal data, financial data, and medical data as part of the New World Order! Your cell phone screen uses the Graphene Oxide as a visual image maker. Need I say more about Graphene Oxide?

Persons contracting the Covid-19 virus do undergo an alteration to the DNA of the infected cells, the so-called “host DNA”. This is due to the insertion of retroviral HIV-1 fragments. **Those who were vaxxed actually received this Retrovirus at the time they took any of the so-called vaxxes. When a person took the jab, they were given the Retrovirus.**

Anthony Patch has shared in a series of You Tube videos, just how the human body is used by the “delivery system” to be changed from a human being made in the image of God into a cyborg creature, partially human and partially artificial intelligence controllable from external sources. Recall, it was Pfizer who used the term “delivery system” but all the vaxxes contain “graphene oxide”, a spike protein (PEG), and Polysorbate 80; and other toxins needed to facilitate the synthetic biology inserted for the QuantumDot:Hydrogel ID2020. To view Anthony Patch videos search on your preferred search engine, search on the term “Anthony Patch You Tube” and you will find a series of videos. Look for the one entitled: **“The Mark of the Beast is here to steal your soul!”** Watch this one first before you try to view any of the other videos he has posted.

A great deal of confusion occurred early on by what seemed to be different experiments being conducted on the public at various places around the country, as if they were part of an experiment. There was considerable controversy with the PCR tester which was also defective 95% of the time and was also found to be intentional by the Chinese maker of the PCR. This was done to create the fear factor with the public that led to the public thinking they needed a “vaccine” to cure this virus. It was all rigged to create fear porn. I have been saying for twenty-months that **“the virus was created for the vaccine”**, meaning that the so-called Vaxxes were created years before this fake

pandemic was executed. It has been known for some time that the so-called Covid virus was patented as early as 2003.

If you do not learn anything that I have shared in this series, do not allow yourself to be vaxxed and do not submit to nasal swab tests or any future booster Vaxxes. Pfizer pharmaceutical is on record now and that people will need booster shots every six months. The booster shots are needed for several reasons: 1. To trick the human immune system in accepting the package contained within the Vaxx, and 2. To upload more Graphene Oxide into the individual.

Pfizer two months ago posted earnings of \$5,000,000,000 for the latest quarter (\$5 billion) earnings report. WOW: Moderna Calls for 3rd Shot of Vaccine to Protect Against New Strains — On the same day the company posts \$4 Billion 2nd Quarter Profit on Vaccine. Interestingly, Big Pharma was going broke before the Scamdemic was hatched! Are you beginning to see a familiar picture of the well-used expression “Follow the money trail?”

God built into the human body a wonderful immune system that attacks anything that is injected into the body through a needle. In previous articles, I have noted when they talk about so-called “booster” shots it will be to trick the natural immune system from expelling or rejecting the man-made vaxx toxins. The immune system goes into attack mode to destroy what has been injected into the body. Anyone that has had any sort of “transplant” surgery knows that rejection of the replacement organ is the biggest hurdle faced, and requires a “transplant” patient to take anti-rejection drugs most of their remaining days of life.

The evil pharmaceutical industry will profit on the greater plan of killing people by people and governments having to purchase their own poisoned vaccine for their own death by the hypodermic needle payload injected into a person’s shoulder. How diabolical this entire plan was created.

The CDC and NIAID directors are placing the blame of reinfections of those already vaccinated on the unvaccinated public in an effort to force the 35% who have for their own reasons chose not take the unproven experimental “gene” therapy which never followed the protocols of testing. This **IS a war of words being waged by those who have ulterior motives for their call for vaccine mandates. Things are only going to get worse with this kind of propaganda.**

It is part and parcel of the New World Order plan to “Depopulate” the world.

This is a war by psychopathic and sociopathic demonic liars. **We now are living in a world of mass psychosis.** Exiting from such a world is not possible due to the psychotic fear and lack of rational and logical thinking. It feeds upon itself and the madness assumes a life of its own. Since it is global in

form, it becomes an **“Extinction Level Event.”** Only Jesus Christ can break this curse!

The CDC survival rate refutes their own lies! The chart **below** is from the CDC’s own statistics. This is all about **“Mass Murder”** by needle, and the plan to exterminate as much of the population through what I have shared.



Editorial Observations

I have been doing this “Mass Murder” series for over seven months at this point, and we have watched defined patterns forming, taking place from the reporting data, from many different sources. In Bible prophecy, **Prologue = Pattern = Prophecy**. I discuss this concept elsewhere in articles I write pertaining to Bible prophecy. As to how this concept fits into the Covid-19 scamdemic, it is showing many signs of it being problematic after 18 months of it being hatched in Wuhan, China. We can say with total certainty that this SARS2-CoV19 is **NOT NATURAL!**. If it is **NOT NATURAL**, then it can only mean that it is **MAN-MADE!** It was from the beginning and still is a **“bioweapon”**. This is not even debatable at this point. Yet the public has never been told this by any politician, or public health official. WHY NOT? Could it be because they have been bribed, bought and owned, or blackmailed? Or maybe it will track back to the CIA and DARPA’s work in creating an inexpensive pathogen to kill the population, and their Deagel plan to depopulate the U.S. of 260 million citizens?

Those taking the jobs are betting their life on evidence of a crime against humanity. Proof of this can be found in Dr. Len Horowitz’s scathing report on the Fauci e-mails, linking an international criminal scheme to depopulate on a global scale. **“EXPLOSIVE EXPOSURE of COVID NATIONAL SECURITY ‘CRIME’ SYNDICATE!”**. You will find it posted on my web page www.pastorbobreid.com for 7/8/21.

Dr. Len Horowitz is the author of *‘Emerging Viruses: AIDS And Ebola, Nature, Accident, or Intentional’*. The scientific community has known about **The “Indian-research paper”**

on Covid-19 published, but retracted under pressure by Dr. Anthony Fauci published in March or early April of 2020, revealed the virus had 4 insertions of the HIV genome (18 fragments) + 4 fragments of SARS2, hence refutes the premise of the CDC, NIAID, NIH, and WHO claiming it was a rogue novel virus! We learned from the Dr. Fauci e-mails, it was Dr. Anthony Fauci who pressured the Indian scientists to remove their paper or lose future finding for research if they did not withdraw their lab findings. I have in my possession a publication that shows the actual DNA sequencing genome which I highlighted above in yellow for which the 2008 Nobel Peace Prize in Medicine, Dr. Luc Montagnier, has confirmed this virus was engineered with **“Gain-of-Function”** to make it more harmful than the common cold it was made from.

Dr. David L. Martin was interviewed by German attorney. Reiner Fuellmich three weeks ago and Internet censors pulled the video shortly after it aired on Monday July 12, 2021. Dr. Martin showed the evidence this was patented multiple times since 2003! I saved transcripts of the interview and it is highly revealing of a criminal RICO Act case unlike the world has ever experienced. Reiner Fuellmich is known for his exposing and defeating Volkswagen in a multi-billion dollar fine against the Volkswagen Corporation for rigging EPA tests involving Volkswagen diesel-equipped vehicles a few years ago.

We also know that it is a **“Depopulation” Genocidal Weapon**, as the Vaxxes attack the reproductive organs of both male and female, predominantly female. 82% of pregnant mothers who received the Vaxx spontaneously aborted or miscarried.

We also know the **highest death rates are among the elderly**. Every report from Robert F. Kennedy’s Children’s Health Defense report in *‘The Defender’* reports the average age of those who have died is currently at **72.9 years**. If you go back and read each of the weekly reports, the average age of all deaths is consistently in this age range. It has not deviated by much more as a single percentage point until this past five week when it dropped to **72.9 years**.

My observations here will be updated as need be in the coming weeks. We can only speculate as to who and what the motives are behind this scandemic, and hell-bent agenda of a **“needle in every arm”** statement by Klaus Schwab of the World Economic Forum made last year. At this point, there is a growing list of scientist, researchers, and doctors, virologists coming forth and exposing the global tyranny with threats by Joe Biden and his handlers suggesting that companies and institutions impose mandate lockdowns, thus circumventing government limitations.

Everyone sees the Covid-19 story from different and even unique perspectives. I have studied it for what I knew it was right from the beginning, a **“Depopulation”** agenda the world was presented in the Georgia Guidestones located in Elberton, GA. The very first of the secular statements was there were too many people and the stated plan was to bring it down from 7.8 billion to a “nice size” of 500,000,000. The nagging question has always been in how they planned to achieve their goal. Well, now we know!

(Natural News): When physicians receive their medical license, they must pronounce their intellectual devotion and allegiance to the vaccine industry and its myriad of false narratives. Any healthcare professional who dares question “the science” risks losing their medical license. **Any doctor who speaks out-of-line against forceful vaccine propaganda could be stripped of their title; their career destroyed; their reputation smeared.** They become complicit by default and their failure to expose the harm they take an oath to do no harm.



Covid-19 is a
“BIOWEAPON”
Created to scare people into taking
The real kill shot!

PFIZER COLLUSION: Fauci says deadly spike protein injections should be mandatory for all children under age 12
Tuesday, August 31, 2021 by: [Ethan Huff](#)



([Natural News](#)) Tony “Dr. Death” Fauci is [back in the fake news](#) pushing “vaccinations” for the Wuhan coronavirus (Covid-19).

Speaking to CNN lisper Jake Tapper during a recent CNN appearance, Fauci went off about how all children, regardless of age, should get injected for Chinese Germs in order to keep everyone “safe” against the *plandemic*.

"I believe that mandating vaccines for children to appear in school is a good idea," Fauci proclaimed – *watch the video below.* **Where is the evidence for that statement?**

Dr. Fauci is a delusional crazed criminal or a psychopath to mandate vaccines for children given the evidence of the vaccine harm vs the recovery rate under natural immunity. This is medical madness at its refuting the true science. The world hunted down the Nazi Doctor Death, Joseph Mengela for his evil experiments upon innocent children and babies. A movie was made about Dr. Death Mengela, *"The Boys From Brazil"*.

To mandate vaxxes of the young is another Crime Against Humanity! This man does not have a soul!

According to Fauci, mandating [Donald "father of the vaccine" Trump's "Operation Warp Speed" shots](#) is no different than forcing a polio or an MMR injection on a child.

"We have mandates in many places in schools, particularly public school, that if you want a child to come in – we've been doing this for decades and decades," Fauci rambled.

"This would not be something new requiring vaccinations for children to come to school," Fauci added, stating plainly that he believes Wuhan Flu shots *"should be a requirement to attend public school."*

Fauci says *"fully vaccinated"* Americans should wear masks outside. As for continuing to wear a mask, Fauci supports this as well, even for those considered to be *"fully vaccinated."*

When asked by Tapper what he thinks of Oregon Gov. Kate Brown's reimposition of an outdoor mask mandate for the Beaver State, Fauci said that some "circumstances" require that fully injected people continue to wear a mask even when they are outside.

In Fauci's opinion, getting jabbed makes no difference as far as one's risk of catching or spreading the Fauci Flu, thus everyone should probably continue masking in order to "flatten the curve." Meanwhile, one of the things we know is capable of curing the Chinese Disease, Ivermectin, remains [nearly off limits](#) in the United States and elsewhere because it threatens the *plandemic* agenda of mandatory injections and the forever wearing of masks.

Fauci cares about your life and the lives of your children about as much as an axe murderer cares about his victims, in other words. All Fauci wants is for you to obey his psychopathic orders, no matter how insane they are, or else you hate "science."

“God hates those who harm children,” wrote one commentater at *‘Citizen Free Press’* about Fauci, reserving some choice words for that gnomish ghoul.

“What kind of rocks do these pathological scumbags crawl out from under?” asked another. ***“Protected by the media and the other evil elites like himself ... they all need to feel the terror for themselves that they seem all too happy to inflict on us.”***

Another pointed out that none of the heads of Pfizer, Moderna, or the other vaccine corporations currently pushing these jabs have gotten injected themselves. Why is that?

If that is not proof this is all about Euthenasia of the elderly and helpless, consider the arrogance of Joe Biden exempting members of Congress and Senate members from the Vaxx, along with all judges! As they used to say in the Army, Rank has its privileges. Only this time it is Mass Murder!



Blessings, Jesus is at the door!

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<http://jesusisthewaythetruththelife.com/node/22>

Feel Free to Share This With Everyone!
This information can be very important
and the difference between Life and Death!

I do not exaggerate!

**This is Global
Genocide
They want us all
dead!**