

Mass Murder

By Syringe Needle!
Part 51

THEY LIED: Bombshell new research confirms that Reuters, AP misled the public about how long mRNA nanoparticles persist in the body following vaccinations

Sunday, February 13, 2022 by: JD Heyes

THEY LIED: Bombshell new research confirms that Reuters, AP misled the public about how long mRNA nanoparticles persist in the body following vaccinations.

(Natural News) Once again, the info-gatekeepers in the mainstream media – the “fact-checkers” at the Associated Press, Reuters, etc., – have served their purpose as disinformation outlets for the Deep State regime by lying about another aspect of the Wuhan coronavirus (COVID-19) vaccines.

According to Alex Berenson, a former ‘*New York Times*’ reporter and author who has been following and tracking COVID-19 research and data since the pandemic began, a little-noticed report in the highly respected, peer-reviewed journal *Cell* reveals that mRNA materials from the Moderna and Pfizer vaccines remain in lymph nodes for at least 60 days, while “free-floating spike proteins circulate at high levels in the blood after vaccination.’

That’s not what the info-gatekeepers have been telling us.

“Vaccinated people infected with variants of Sars-Cov-2 produce antibodies biased toward the original and now extinct variant, rather than the one that has actually infected them,” Berenson noted further on his SubStack account, noting that what he says is not a conspiracy theory.

He added: *“Findings from a preprint in Cell, among the world’s leading scientific journals. Almost 50 researchers worldwide collaborated on the work, which Cell released online two weeks ago. The preprint has received little attention, possibly because it discusses the potential implications of its findings only obliquely. In discussing the fact that the mRNA hampers the immune response to new variants, the researchers offer extra doses as a potential solution.”*

Brighteon.TV

While the researchers still offer up booster vaccines as a way to “compensate for relatively decreased binding” to new variants (vaccine boosters have proven dangerous and ineffective as well, by the way), Berenson noted that, based on the research, “the preprint’s

findings destroy comforting fictions about the mRNA shots, including that the body quickly destroys the genetic material in the jabs, as Reuters and other 'fact-checkers' have long insisted."

Researchers writing in Cell note that the genetic materials actually remain in the body for up to two months – 60 days.

The mRNA vaccines cause the body to manufacture a large amount of spike proteins, and advocates for the vaccines have always argued that the proteins then remain bound to cells where they were made, Berenson noted.

However, according to the researchers, they found that spike protein in the blood following mRNA vaccines were present and as high as those that were naturally produced after having the COVID-19 infection (again, making the vaccines for previously sickened people worthless).

Dr. Robert Malone, inventor of the mRNA technology, discussed the production of harmful amounts of spike proteins caused by the vaccines with top podcaster Joe Rogan last month.

"The gain-of-function research behind the development of the bioweapon spike protein ultimately paved the way for the development of a similar, but different spike protein which is currently being used as mRNA instructions in the covid vaccine. The drug companies have an ethical obligation to prove that the spike protein in their vaccine is not toxic," said Malone as reported by Natural News.

When he was asked about the decreasing efficacy of vaccines and boosters, Malone said he agreed that the jabs are actually leading to negative efficacy, as demonstrated in studies done by Danish researchers. As doses increase, individuals are becoming more prone to being infected by the virus.

In Israel, where citizens are being pressured into getting a fourth vaccine dose, their B and T memory cells "are being trained to attack a spike protein that has long since mutated, setting the vaccinated up for antibody-dependent enhancement, autoimmune issues and cancer," Natural News reported.

Malone also warned that spike protein had a propensity to cause blood clotting, which has likely led to increases in strokes, heart attacks and other maladies related to the phenomenon.

This is why this vaccine should not be mandatory – at all.

NEW study reveals mRNA COVID shot suppresses immune system, authors call for immediate stop to injections worldwide

by: Sara Middleton, staff writer | February 4, 2022

([NaturalHealth365](#)) Absent any long-term safety data about the Pfizer and Moderna COVID shots – let alone the conflicting short-term data about the safety and efficacy of these gene therapy-based drugs – people have been expected to “follow the science” when it comes to making personal health decisions during this pandemic ... so long as the science “follows” the mainstream narrative.

But what happens when the “science” deviates? An example: an international team of researchers from institutions including the Massachusetts Institute of Technology (MIT) now claim that mRNA COVID shots [suppress the immune system](#) and increase the risk of a wide range of life-altering health problems.

mRNA COVID shots suppress the immune system, poised to accelerate rates of chronic health issues: MIT researcher and colleagues.

In a pre-print paper called “Innate Immune Suppression by SARS-CoV-2 mRNA Vaccinations: The role of G-quadruplexes, exosomes and microRNAs,” co-authors and scientists Dr. Peter McCullough (well-known Texan cardiologist), Dr. Stephanie Seneff (senior research scientist at MIT), Dr. Greg Nigh, ND, LAc (naturopathic doctor based in Portland, OR), and Dr. Anthony Kyriakopoulos (Greek medical and molecular microbiologist), present their hypothesis that the [mRNA COVID jabs](#) introduce “genetic modifications” that have a variety of ill effects on the human immune system.

These effects – which are reportedly quite different from the effects induced by natural infection with SARS-CoV-2 – include disturbances in type 1 interferon signaling. Type 1 interferons are small proteins that play important roles in the innate and adaptive immune responses to viruses and other pathogens. The authors state that if mRNA COVID jabs impair the function of these type 1 interferons, as their theory suggests, then *“this could lead to increased susceptibility to COVID-19 in the two weeks following the first vaccine, before an antibody response has been initiated.”*

They also point to several other studies showing worsening outcomes for people with COVID-19 who have impaired type 1 interferon signaling. This is *highly* relevant in the context of coercively injecting the masses, given that it is now well-established that these shots do NOT effectively stop viral transmission.

In other words, for the person who has an mRNA dose or two (or three) on board, their immune system could be *less* equipped to fight off the virus, at least for a window of time. And this might even be the *least* of the problems associated with these novel COVID drugs.

Researchers offer plausible explanation of why COVID shots associated with alarming new cancer diagnoses.

The authors state that the COVID mRNA jabs also induce immune cells to release *“large quantities of exosomes containing spike protein along with critical microRNAs.”* These exosomes, which are small, membrane-bound vesicles, are then taken up by cells and

tissues throughout the entire body. The authors say this can impact several critical cellular functions, including protein synthesis and “cancer surveillance.”

Cancer, in particular, is an interesting adverse effect to discuss. We typically think of cancers as developing slowly over time. Can we expect to see an increased incidence of cancer post-jab *already*?

Yes, the researchers say, if these mRNA jabs “are leading to widespread dysregulation of oncogene controls, cell cycle regulation, and apoptosis,” as they hypothesize. And if their hypothesis is correct, “then [U.S. Food and Drug Administration’s Vaccine Adverse Event Reporting System (VAERS)] reports should reflect an increase in reports of cancer, relative to the other vaccines.”

It turns out this is *precisely* what VAERS shows. In Table 1 of their paper, the authors list the number of VAERS reports (generally made within the first weeks to a month after a shot is administered) of new cancer diagnoses associated with COVID shots versus all other shots. Incredibly, the VAERS data shows an overall 2:1 ratio of new cancer diagnoses post-COVID jab compared to *all other shots administered in the past 31 years*. Certain cancers, including ovarian cancer, hepatic cancer, and B-cell lymphoma, have ratios as high as 3.4:1, 5:1, and 6.3:1 (respectively).

Overall, the authors offer a grim prediction based on their analysis: the immune and cellular disturbances induced by the COVID jabs are poised to have a direct causal link to health conditions including, but not limited to:

- Neurodegenerative disease
- Myocarditis
- Immune thrombocytopenia
- Bell’s palsy
- Liver disease
- Impaired adaptive immunity
- Increased tumor growth
- DNA damage

They conclude: “It is imperative that worldwide administration of the mRNA vaccinations be stopped immediately until further studies are conducted to determine the extent of the potential pathological consequences.”

Health Ranger calls for CRIMINAL prosecution of Big Pharma executives for their role in designing, promoting LETHAL injections falsely labeled “vaccines”

NaturalNews.com / Ramon Tomez

(Natural News) The Health Ranger Mike Adams called for the prosecution of Big Pharma and its allies during the Feb. 11 edition of his “Situation Report” podcast. Aside from the drug manufacturers and CEOs, he also urged the prosecution of scientists and government officials that pushed the lethal Wuhan coronavirus (COVID-19) shots.

“The truckers in Ottawa and other cities are now clogging up the roadways, in the same

way that you government lunatics were trying to clot people's arteries and veins with the clot shots. We The People now know: The governments are the terrorists. The same governments that were pushing the deadly shots that were killing people, blocking ivermectin and making people die are now saying that anyone who disagrees with [them] is a terrorist," he said.



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He quoted a recent interview he had with Ohio attorney and [Brighteon.TV](#) host Tom Renz. *"What we have to shift to now, [Renz] says, is holding the criminals accountable. Those who carried out these crimes against humanity [and] those who violated human rights."*

According to the Brighteon founder, the list does not stop with White House Chief Medical Advisor Dr. Anthony Fauci and former *National Institutes of Health* Director Dr. Francis Collins. He also pointed to officials of the *Food and Drug Administration* and the *Centers for Disease Control and Prevention* as complicit with criminal fraud.

The Health Ranger also gave his listeners a sort of "homework" to commit to by talking to their respective state attorney general. *"I want to encourage you to put forth the idea of criminal prosecutions against all those who are complicit in pushing this fraud of the*

[COVID-19] vaccines. Not just Big Pharma: It's also Big Tech [and] Big Media, [alongside] the hospital administrators. It's a long list of people."

"In my view, they all need to be investigated and criminally prosecuted for their role in this, because this is a holocaust-level event, this is a crime against humanity. This is like World War II, except now – the war is happening through the needs. And the thing is, they knew it was killing people."

Tribunals against those responsible for the COVID genocide are proceeding. Fortunately, the wheels of justice have begun to turn – thanks to the Peoples' Court of Public Opinion (PCPO). The PCPO, an international coalition of lawyers and judges, [convened a hearing](#) on Feb. 5 in Germany to prosecute the crimes against humanity. According to the group, governments worldwide used the COVID-19 pandemic as the pretext to commit these crimes.

German attorney and physician Dr. Reiner Fuellmich said in his opening remarks: "This case, involving the most heinous crimes against humanity committed under the guise of a [coronavirus] pandemic, looks complicated only at first glance. There is no pandemic, but only a PCR test 'plandemic' fueled by an elaborate psychological operation designed to create a constant state of panic among the world's population." (Related: [Dr. Reiner Fuellmich: Latest bombshell about COVID vaccines will dismantle Big Pharma.](#))

He added that the COVID-19 pandemic had *"already been long-planned,"* citing the swine flu pandemic of 2009 as a dry run for what was to happen more than a decade later. *"It was cooked up by a group of super-rich psychopathic and sociopathic people who hate and fear people at the same time, have no empathy and are driven by their desire to gain full control over all the people of the world,"* said Fuellmich.

"Wherever you go, help share and advance the idea that there should be criminal prosecutions of all those who were complicit in this. Mark my words: As the body count adds up, this is going to multiply over the next couple of years – to truly insane, horrifying levels," Adams said.

"Believe me, more and more people are going to join the call for criminal prosecutions against the entities that tried to carry out this mass extermination of humanity. They killed probably between one billion and two billion people globally. They mass-murdered over a billion people, that's what historians are going to say when this is all said and done."

More related stories:

[International criminal grand jury investigation finds that globalist psychopaths used covid to commit "crimes against humanity."](#)

Inside Biden's \$53 Billion Dollar COVID Testing Scam

February 6, 2022

We take a look inside of [Biden's \\$53 billion dollar COVID testing scam](#). President Biden has stated that up to one billion tests will be made accessible for circulation. \$53 billion has been allocated by Congress for COVID-19 testing.



The Centers for Disease Control and Prevention (CDC) has a lot of information about who ought to get examined. As per [COVIDtests.gov](#), families can acquire the tests via the mails, at a nearby drug store, or with one of at least 20,000 free testing centers. Every U.S. household will receive up to four free COVID-19 fast antigen at-home testing from the federal government.

[Private insurers](#) and group health plans have been authorized by the Biden Administration to cover up to 32 quick tests per month for a household of four. The ruling exempts government insurance programmes like Medicare and Medicaid.

President Biden has stated that up to one billion tests will be made accessible for circulation. \$53 billion has been allocated by Congress for COVID-19 testing, with \$29 billion remaining unallocated.

It's unclear how efficient the distribution will be or how effective it will be in combating the coronavirus.

"We have insurance mandates and the U.S. mail; what could go wrong?" Doug Badger, a senior fellow at the Galen Institute and the Heritage Foundation, was the one who asked the question.

One issue is the effect of the administration's hoarding of tests on the distribution chain.

"If the government plans to mail out one billion tests, what does that do to the supply at your local Walgreens? Already, the tests are in short supply," said Badger.

"I don't think this parallel distribution chain is going to be the best way to do it."

Furthermore, 200 million people have private health insurance, which allows them to seek close to 6.4 billion tests each month.

"Obviously, if everyone were to use this benefit, you would never be able to get any of these tests," Badger remarked.

Enrollees with private insurance will purchase the test and request compensation from their insurers. Certain pharmacies may have agreements with some insurers. In any event, reimbursements will be restricted to \$12 per test, so if there is a scarcity, as with any goods in limited supply, testing may cost participants much more.

More testing, more positive results!

More individuals are testing positive for COVID-19 as more Americans have accessibility to free or low-cost tests. Around the second week of December, the number of cases began to rise. People who test positive have a cascading impact on activity because they notify others, who would then feel forced to get tested or remain home, regardless of symptoms.

The Centers for Disease Control and Prevention (CDC) has a lot of information about who ought to get examined.

The CDC [advises](#) testing for folks who have COVID-19 signs, individuals who've been in *"close contact with someone with COVID-19,"* instant testing for people that are not fully vaccinated and have been in *"close contact,"* and people who have been asked or referred to get tested by a school, workplace, or health care provider.

People who *"are sick with COVID-19"* or *"think [they] might have COVID-19"* are advised to remain at home, isolate themselves from everyone else, and notify all close connections of a probable infection, according to the website.

Cold symptoms? Fever or chills, cough, shortness of breath or difficulty breathing, exhaustion, muscular or body pains, headaches, loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea are all symptoms of COVID-19, according to the CDC.

Several of these characteristics are similar to those of a common cold, and they are typical in the winter when individuals are usually indoors and in close contact with each other. The CDC says that it is still learning more about the COVID-19 Omicron strain.

“More data are needed to know if Omicron infections, and especially reinfections and breakthrough infections in people who are fully vaccinated, cause more severe illness or death than infection with other variants,” [states the agency’s website](#). Vaccines, masks, and testing are all recommended.

Widespread testing ‘makes no sense. According to Jeffrey Singer, M.D., a senior scholar at the [Cato Institute](#), testing large swathes of the common masses for a range of common symptoms is asking for a catastrophe to happen.

“It makes no sense to test everyone, symptomatic or otherwise, high-risk or otherwise, considering the large percentage of the population that at this point has a fair amount of immunity,” said Singer.

“We will wind up unnecessarily shuttering much of society,” said Singer. *“Test the symptomatic and test those who work with vulnerable people, such as nursing home workers, hospital workers, and caregivers. We need focused testing along with focused protection if we ever hope to live in a world with endemic COVID.”*

Test until positive!

According to Erwin Haas, M.D., *“an infectious disease specialist and policy advisor at The Heartland Institute, massive public testing can cause all sorts of data errors.”* “[The statistician Thomas] Bayes would have scoffed,” said Haas.

Haas claims that numerous members of his family experienced cold-like symptoms. Three of the four PCR tests performed on the household were negative. *“My question about which tests are truly negative, and which are positive, has been ignored,”* claimed Haas.

According to Haas, the question then seems to become who must be retested. “The point of testing seems to be to continue testing until the individual gets a positive, not to manage the disease,” said Haas. *“It’s more of a fashion statement.”*

As per Haas, when a virus mutates, it gets more rapidly transferred yet has weaker symptoms.

“The Omicron variant does not seem to be that serious and, if very contagious, a classical off-ramp for epidemic infections,” he remarked.

What government should do. Badger says he supports rapid tests, but that they could have been a wiser approach earlier in the pandemic, when the more severe variants of the virus were circulating and the government’s reaction was always to limit action. The tests were stalled by the US Food and Drug Administration.

Instead, both of the Trump and Biden governments enacted executive measures to combat the virus, along with a moratorium on evictions and vaccine mandates, which were later overturned by judges, including the United States Supreme Court.

Thus according Badger, the ideal thing for the authorities to do is to equip individuals with knowledge so that they can then make informed judgments regarding their health.

“Nobody is going stop the virus. The government does not command biology any more than King Canute couldn’t command the tides,” said Badger.

“Israel is the most vaccinated country in the world, imposed a number of restrictions on its citizens, and is now facing an enormous outbreak of Omicron,” he continued.

“We’ve really distorted the role of government and private citizens, not just with liberty but with respect to personal responsibility. That is what we mean when we say democracy is in trouble.”

“At the point government loses trust in the ability of its citizenry to make good judgments in their personal lives that is the point you transition from democracy to tyranny. Because if we can’t take care of ourselves, if the government has to make decisions for us, then the government is going to look very different from the one described in our Constitution.”

Critics fear COVID jabs will trigger massive increase in heart problems in 2022

by: Sara Middleton, staff writer | February 7, 2022

Since the COVID shot rollout began, reports of elite athletes suddenly collapsing with heart attacks and other cardiovascular issues have been making the rounds in the news. The sudden death of young people underscores a grim discovery about these mRNA vaccines: that they can cause a potentially deadly inflammation of the heart, known as myocarditis.

Is heart damage related to these shots more extensive than we realize? It may take some time before the data is fully clarified, but at least some reports appear to indicate widespread heart health problems in the coming future.

Dropping in plain sight: Dozens of jabbed professional football players collapsing, dying suddenly of heart issues

In January 2019, the Journal of the American Heart Association published a study claiming that more kids will be born with congenital heart defects in the coming decade because of ... climate change. What do you think: legitimate science? Or preemptive damage control for the COVID rollout era – an unprecedented time in which pregnant women, infants, and kids under five years old are being pushed to take these brand new drugs.

Whatever the full story is surrounding future heart defects in our kids, we are already witnessing serious and sometimes fatal heart problems associated with these COVID shots in real-time. Just look at the tragedy that has been happening within the international football (soccer) community.

According to the Daily Expose, the number of (predominantly male) professional footballers who have collapsed during matches and died of cardiovascular-, immunological-, and/or neurological-related issues in 2021 is 278% HIGHER than the preceding 12-year average. This observation is not sufficient to prove that the COVID jabs have contributed to the unusual spike in sudden deaths, but the correlation is too dire to downplay.

Like other sports organizations, FIFA has strongly encouraged its players to get vaccinated. But it's not just professional athletes who could be at risk of serious and sometimes fatal adverse effects from the COVID mRNA jabs.

New data suggests COVID mRNA jab DOUBLES the average person's 5-year risk of heart attack

A November 2021 paper published in *Circulation*, a journal of the American Heart Association (written by functional medicine practitioner, cardiologist, and former cardiothoracic surgeon Dr. Steven Gundry) reportedly found that a person's chances of suffering from acute coronary syndrome (ACS) within the next five years DOUBLES after getting two doses of mRNA jabs.

According to Mayo Clinic, ACS refers to a range of conditions caused by a sudden reduction in blood flow to the heart, including heart attacks.

In his abstract – which was harshly criticized and has since undergone some serious editing to be less “alarmist” – Dr. Gundry reports that the average 5-year ACS risk score among 566 vaxxed cardiology patients reached 25%, compared to only an 11% 5-year ACS risk score that was calculated among those patients prior to their vaccinations. ACS risk score can be calculated using what's known in cardiology as the PULS Cardiac Test, which measures various biomarkers of cardiovascular inflammation and “T cell infiltration of cardiac muscle.”

Dr. Gundry's study has several limitations. For example, it is only observational and lacks a control group. But in the context of all the other heart and circulatory issues, we are seeing post-jab, many readers may feel that it warrants closer investigation.

Life Insurance Company Refuses to Pay Out Life Insurance Policy Because Death Was From Experimental COVID-19 Vaccine

February 8, 2022 by Edward Hendrie

According to the lawyer for the family, Carlo Alberto Brusa, pictured below, a life insurance company has refused to pay out on a life insurance policy for a person who died from a COVID-19 vaccine injection. **The insurance company justified the refusal to pay on the policy because COVID-19 vaccines are considered an experimental medication or treatment.** The insurance company explained that the side effects of the COVID-19 vaccine were published, and the insured party should have known that taking part in a

dangerous medical experiment could have resulted in his death. The insurance company likened his death to suicide. Life insurance policies have a standard provision that excludes suicide as a covered death.

The family sued and the French court ruled:

The side effects of the experimental vaccine are being made public and the deceased could not claim ignorance when he voluntarily took the vaccine. There is no law or mandate in France forcing him to be vaccinated. Therefore, his death is essentially suicide.

The Court recognizes the classification of the insurer, which legally regards participation in the phase three experiment, which has not been proven to be harmless, as a voluntary assumption of a fatal risk not covered by the contract, given the side effects announced, including death covered and legally recognized as suicide. The family has appealed. However, the insurer's defense is recognized as valid and contractually justifiable since this publicly known risk of death is legally considered suicide since the customer has been notified and has agreed to voluntarily risk death without being obliged or coerced to do so being.

This seems to reflect a growing trend among insurance companies in Europe. For example, German health insurance company Techniker Krankenkasse states that "vaccination damage and other consequences of the Covid vaccination are NOT insured."

It is unclear if these rulings by European insurance companies will be precedent for U.S. life insurance companies to follow. But the possibility is real.

The widespread rollout of the experimental vaccines has caused a sharp increase in Covid-19 cases and deaths across the world, according to a recently published preprint study that looked at data from the 145 of the most vaccinated countries in the world.

The 99-page study titled "*Worldwide Bayesian Causal Impact Analysis of Vaccine Administration on Deaths and Cases Associated with COVID-19: A Big Data Analysis of 145 Countries*" found that in the U.S. specifically, the jab has caused a whopping 38% more Covid cases per million – and an even more astonishing 31% increase in deaths per million. Since this report came out the increases of deaths has hit a whopping 495% in the UK.

Riener Fuellmach mentioned in an interview that the CEO of a large insurance company revealed that there has been an unprecedented 40% increase in mortality in 2021. I checked out his statement and was able to verify it. I found that on or before January 11, 2021, Scott Davidson, CEO of OneAmerica Insurance Company revealed that there has been a 40% increase in mortality in 2021. Scott Davidson stated: "We are seeing, right now, the highest death rates we have seen in the history of this business ... death rates are up 40% over what they were pre-pandemic."

That figure was confirmed by The Insurance Regulatory and Development Authority of

India, which reported a 41% rise in death claims in 2021.

OneAmerica is a massive insurance company, with approximately \$97.7 billion under administration. Insurance companies have a pecuniary interest in accurately assessing mortality. They keep a close watch on total mortality because it affects directly the money that they must pay out in life insurance claims and it directly affects the premiums they charge. They are experts in total mortality.

That a 40% increase in deaths in the U.S. from represents 900,000 increased deaths in 2021 over 2020 attributed to the COVID-19 vaccines.

Life insurance companies are looking at unexpected payouts in the hundreds of millions and even billions of dollars from COVID-19 vaccine deaths. Absorbing that kind of monetary payout might threaten the continued financial viability of some of the smaller insurance companies. They may have to deny death claims caused by COVID-19 vaccines as a matter of economic survival.

The article below was posted on January 14, 2022, on Free West Media.

Although vaccination is recognized as the cause of death by doctors and the insurance company, it has refused to pay out. The reason is because the side effects of the Corona jabs are known and published. They argue that the deceased took part in an experiment at his own risk. Covid-19 in itself is not classed as a "critical illness".

According to the company, an experimental vaccination resulting in death is like suicide.

The insurance company justified the refusal of payment to the family by stating that the use of experimental medication or treatments, including Corona injections, is expressly excluded from the insurance contract. The family's subsequent lawsuit against the insurance company has been unsuccessful.

The court allegedly justified its ruling as follows: *"The side effects of the experimental vaccine are published and the deceased could not claim to have known nothing about it when he voluntarily took the vaccine. There is no law or mandate in France that compelled him to be vaccinated. Hence his death is essentially suicide."* Since suicide is not covered by the policy from the outset, the insurance refuses to budge.

Scandalous verdict: taking a fatal risk is legally suicide

"The court recognizes the classification of the insurer who, in view of the announced side effects, including death, legally regards participation in the phase three experiment, whose proven harmlessness is not given, as voluntarily taking a fatal risk that is not covered by the contract and legally recognized as suicide. The family has appealed. However, the insurer's defense is recognized as well-founded and contractually justified, as this publicly known fatal risk is legally considered suicide, since the customer has been notified and has agreed to voluntarily take the risk of death without being obliged or compelled to do so."

No surprise: Mainstream media is silent.

This case has not yet been reported in France's mainstream media. The case was published by the family's lawyer, Carlo Alberto Brusa, on social media. Unfortunately, no sources or court records are given, which is why the authenticity of the report cannot currently be verified although there have been other warnings regarding the risk associated with the jabs recognized by insurers. In the U.S., the American Council of Life Insurers (ACLI) has denied reports of non-payment.

Censorship

In recent months, many French anti-vaccine groups of the social network Facebook have been victims of sudden, unjustified closures, especially support groups for Brusa and Professor Didier Raoult. The latter has often been criticized for his positions on vaccines, hydroxychloroquine and his criticism of the mismanagement of the epidemic by the Macron government.

At the end of last year, the main support group for Didier Raoult was deactivated before it was reactivated, thanks to a mobilization on social networks and a massive relay on alternative media. On November 27, a teacher support group for Brusa was suspended. With no less than 310,000 members to its credit, the group created in March 2020 was closed for having shared the complaint by Brusa concerning the wearing of masks for children. The Parisian lawyer and his association Réaction-19 was accused of spreading a "conspiracy".

Global difficulties for insurers due to vaccines

Actuaries have been warning that rising claims will be eroding the capital which insurers set aside to avoid insolvency. Notably, older people do not take out life insurance, which means that the claims have been from younger clients. Insurers say that they expect a rise in excess deaths.

According to Alex Berenson, the risk of injury or death from the job is exceptionally high judging from Canadian data.

The refusal to pay for a vaccine-related death may not be surprising since globally the life insurance industry has been hit with reported claims of \$5.5 billion in the first nine months of 2021 versus \$3.5 billion for the whole of 2020, according to insurance broker Howden.

Dutch insurer Aegon, with two-thirds of its business in the U.S., said its American claims in the third quarter were \$111 million, up from \$31 million a year earlier.

Vaccine deaths may force insurers to raise premiums and some have indicated that they intend to punish the unvaccinated for their financial woes.



FDA 'Anxious' for Pfizer to Rush COVID Shots for Babies and Toddlers. But Why?

Despite conclusive evidence young children have virtually no risk of severe complications or death from COVID-19, Pfizer, at the urging of federal health officials, is hustling to get infants and toddlers injected with experimental COVID vaccines.

Feb. 1 Pfizer/BioNTech asked the FDA to grant EUA for their COVID shot to babies and

children aged 6 months through 4 years.

Story at-a-glance:

- Feb. 1 Pfizer/BioNTech asked the U.S. Food and Drug Administration to grant emergency use authorization (EUA) for their COVID shot to babies and children aged 6 months through 4 years.

- The EUA will be for a two-dose regimen, with the possibility of extending it to a third dose, as two injections have been shown to be ineffective in 2- to 4-year-olds.

- Children aged 6 months to 4 years will get a dose that is one-tenth the adult dose.

- Were Pfizer to wait until the triple-dose experiment is completed, the EUA request would not be possible until late March 2022, and federal officials are reportedly “anxious to begin a vaccination program for the youngest children because the studies showed there were no safety concerns with two doses.”

- Meanwhile, Pfizer’s own data raise massive safety concerns, as they received 42,086 injury reports, including 1,223 fatalities in the first 2.5 months of their COVID jab rollout for adults.

I’m sure you’re aware of the massive catastrophe we have with children under 5 dropping ill like flies from COVID, as this is the justification Pfizer is using to get an Emergency Use Authorization (EUA) so they can jab these defenseless and innocent children. No? Me, neither.

Despite conclusive evidence that young children have virtually no risk of severe complications or death from COVID-19, Pfizer is hustling to get our infants and toddlers injected with their experimental gene transfer technology.

Feb,1 Pfizer/BioNTech asked the U.S. Food and Drug Administration to grant emergency use authorization (EUA) for their COVID shot to babies and children aged 6 months through 4 years.

In mid-December 2021, Pfizer admitted that two injections, at one-tenth the adult dose, failed to produce an adequate immune response in 2- to 4-year-olds. They’re now experimenting to see if three doses will produce adequate results in that age group.

In the meantime, the EUA will be for a two-dose regimen, with the possibility of extending it to a third dose.

As reported by *‘The New York Times’*, were Pfizer to wait until the triple-dose experiment is completed, the EUA request would not be possible until late March, and federal officials are reportedly “*anxious to begin a vaccination program for the youngest children because the studies showed there were no safety concerns with two doses.*”

In other words, they apparently don't care whether the shots are effective or not. They claim the shots are "safe," so it's OK to inject young children even though they might not gain any benefit. Does that make any sense?

According to MSN:

"[Pfizer] and its partner BioNTech said that the submission was at the request of the FDA, which is an unusual move. Quickly after the announcement, the FDA scheduled a meeting of its vaccine advisory committee for Feb. 15 to discuss the application."

"Allowing Pfizer to submit the request now means that, if authorized, 'parents will have the opportunity to begin a COVID-19 vaccination series for their children while awaiting potential authorization of a third dose,'" according to Pfizer CEO Albert Bourla. Data on the third dose will be submitted to the FDA "in the coming months," the company said.

COVID shots shown to destroy immune function.

The list of concerns is a long one. We've already seen that Pfizer's own data reveal there are serious problems with the shots, and real-world data confirming worst fears are mounting by the day.

A number of medical experts, scientists and published studies have warned the COVID shots can reprogram your immune system to respond in a dysfunctional manner. For example, a study posted on the preprint server medRxiv, May 6, 2021, found the Pfizer/BioNTech COVID jab *"reprograms both adaptive and innate immune responses,"* causing immune depletion.

While the jab *"induced effective humoral and cellular immunity against several SARS-CoV-2 variants,"* the shot *"also modulated the production of inflammatory cytokines by innate immune cells upon stimulation with both specific (SARS-CoV-2) and nonspecific (viral, fungal and bacterial) stimuli."*

People who were *"fully vaccinated,"* having received two doses of the Pfizer shot, also produced significantly less interferon upon stimulation, which hampers vitally important innate immune responses.

In other words, we're looking at a horrible tradeoff. You may get some protection against SARS-CoV-2 and its variants, but you're weakening your overall immune function, which opens the door wide to all sorts of other health problems, from bacterial, fungal and viral infections to cancer and autoimmunity.

Is it really wise to expose babies and toddlers to such risks?

Just because children aren't dying within a few weeks of the shot does not mean it's harmless and therefore safe to use. Most of the damage from these jabs will emerge far down the road, long after they've gotten the shot.

The FDA is really behaving in an irresponsible and negligent manner, putting every child in America in harm's way in the longer term — and for no reason at all, since they know very well two doses won't work in 2- to 4-year-olds, and they have no idea if three doses will do the trick.

Pfizer data strengthen safety concerns.

Pfizer's own trial data, which are starting to be released in response to a Freedom of Information Act (FOIA) request to the FDA, also do nothing to assuage safety concerns. Quite the contrary. Cumulatively, between Dec. 1, 2020, and Feb. 28, 2021 — a period of just 2.5 months — Pfizer received 42,086 injury reports, including 1,223 fatalities.

Compare that to the 1976 swine flu vaccine, which was pulled after 25 deaths. Pfizer even acknowledges the abnormal rate of injuries. They actually had to hire more data entry and case processing personnel to handle the influx of adverse events reports.

Still, they insist everything is hunky-dory and there's absolutely no problem.

Initially, the FDA wanted 55 years to release all of Pfizer's trial data at a rate of 500 pages per month. After finding another trove of related documents, they asked for 75 years. A judge denied both requests, ordering the agency to release the data at a rate of 55,000 pages per month, starting March 1, to finalize the full release in about eight months.

Judging by what we found in the initial 500-page batch released in November 2021, it's no wonder the FDA wanted enough time to make sure all culpable parties would be dead and buried before the full truth of their malfeasance came out. If all goes well, we should have all that evidence by September 2022.

Pfizer intervenes in FOIA lawsuit.

There's yet another wrinkle in the FOIA lawsuit against the FDA, though. Pfizer is now pushing to intervene in the case. Pfizer says it wants to "help" the FDA with the redaction of the documentation, claiming it contains trade secrets and proprietary information that need to be protected and might be inappropriately disclosed if rushed. January 26 Reuters reported:

"Pfizer Inc. wants to intervene in a Texas federal lawsuit seeking information from the U.S. Food and Drug Administration used in licensing the company's COVID-19 vaccine, a litigation move that plaintiffs who are suing for the data say is premature."

"Pfizer's lawyers at DLA Piper told U.S. District Judge Mark Pittman on Jan. 21 it wanted a role in the proceedings to help the FDA avoid 'inappropriately' disclosing trade secret and confidential commercial information ..."

"The group of doctors and scientists who sued last year over public access to the FDA's

Pfizer licensing records said in a court filing that the company's bid to jump into the lawsuit was untimely because the plaintiffs have not challenged any redactions to requested records."

The Defender further reported:

"The FDA claimed Pfizer is entitled to intervene in the case and the process of redacting the documents in question, due to the "Trade Secrets Act," signed into law by President Obama in 2016," stating:

"FDA anticipates that coordination with Pfizer to obtain the company's views as to which portions of the records are subject to Exemption 4, the Trade Secrets Act, 18 U.S.C. § 1905, or other statutory protections will be a necessary component of the agency's endeavors to meet the extraordinary exigencies of this case."

"However, according to The Gateway Pundit, the Trade Secrets Act is being misinterpreted by the FDA and Pfizer:

"[T]he protections provided under that law allow for an owner of a trade secret to sue in federal court when its trade secrets have been misappropriated and does not even imply that a company could intervene in a public records request through the FOIA."

"[Aaron] Siri [of the Siri & Glimstad law firm] also questioned the FDA's commitment to transparency and hinted at a cover-up, stating:

'The Court is, other than Congress, the only check on the FDA ...'

"It is understandable that the FDA does not want independent scientists to review the documents it relied upon to license Pfizer's vaccine given that it is not as effective as the FDA originally claimed, does not prevent transmission, does not prevent against certain emerging variants, can cause serious heart inflammation in younger individuals, and has numerous other undisputed safety issues."

"Siri said the FDA's 'potential embarrassment' over its decision to license the Pfizer vaccine must take a back seat to the transparency demanded by FOIA and 'the urgent need and interests of the American people to review that licensure data.'"

'The truth about Pfizer'

The British "Dispatches" documentary above, "Vaccine Wars: The Truth About Pfizer," reviews a number of issues relating to Pfizer's handling of the COVID pandemic, including its "war profiteering" (focusing on profits during a pandemic) and spreading misleading claims about its competitors, a whistleblower's claims of scientific misconduct, and questions about Pfizer "*playing God*" by unilaterally dictating who would get its jab and who wouldn't, thereby prolonging the pandemic.

According to the Dispatches report, Pfizer's jab was not only more expensive than its rival AstraZeneca to begin with, costing the UK government £18 per dose compared to £3 for AstraZeneca, but as a third booster dose rolled out, Pfizer raised its price to £22, a decision that has raised questions about the company's motives. It seems fairly obvious that it's all about the money for them.

Pfizer will, of course, disagree with that obvious conclusion. According to professor Sir Andrew Pollard, who helped develop the Pfizer shot, the company's incentive was never about maximizing profits. U.S. Congresswoman Jan Schakowsky, on the other hand, told Dispatches that Pfizer clearly made no effort to rein in their pricing or limit their profits.

Unprecedented profiteering!

According to Dispatches, Pfizer's COVID jab has become the most profitable pharmaceutical product the world has ever seen. As of the third quarter of 2021, Pfizer's revenues were 130% above operational costs, with COVID jab revenue for 2021 reaching \$36 billion. Revenue from the jab is predicted to rise to \$55 billion in 2022 — equivalent to the gross domestic product (GDP) of Croatia.

One of the reasons for Pfizer's record-breaking profits, Dispatches says, is because it has been prioritizing sales to wealthier Western nations willing and able to pay the higher cost. Pfizer has also refused to license its patented recipe to ensure an adequate supply for poorer nations.

Its gross profit margin is estimated to be somewhere around 80%, or perhaps a little more. Pfizer, meanwhile, claims its profit margin for the jab is in the high-20%.

Pfizer defends its profiteering, in part, by saying it pays for needed research and development, but let's remember that taxpayers paid for all of the research and development that went into this jab in the first place.

As explained in the video, the initial development of the Pfizer jab was done by BioNTech, which received millions of euros of public funding from both the German government and the EU. Essentially, the public paid for its development and then got fleeced while Pfizer makes out like a bandit.

By the end of 2021, Pfizer had manufactured 2 billion doses of the jab. But while the company claims it's dedicated to provide "*equitable and affordable access*," only 16% had gone to lower- and middle-income countries, and only 1% to the poorest of nations.

In 2022, Pfizer intends to produce 4 billion doses. According to Dispatches, the total cost of manufacturing is somewhere between 80 cents and \$1.40 per dose.

The most likely cost is right around \$1.05. Pfizer disputes this, saying it "*does not reflect the true costs*" of making the jab, as this cost does not include the cost of scaling up manufacturing efforts, global distribution and clinical trials.

The UK, which pays the highest price for Pfizer's jab, had at the end of 2021 paid Pfizer an estimated £2.6 billion (about \$3.5 billion) which, based on the cost of production, is thought to be about £2 billion (around \$2.7 billion) more than it should have paid, had the profit margin been more reasonable.

Pfizer spread misinformation about rivals!

According to Dispatches, Pfizer is also responsible for spreading misinformation about rival COVID shots, including the AstraZeneca injection. A Canadian PowerPoint presentation sent to medical professionals included a slide detailing alleged disadvantages of viral vector DNA injections (such as the AstraZeneca shot).

The slide states that viral vector DNA injections might cause chromosomal integration and oncogenesis. In other words, the DNA might become permanently integrated in your genes, and could cause cancer. There was also a warning against its use in immunocompromised patients.

Curiously enough, when asked, Pollard claims there's no truth to any of those claims. So, *"how did those claims come to be shown to health professionals across Canada?"* Dispatches asks.

After some digging, they discovered the presentation was, in part, funded by Pfizer, and that the key speaker who gave the presentation had received Pfizer funding.

More specifically, the portion of the presentation that listed disadvantages of viral vector DNA products was written by a team that included at least one member who had previously worked in Pfizer's vaccine department.

When asked about the risks associated with vaccine misinformation, Pollard says there are *"huge risks,"* as anything that causes people to be hesitant about getting the shot can result in them risking their lives.

So, seeing how Pfizer appears to have undermined a competing COVID jab, aren't they then guilty of causing vaccine hesitancy and putting lives at risk? And, seeing how Pollard claims there's no truth to any of those warnings, doesn't that suggest Pfizer put people's lives at risk for no other reason than to maximize their own profits?

Pfizer, of course, denies having had any influence over the creation of the presentation.

Keep in mind, I strongly disagree with Dispatches' claims that the Pfizer shot is a life-saving drug. I also disagree with Pollard's claim that vaccine hesitancy is potentially life-threatening. What I'm pointing out here is the hypocrisy.

While Dispatches valiantly tries to paint Pfizer as a global savior, albeit a greedy one, I believe all COVID jabs are a dangerous scam that are doing far more harm to humanity

than good. They're literally raking in unprecedented profits from the suffering and death of untold millions.

Were corners cut?

After giving the audience a blanket assurance that the Pfizer jab is "clearly safe and effective," Dispatches goes on to review whistleblower testimony from Brooke Jackson, a clinical research coordinator and former regional director of Ventavia Research Group, a research organization charged with testing Pfizer's COVID jab at several sites in Texas.

Jackson, who worked on Pfizer's Phase 3 COVID jab trial in the fall of 2020, claims she found evidence of trial data being falsified. She was also shocked to realize that patients in the clinical trials were unblinded.

Their charts contained information showing whether they got the real shot or a placebo, which is a serious breach. *"In all the time I've been doing research, I've never seen the type of misconduct that I saw [at Ventavia],"* Jackson says.

She repeatedly informed her superiors about concerns over poor laboratory management, patient safety and data integrity issues — all of which were ignored. She also tried to get in touch with the Pfizer site liaison, but was never able to speak to him directly.

Eventually, she filed a complaint with the U.S. Food and Drug Administration, and that too was ignored. To top it off, she was fired.

In response to Dispatches inquiries, Pfizer claims they conducted *"a thorough investigation" into Jackson's claims, that "actions were taken to correct and remediate" the problems she'd reported, and that no evidence was found that would "invalidate the data or jeopardize the integrity of the study."*

Ventavia also claims they found Jackson's accusations to be *"unsubstantiated,"* and the FDA insists it has "full confidence" in Pfizer's data.

Why are we experimenting on children?

Historically, children have been excluded from early human trials, and for good reason.

The possibility of harm is great no matter what the drug, and here we're talking about a never-before-used gene transfer technology that hasn't even been tested on animals.

Worse yet, hundreds of thousands of American adults have experienced very serious and debilitating side effects. More than 23,000 have died post-jab, as of February 11, 2022, in the U.S. territories alone. Why is the FDA risking our children?

As mentioned, we already know children are essentially at zero risk of dying from COVID. They might test positive. They might develop symptoms, but they get through it just like

they get through the common cold or flu.

There's no reason to jeopardize their long-term health with a COVID jab. They don't need it, and therefore ANY risk of the jab, no matter how small, is unconscionable and unacceptable.

Fortunately, many parents, including many who got the shot themselves, are not willing to gamble their young ones. By mid-December 2021, just under 20% of children between the ages of 5 and 11 in the U.S. had received their first COVID shot, with vaccination rates among urban children being twice that of those living in rural areas.

However, since then, the injection rate has rapidly dropped off. In Florida, the weekly injection rate among children 5 to 11 was 55,548 in mid-November 2021, when the EUA for this age group went into effect.

By the last week of January 2022, that weekly rate had dwindled to 10,084. I would sincerely hope that as the EUA is extended all the way down to 6-month-olds, parents simply refuse their children's participation in this ongoing experiment.

Life Insurance Companies Suffered while the Funeral Industry Prospered in 2021 After COVID Vaccines were Rolled Out

by Brian Shilhavy

Editor, Health Impact News

Year 2021 will go down in history as the "Year of the COVID-19 Vaccines" as life insurance claims skyrocketed, and the funeral industry prospered, as about 400,000 excess deaths occurred with the roll out of the COVID-19 vaccines.

Scott Davison, the CEO of OneAmerica, a \$100 billion insurance company based out of Indiana, was the first one to report the excess in number of death claims in 2021 last month (January, 2022). See:

Crisis in America: Deaths Up 40% Among Those Aged 18-64 Based on Life Insurance Claims for 2021 after COVID-19 Vaccine Roll Outs.

Earlier this week, Mike Adams from Natural News reported on news out of Holland where Dutch insurer Aegon revealed its third quarter 2021 life insurance payouts skyrocketed 258% compared to third quarter 2020 payouts. See:

THE DIE-OFF IS HERE: Life insurance payouts skyrocket 258% as post-vaccine deaths rapidly accelerate.

Today, February 4, 2021, 'ZeroHedge News' published an article with an analysis of both the Life Insurance and Funeral Industry in 2021 by a former Blackrock fund manager.

Long Funeral Homes, Short Life Insurers? Ex-Blackrock Fund Manager Discovers Disturbing Trends In Mortality by ZeroHedge News

Four weeks ago, OneAmerica insurance company CEO Scott Davison revealed that they had witnessed 'the highest death rates in the history of this business – not just at OneAmerica' with a jump of '40% over what they were pre-pandemic.' Interestingly, Davison noted that the majority of deaths are not classified as due to Covid-19.

So the CEO in his own words. They are mandating vaccines in the workplace and raising premiums in lower vaccinated counties because they are mistakenly guessing here initially. The premiums will change to higher vaccinated areas as time moves on is my guess. He missed the plot.

The implication to many was clear – that the Covid-19 vaccine is linked to the excess mortality, and months of vaccine injury reports were now spilling over to actuarial data – which is beginning to show, among other things, that younger, working-age people began dying in greater numbers as vaccine mandates hit – for a disease which primarily kills older, non-working age individuals. The counter argument, often presented without evidence, is that the increase is due to people who postponed elective surgeries and other medical treatments during the pandemic.

Ex-Blackrock fund manager Ed Dowd is in the former camp, and has spent the last month analyzing breadcrumbs associated with a rise in excess mortality vs. pre-pandemic levels. Given that we're now in the middle of earnings season, there are some pretty big crumbs rolling out of the insurance and funeral services industries which are beginning to paint a disturbing picture.

A few key observations:

- Mortality worsened in 2021 vs. 2020 despite widespread vaccinations
- A spike in Mortality among younger, working-age individuals coincided with vaccine mandates
- The spike in younger deaths peaked in Q3 2021 when Covid deaths were extremely low (but rising into the end of September)

On Tuesday, financial insurance company Unum reported that their Life segment saw an increase of 9% in their ratio of payouts vs. premiums (Benefit ratio), a 17.4% increase in 2021 vs. 2020 despite widespread vaccinations, and a 13.3% increase over 2019.

In 2019 the unit had \$266 million profit, last year a profit of \$82 million & this year a loss of -\$192 million. A swing of \$458 million lower over 2 years. Important to remember these are employed working age folks. Other fun numbers:

Q4 vs 2020= +21%

Q4 vs 2019= +36%

On Wednesday, Dowd noted that funeral home company Carriage Services saw a 28% increase in September 2021 vs. 2020, and a 13% increase in August vs. the same period. Funerals and cremations are up 12% and 13% respectively on the quarter.


In general, funeral homes saw an uptick in business in Q3, and Dowd will be closely monitoring Q4 reports which are expected around Feb. 15 – less than two weeks away.

Business has been quite good since the introduction of the vaccines & the stock was up 106% in 2021. Curious no?

Guys this is shocking as 89% of Funeral homes are private in U.S. We are seeing the tip of iceberg. The public companies report Q4 middle of February.

Dowd also noted on Wednesday that Lincoln National's death claims are up 13.7% y/y, and up 57% in Q4 vs. 2019. CFO Randy Freitag explained on Thursday that in 2021, the share of young people dying from Covid doubled in the second half of the year.

Tom Gallagher of Evercore asked the question of Covid mortality impact. That was the answer.

Boom  folks it's clear as day what changed in the second half of 2021. Variants less virulent than original but we had mandates & boosters hitting. This is a total shit show to behold.

— Ed Free Thinker & Oracle (@DowdEdward) February 3, 2022

Meanwhile, Reinsurance Group of America noted in their Thursday earnings call that Q4 was impacted by a meaningful level of Covid-19 mortality claims despite the fact that the Covid-19 vaccines have been around for more than a year.

RGA: non-Covid claims are elevated due to “indirect” □ effects of Covid-19

— Ed Free Thinker & Oracle (@DowdEdward) February 3, 2022

Remind us again how the vaccines are helping?

RGA: Life re-insurer reports profit in 4Q20 & a loss in 4Q21 on higher mortality.

— Ed Free Thinker & Oracle (@DowdEdward) February 3, 2022

Also noting a spike in younger deaths which peaked in Q3 2022, is Hartford Insurance Group, which reported that mortality is up 32% from 2019 pre-covid levels, and 20% from 2020 pre-vaccine levels. ...because fewer older people dying, but younger people are dying more...□...very odd picture

— Ed Free Thinker & Oracle (@DowdEdward) February 4, 2022

Some key questions for the insurance companies:

- What are the leading causes of death for 2020 and 2021?
- How many of those who died were vaccinated vs. unvaccinated?

Reinsurance Group of America, for example, reported a profit in Q4 2020 when the most of the population was unvaccinated and amid a deadlier strain of Covid-19, yet they registered a loss in Q4 2021 with more than 60% of the country fully vaccinated (and around 75% who have received at least one dose).

Perhaps this is why Pfizer is now actively fighting to suppress research data submitted to the FDA for approval – while the pharmaceutical giant and its peers continue to enjoy legal immunity from vaccine injuries.

In closing, some tongue-in-cheek non-investment advice from Dowd:

Long funeral homes short life insurance. Not investment advice but illustrates my point. One industry is growing the other is not. \$SCI \$CSV pic.

— Ed ☹️ □ Free Thinker & Oracle (@DowdEdward) February 3, 2022

Virus that causes COVID-19 has NEVER been isolated in a lab – Drs. Lee Merritt and Tom Cowan explain

Monday, February 07, 2022 by: Arsenio Toledo

(Natural News) Drs. Lee Merritt and Tom Cowan believe that SARS-CoV-2, the virus responsible for the Wuhan coronavirus (COVID-19), has never actually been isolated and genetically sequenced despite claims from health authorities all over the world.

They came to this conclusion when Cowan appeared on Merritt's Brighteon.TV show, "Merritt Medical Hour," on February 2.

"Here's the fact which every virologist agrees to," said Cowan. "There is not one published scientific paper where any particle that you could call a virus – and remember, a virus is a thing. It's a particle. We can sort of see it under an electron microscope, even though that's problematic."

"So, this thing they tell us, there's not one published paper in the scientific literature finding this thing in any biological fluid of any sick human or animal, anywhere," he continued.

Cowan said everybody in the scientific community, including virologists, agrees that what they call a virus has not been properly studied, let alone documented or seen by the naked eye, not even through powerful microscopes.

He and his colleagues have conducted extensive investigations asking officials everywhere, including those from the National Institutes of Health, the Centers for Disease Control and Prevention and even expert virologists in labs like the one in Yale University and the Wuhan Institute of Virology, whether or not they have seen virus particles in the fluids of sick people.

“And they say, ‘We don’t have [evidence],’” said Cowan. He and his colleagues have even asked expert virologists whether SARS-CoV-2 has been successfully isolated and sequenced.”

“We asked this guy ... ‘Can you find SARS-CoV-2 in any fluid of any person you say has COVID?’ He said no. [We asked] why not. ‘Because there’s not enough virus to find,’” recalled Cowan. He and his colleagues then asked if SARS-CoV-2 could be found if the bronchial fluid of 10, 100 or 1,000 people who supposedly have COVID-19 are mixed together, and the expert virologist answered that he would still not be able to isolate the virus.

If SARS-CoV-2 was real, it would have been found by now.

This is not the first time Cowan has publicly claimed that SARS-CoV-2 isn’t real. Last year, he published a video with a colleague discussing the fraudulent process of virus isolation. They came to the conclusion that if virus isolation and genetic sequencing could really detect the virus that causes COVID-19, it would have already been found.

Many leading health institutions around the world claim that viruses can be detected in the same way scientists detect exosomes in labs. Exosomes, which are between 30 to 150 nanometers in diameter, are the smallest type of extracellular vesicle known to man. These are small materials that travel in and out of cells to transport material.

“Exosomes can be found. Same size, same morphology and the same type of genetic material in exactly this way,” said Cowan.

He explained that just like exosomes, virus material is taken directly from a sick person and then put through a process of *“maceration, filtering and ultra-centrifugation.”* Scientists can even show the morphology of the material or characterize its genome. But no evidence has actually come out that this has been properly done with viruses.

“It’s simply not able to be done with any pathogenic virus,” he said.

Cowan said that he has submitted Freedom of Information Act requests to get the government to release scientific papers that describe the *“isolation and purification and characterization of any SARS-CoV-2 virus from any human being with so-called COVID-19”* and none could be presented to him.”

He believes this lack of data on SARS-CoV-2 should also call into question whether other viruses that supposedly caused well-known diseases like zika fever, ebola and even HIV are real.

More related stories:

Spain: Ministry of Health forced to confirm it has never isolated the SARS-CoV-2 virus.

Statement on virus isolation (SOVI). “SARS-CoV-2 has never been isolated or purified.”

What exactly is causing illness worldwide if SARS-CoV-2 has never been isolated, purified and shown to cause any human disease, let alone a pandemic?

Virologists document biological evidence that SARS-CoV-2 was created as a bioweapon and INTENTIONALLY released.

Watch the entire Feb. 2 episode of the “Merritt Medical Hour” with Dr. Lee Merritt, featuring special guest Dr. Tom Cowan, in the video below.

The “Merritt Medical Hour” with Dr. Lee Merritt airs every Wednesday at 7-8 p.m. on Brighteon.TV.

Learn the truth about the COVID virus at Pandemic.news.

Does Pfizer Shot Increase Kids’ Risk of Death by 5100%? Here’s What UK Data Tell Us.

By Madhava Setty, M.D.

A February 7 report by The Exposé stating Pfizer’s COVID-19 vaccine “increases children’s risk of death 5100%” contains concerning data that deserve further examination, however, a closer look at the data raises questions about the report’s conclusions.

In an article published Feb. 7, The Exposé reported Pfizer’s COVID-19 vaccine “increases children’s risk of death 5100%,” based on data recorded by the UK’s Office for National Statistics (ONS).

The ONS is the UK’s largest independent producer of official statistics that include COVID vaccine uptake and mortality by age group.

The ONS data cited by The Exposé is found in table 9 of the dataset, labeled “Deaths occurring between 1 January 2021 and 31 October 2021 edition of this dataset.” It can be downloaded directly from the ONS website.

The Exposé accurately plotted some of the ONS data in its article:

Chart: Mortality rates

Figure 1. Mortality rates by vaccination status (ages 10-14)

As the above table shows, the all-cause mortality rate in the doubly vaccinated is in fact $238.7/4.58 = 52$ times larger, or 5,100% higher than in the unvaccinated.

However, before drawing any conclusions it is imperative to examine the actual ONS data more closely.

First, we must consider the total number of deaths in each population. There were 96 total deaths among nearly 2.1 million unvaccinated children in the 10- to 14-year-old age group compared to four deaths among 1,678 children in that age group who had received their second dose 21 days or more prior to their demise.

Children who received only one dose or who were inside the 21-day window were not included in the subgroup with the highest mortality.

URGENT! TAKE ACTION: Tell the FDA Don't Approve Pfizer's mRNA Shots for Infants and Children under 5.

The Exposé chose to compare the most extreme subset of the vaccinated to support its provocative headline. Moreover, although the specific cause of death is not given (the ONS only separates cause of death into COVID or non-COVID-related), none of the four deaths were related to COVID.

This poses important questions. What if the four perished in an automobile accident? What if they were all suffering from a debilitating chronic condition that led to a predictable fatality?

We arrive at a major confounder: These two populations of children are not necessarily matched.

It is likely parents with children with significant comorbidities would have more readily sought the vaccine for their kids compared to parents with healthy children.

According to actuarial tables from the U.S. Social Security Administration, the risk of death in a 10- to 14-year-old is about 1 to 1.7 in 10,000 in a given year.

These numbers are 2 to 4 times higher than the mortality rate in the unvaccinated group in the ONS dataset, further indicating that this group is healthier than the average.

Nevertheless, **taking all children who had received at least one dose of the vaccine as a whole, we find that 11 deaths occurred in 27,359 person-years. This mortality rate is still significantly higher (nearly 9 times) than the unvaccinated.**

Based on the Fisher Exact Test — a standard statistical test used to determine if the proportions of categories in two group variables significantly differ from each other — there is less than a 1 in 100,000 probability this difference could have happened at random.

What do ONS data reveal about vaccine effectiveness?

As stated above, though a large difference in mortality between the vaccinated and unvaccinated exists, it is impossible, based on ONS data, to come to any definitive conclusions about the safety of these vaccines because of the mismatched cohorts and the small number of unclassified deaths in one of the groups.

Let us now examine what this data may tell us about the effectiveness of the shots. How good are the vaccines at preventing deaths from COVID in this age group?

There were two COVID deaths in 2,121,963 unvaccinated person-years. There were also two COVID deaths in 27,359 vaccinated person-years.

This means the vaccine effectiveness (VE) = -7,557%. This is because the unvaccinated group is 76.57 times larger and had the same number of deaths due to COVID.

However, the deaths in the vaccinated group occurred before the child had received a second dose.

By Pfizer's methodology, blessed by the U.S. Food and Drug Administration (FDA), its product is 100% effective. This is a direct result of only counting deaths 14 days after the second dose.

With "zero" deaths in the vaccinated and two in the unvaccinated, the vaccine is 100% effective in preventing death from COVID.

On the other hand, if we compare the two groups of adolescents aged 15-19, we find that there was one COVID death in the 127,842 person-years of the fully vaccinated group and 18 in the 1,587,072 person-years of the unvaccinated group. This results in a calculated vaccine effectiveness of only 31%.

Where does that leave us?

The ONS data give us much to be concerned about. There seems to be an undeniable safety signal emerging from England which must be monitored closely over time.

Strangely enough, the subsequent data set from the ONS, which includes data through the end of December 2021, conspicuously excludes children in these age groups.

Where else, then, can we look? The Centers for Disease Control and Prevention has chosen not to report on deaths by vaccination status in this age group.

We are in the same predicament that Pfizer's severely flawed and underpowered pediatric trial left us in. With fewer than 2,200 children involved and only 1,450 receiving the vaccine, the trial did not answer any questions about safety or efficacy.

Dr. Eric Rubin, editor-in-chief of the *'New England Journal of Medicine'* and member of the FDA's vaccine advisory panel, acknowledged the trial did not offer any information by succinctly and notoriously stating during an FDA hearing, *"We are never going to learn how safe this vaccine is until we start giving it. That's just the way it is."*

Rubin is not completely correct. We could learn how safe this vaccine is if he and his fellow advisory panel members demanded that a properly powered and designed trial were

conducted prior to deploying the vaccine to tens of millions of children.

In any case, we have started giving it. When will we learn how safe this vaccine is?

More importantly, what should we do in the meantime? Pause childhood vaccinations until data can be collected and deaths investigated?

Or carry on while testing it on infants 6 months of age and older?

Johns Hopkins University confirms: You can be vaccinated with a PCR test, even without knowing

In January 2019, the WHO defined the growing number of vaccination critics as one of the top ten threats to global health, and since the unprecedented Corona vaccination fiasco, the number of vaccination refusers has truly multiplied.

Meanwhile, resistance is forming even within the orthodox medical establishment. But the masterminds of the WHO continue to insist on an unrealistic vaccination coverage rate of at least 70 percent.

In this article, Jan Walter describes, with extensive source citations, which techniques are possible to still vaccinate the population, when people are becoming increasingly critical of vaccinations. This is only fueled by the continuing pressure for mass “vaccination” against a non-lethal disease for 99.8% of people, with a new type of “vaccine” that is actually gene therapy by means of mRNA. It seems like science fiction and is chilling, but the methods and techniques are available. There question is how far do we let it get?

Vaccinations increasingly scrutinized and the chilling alternative.

In January 2019, WHO defined the growing number of vaccine critics as one of the ten greatest threats to global health, and since the unprecedented corona vaccination fiasco, the number of vaccine refusers has really multiplied. Meanwhile, resistance is emerging even within the conventional medical community. But the masterminds at WHO continue to insist on an unrealistic vaccination rate of at least 70 percent.

Now several experts and former mainstream journalists like John O’Sullivan are warning that the massive PCR testing campaign could be a WHO vaccination program in disguise. (see Principia Scientific) O’Sullivan is referring to a new technology developed at Johns Hopkins University that is supposed to make it possible to carry out covert vaccinations through a PCR test. (See Johns Hopkins University)

Inspired by a parasitic worm that digs its sharp teeth into the intestines of its host, Johns Hopkins researchers have developed tiny, star-shaped micro-devices that attach to the intestinal mucosa and can deliver drugs into the body.

These tiny devices, known as “Theragrippers,” are made of metal and a thin film that changes shape. They are covered with heat-sensitive kerosene wax and each no larger

than a dust particle.

When the kerosene coating on the Theragripper reaches body temperature, the devices close autonomously and clamp onto the wall of the colon. Because of the sealing action, the tiny, six-pointed devices burrow into the mucosa and attach to the colon, where they are held and gradually release their drug load to the body. Eventually, the Theragripper lose their grip on the tissue and are removed from the colon through normal gastrointestinal muscle function.

Note: According to Johns Hopkins University, Theragrippers are actually administered with a cotton swab.



Theragrippers on a cotton swab

The Johns Hopkins University research team published positive results from an animal study as a cover article in *Science Advances* on October 28, 2020, confirming that the new technology works flawlessly:

Here we report that GI parasite-inspired active mechanochemical therapeutic grabs, or theragrippers, can survive 24 hours in the gastrointestinal tract of live animals by autonomously adhering to mucosal tissue. We also observe a remarkable six-fold increase in elimination half-life when using ripper-mediated delivery of the model analgesic ketorolac tromethamine. These results provide excellent evidence that shape-shifting and self-locking micro-devices improve the effectiveness of long-term drug delivery.

Coincidentally, the PCR test in China is now also performed anally because the reliability

of the results is said to be better and of course this practice is immediately supported in the Western mainstream media.

Note: If you can't imagine the government administering toxins to you against your will and without your consent, think of all the horrific experiments on humans that were admitted afterwards and which, according to Wikipedia, have continued well into modern times. In 2007, the CDC even admitted that between 1955 and 1963, 10-30 million citizens were infected with the carcinogen SV40 via polio vaccination. By the way Polio was caused by DDT spraying in the 1940s and 1950s.

The Vaccination that is Not a Vaccination, but Gene Therapy

In a revealing video conference with Dr. Judy Mikovits, Robert Kennedy Jr. and Dr. David Martin, it is explained that the mRNA vaccine, by the legal definition, is not a vaccine at all. It is falsely called a vaccine to hide the fact that the purported vaccine is, in fact, a gene therapy.

Experienced physician and epidemiologist, Dr. Wolfgang Wodarg, stated in a censored interview with Rubikon, *"Actually, this 'promising' vaccine should be PROHIBITED for the vast majority of people because it is genetic engineering!"* Mary Holland, Vice President and Chief Advocate of the Children's Health Defense Organization, warns, *"New vaccine technologies will likely lead to new types of vaccine harms. Since there has never been an approved mRNA vaccine, we really don't know what such damage will look like. Because vaccines have been developed so quickly and clinical trials are so short, the long-term damage is completely unknown."*

What is particularly chilling is that the vast majority do not even know what the mRNA vaccine is doing in their bodies. They simply allow themselves to be blindly vaccinated, and this despite the fact that more and more independent and even orthodox medical experts are warning against it. (See doctors from around the world warn against mRNA vaccination) In this context, it should not be forgotten that the American company **modeRNA Therapeutics** was founded in 2010 not as a vaccine manufacturer, but as a **GenTech company**. The example of the many Monsanto scandals makes it crystal clear that genetic engineering does not serve to protect species, but rather to gain power. **The hidden agenda is to genetically modify species in order to patent or own them.** Former U.S. Secretary of State Henry Kissinger once said, *"Whoever controls the seed controls the world."* (See Press Portal).

What's next? Are they going to patent our bodies after they genetically engineer us with the mRNA vaccine? This has been exactly what their goal has been since the invention of CRISPR-CaS9 technologies.

Dr. Carrie Madej, a specialist in internal medicine with over 19 years of experience, states that the COVID-19 vaccine could actually be a Trojan horse to patent humans because it alters our DNA. According to an Article published in the British science journal Phys.org in January 2020, it is confirmed that modified RNA has a direct impact on our DNA. The

following passage is particularly alarming: *“Several research groups are now working together to investigate what affect this may have on the DNA molecule. We already know that R-loop regions are associated with DNA sequences that contain active genes, and that this can lead to chromosome breaks and the loss of genetic information.”* Also alarming is the fact that leading vaccine manufacturers such as Pfizer are warning their subjects not to reproduce after vaccination (see Pfizer, p. 132). By doing so, the pharmaceutical company is confirming that the mRNA vaccine can have negative effects on human reproduction and is being vaccinated in spite of it!

Conclusion: Anyone who knows a little history knows that genetic experimentation and human experimentation are nothing new. Although modern eugenics has its origins in the 19th century, the ideas, measures and justifications of state and social interventions and influences on reproduction have been known since ancient times. They can already be found in Plato’s “Politeia,” which, however, is limited to state selection and education. In the Renaissance, corresponding lines of thought can be found in the social utopian writings “Utopia” by Thomas Morus, “Nova Atlantis” by Francis Bacon and “La città del Sole” by Tommaso Campanella. But because common sense instinctively resists such interventions, the establishment has always endeavored to disguise its true intentions with misleading labels. The Nazis, for example, disguised eugenics as “hereditary health science” or “hereditary care” to make it attractive to the masses, and today the same sick agenda is sold to us with a new “vaccine” to save us from a supposed “pandemic”.

Official U.K. Lab Report Confirms Covid-19 Vaccines Definitely Contain Graphene Oxide

February 14, 2022 By Patricia Harrity, The Expose

The Covid-19 vaccines have been forensically examined in the United Kingdom and a laboratory report confirms they contain graphene nanomaterials that can penetrate the body’s natural barriers and damage the central nervous system, and Graphene Oxide which can damage internal organs, destroy blood health, trigger cancer, and cause changes in gene function among a host of other ill effects.

Following her own experience with patients who had suffered apparent vaccine injury and adverse reactions, a British Medical Practitioner came forward in December 2021 offering to assist in an investigation to ascertain whether the results discovered by Dr’s Noack and Campra could be replicated in the UK and also to examine the COVID-19 injection vials for discovery of toxins or unexpected contents.

The medical practitioner seized an injection vial from the fridge housed in the surgery in which she works and handed it to an independent investigator assisting in investigating cases relating to injury sustained as a result of injections given as part of the roll out.

Further vials have since been obtained which cover the three main manufacturers in the UK: Pfizer, Moderna and AstraZeneca.

The contents of the injection vials have been forensically examined and a laboratory report

has now been officially published.

The [report](#) titled “[Qualitative Evaluation of Inclusions In Moderna, AstraZeneca and Pfizer Covid-19 vaccines](#)” has been presented to the Police involved in the UK Criminal Case, 6029679/21, which is said to provide them with more than enough reasonable suspicion that serious indictable offences have been committed regarding the administration of experimental treatments.

The report contains the toxicology reports of injection vials that have been forensically examined, with findings that provide “more than enough grounds” for the Police to apply for the Police and Criminal Evidence Act 1984 Warrant and seize injection vials for themselves.

The Police will then be able to submit them to a Home Office Laboratory with a view to replicate the findings and will enable them to possess their own hard evidence to support serious indictable offences.

Additionally, the police, in line with the duty of care to the public, have been asked to request the immediate cessation of the experimental treatment rollout.

[The Report: Qualitative Evaluation of Inclusions In Moderna, AstraZeneca, and Pfizer Covid-19 vaccines – by UNIT](#)

Four vaccine vials were the subject of the investigation.

Two Moderna samples, and 1 AstraZeneca, and 1 Pfizer sample were collected for examination in order to analyse the contents and identify if undeclared components were present in them.

Here is the list of declared ingredients in each vaccine by the manufacturers –

The inclusions that are not declared by the manufacturers were the focus for this particular analysis, primarily graphene and carbon-related nanostructures in form of carbon or graphene composites, graphene in association with polyethylene glycol, graphene oxide, iron oxide compounds, and calcite.

The Four Vials

The analysis of all four vial contents identified objects that are similar and have been defined and illustrated within the report individually.

The Identified inclusions were:

Graphene nano ribbons coated with Polyethylene Glycol
Graphene Composite Form 1.
Graphene Composite Form 2.
Microcrystalline Calcite with Carbonaceous inclusions.

Graphene Nano Form with and without fluorescence
Graphene nano objects
Graphene nano scrolls

Moderna 01

The first sample that was evaluated was the Moderna 01 which was examined by Raman spectroscopy. The investigation clearly showed that all the inclusions within the vaccine have a strong carbon signal with confirmed graphene compositions of some representative forms.

Two clear signals were obtained from two objects. The flat ribbon-like inclusions exhibited clear graphene spectra integrated with the spectrum of glycol and other minor compounds. The other clear signal was obtained from a calcite microcrystalline form and Carbon composite forms also had a clear graphene signal.

It is important to point out that some nano amorphous carbon forms showed a clear Graphene signal, however, these forms also exhibited fluorescence which masked the Graphene peak.

Moderna 02

Particles that carry the mRNA load were clearly seen and Graphene composite 01 was prominently present even at low resolution and Graphene Nano objects were present in “great abundance.” within the vial sample.

AstraZeneca

AstraZeneca was the third vaccine that was evaluated for its inclusion, and as it was almost transparent it made “spotting of inherent colors slightly easier”. Under wet microscopic observation, the solution exhibited instantaneous movement of nanoscopic particulate material which when observed closely seemed to be driven by convection current.

When dry, the particles exhibited traction movement. In figure, 3.21. the microscopic form is clearly visible as it is lying on top of the solid film while the nanoparticles are still in motion in the background as can be seen by the shifting position of the shadow. A clear output of this mechanism was that as the medium solidified, it became more difficult for the nanoparticles to navigate through the viscous material.

Confirmed inclusions within AstraZeneca were of the presence of Graphene in all the identified representative forms. The carbon composites are of two forms as they are in the Moderna vaccines. These two forms showed distinct graphene signatures. Also, besides Graphene the spectrum is dominated by iron oxide and other forms of carbon associations.

Pfizer

Pfizer was the fourth vaccine vial that was evaluated for its inclusions. The pipette specimen showed some extremely interesting inclusions. As the material was sucked into the pipette, distinct translucent to transparent sheets were seen floating about as seen in

figure 3.28.

Three of these samples showed carbon composite signatures with possible graphene in. The signals of amorphous carbon-like materials were extremely complex with carbon along with iron oxide and several other compounds in them.

Ribbon forms of nearly transparent microforms are found in fair numbers in the slide. These are often half embedded in the solution with one end projecting outside the material. The carbon composites of both form 1 and 2 also are present in great numbers. Form 1 settles on top of the material while form 2 is found at mid-levels of the solidified medium. Graphene nanoforms are present in fair numbers within the slide material along with some scrolls. Figure 3.32. Representative inclusions found within Pfizer vaccine.

The signals of amorphous carbon-like materials were extremely complex with carbon along with iron oxide and several other compounds in them. The graphene complex 1 is graphene with polyethylene glycol signal forming the bulk of the spectrum. Though, for initial assessments, this study can confirm the presence of graphene in Pfizer.

Notably, one of the samples that was shot, displayed a fair influence of fluorescence.

To Conclude

All three vaccines commonly employ the self-assembling lipid nanoparticles as drug delivery mechanisms. Where the central find of this project has been the confirmation of the presence of graphene in all four samples, it is important to evaluate this find in the context of the subject itself.

It is also important to mention, that the source of fluorescence within the samples was unknown while the investigations were underway, and due to tight timescales were not able to be investigated at the time.

In conclusion, it can be stated that the four samples of vaccines (Moderna 1, Modern 2, AstraZeneca, Pfizer) all contain significant amount of carbon composites, graphene compounds, and iron oxide.

These ingredients were undeclared by the manufacturers and are absent from the list of ingredients for the vaccines. However, studies show how dangerous the Graphene family is, yet individuals have not been made aware that they are being injected with the deadly substance.

BOMBSHELL: Pfizer admits to conducting gain-of-function research, building SARS-CoV-2 in its own labs

Tuesday, February 15, 2022 by: Ethan Huff

BOMBSHELL: Pfizer admits to conducting gain-of-function research, building SARS-CoV-2 in its own labs.

(Natural News) In a shocking (or perhaps not) admission, Albert Bourla, the CEO of Pfizer,

openly admitted that his company created the Wuhan coronavirus (Covid-19) in a laboratory in order to then manufacture and sell “vaccines” for it.

Bourla fessed up to the truth during an interview with CNBC back in late December. He explained how SARS-CoV-2, as opposed to a naturally occurring coronavirus, was specifically deployed in order to develop the company’s mRNA (messenger RNA) gene therapy injections.

Bourla also revealed that Pfizer is currently reformulating said mRNA gene therapy injections in order to treat the all-new “omicron” (moronic) variant of the Fauci Flu, which is barely even a cold (if it even exists at all).

*“The data that we received are data that they got from what we call a pseudo-virus, so it’s not the real virus,” Bourla declared. **“It is a virus that we have constructed in our labs and it is identical with the omicron virus.”***

A pseudo-virus, by the way, is a recombinant (genetically engineered) virus particle that has been scientifically manipulated using several other viruses. The purpose is to make the final GMO virus more pathogenic than its parts otherwise would have been in nature.

“In other words, Bourla admitted Pfizer is conducting gain of function research in pursuit of creating an Omicron vaccine,” reported Newspunch.

When is Albert Bourla going to be prosecuted for crimes against humanity?

Keep in mind that gain of function research is illegal in the United States, thanks to a directive from Barack Hussein Obama.

What this means, of course, is that Pfizer broke the law and Bourla committed treason against the United States, not to mention crimes against humanity.

According to writer Sean Adl-Tabatabai, Bourla’s admission about gain of function research could be a cover for the Wuhan lab leak theory, or it could simply be what Pfizer did in order to create a profitable new “vaccine.”

“In other news, the sky is blue,” joked a commenter at Newspunch.

“Surprise?” wrote another, expressing a similar sentiment.

Over at Natural News, a reader pointed out that conveniently, not a single pharmaceutical CEO, Bourla included, had died or even gotten sick from the injections they are peddling on the masses.

“How can this be if they are really taking it?” this person asked.

“Bourla is pushing the vaccines for 10 years,” wrote someone else. *“Is it because the*

vaccine patents expire after 10 years and they can't make tons of money off them? My tin foil hat says yes."

"No, he just has a big heart and cares about people's health," joked another in response.

Another reader pointed out that initially, Bourla was claiming that whoever did not take his "snake oil" injection would die from covid. Later on, Bourla changed the story to claim that the first two snake oil injections only work if people agree to get a third, then a fourth, and so on and so forth for the rest of time.

"Bourla gets away with his garbage because most people eat it up," this person further pointed out.

And let us not forget that none of the jab manufacturers, including Pfizer, ever claimed that the shots would stop infection or spread. At best, all they do is keep symptoms to a minimum, we are told, though there is zero proof to back this claim.

"They claimed it could reduce the severity of the infection and THAT is NOT provable!" this person added.

Alarming!

Project Veritas released a new video this week exposing Food and Drug Administration [FDA] Executive Officer, Christopher Cole, who inadvertently revealed that his agency will eventually announce that annual COVID vaccinations will become policy.

Here are some of the highlights from today's video:

<https://www.bitchute.com/video/FgnJvEqax12r/>

FDA Executive Officer, Christopher Cole: "You'll have to get an annual shot [COVID vaccine]. I mean, it hasn't been formally announced yet because they don't want to, like, rile everyone up."

Cole on President Joe Biden: *"Biden wants to inoculate as many people as possible."*

Cole on plans to approve vaccine for toddlers: *"They're not going to not approve [emergency use authorization for children five years old or less]."*

Cole on pharmaceutical companies: *"There's a money incentive for Pfizer and the drug companies to promote additional vaccinations."*

Cole on the financial incentive for pharmaceutical companies: *"It'll be recurring fountain of revenue. It might not be that much initially, but it'll be recurring -- if they can -- if they can get every person required at an annual vaccine, that is a recurring return of money going into their company."*

FDA official statement: *“The person purportedly in the video does not work on vaccine matters and does not represent the views of the FDA.”*

Why is the FDA potentially hiding the fact that annual COVID shots will be enforced? Is the FDA worried about upsetting the American people with that alleged information?

A lot of questions remain unanswered, and the public deserves to know the truth.

James
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Project Veritas Privacy Policy: <https://www.projectveritas.com/privacy/>

[Regarding the two videos Veritas posted 2/15 & 2/16, go to Project Veritas web site if the video links above does not open. I have changed my browser in order to stop censorship by AOL. They have for months deleted web sites, videos, articles, and I am just discovering a new browser so to figure out how to save URL-linked videos.]

**This is a war against the American people, and all of humanity!
Does anyone not recognize this reality?**

Dr. Sherri Tenpenny and others predicted these vaxxes would see a huge die off in 6 months to 3 years from being vaxxed.

The fully vaccinated may already be suffering from jab-induced AIDS, government data suggests

Thursday, February 10, 2022 by: Ethan Huff

The fully vaccinated may already be suffering from jab-induced AIDS, government data suggests.

(Natural News) **The long-term effects of Wuhan coronavirus (Covid-19) “vaccines” are finally setting in as vaccine-caused AIDS, the latest data shows.**

In the United Kingdom, government data shows that the number of *“fully vaccinated”* Brits may have already reached the point of no return as many of the injected are now suffering with autoimmune disease.

The latest figures from the U.K. Health Security Agency (HAS) point to a massive increase in *“cases”* among the vaccinated. The unvaccinated, meanwhile, are doing mostly fine.

“As you can clearly see, despite the not-vaccinated population being forced to suffer more

restrictions than the fully vaccinated population, England is very much experiencing a pandemic of the fully vaccinated, with the vaccinated over 18 population as a whole recording a shocking 1.67 million cases in January 2022, compared to just 228,750 cases among unvaccinated people over the age of 18,” reported the Daily Exposé.

The Exposé came up with its own calculation methods to determine the variance between “fully vaccinated” cases, including both double- and triple-vaccinated, as well as “unvaccinated” cases since the government does not differentiate any of this in its reporting.

Based on these methods, the Exposé determined that the real-world effectiveness of covid injections in England is actually minus-183 percent – meaning negative effectiveness.

Getting injected, in other words, decreases one’s immune capacity, and as we reported, that immune capacity continues to wane over time, hence the new designation of VAIDS (vaccine-induced AIDS).

“This means fully vaccinated adults are more likely to catch Covid-19 than unvaccinated adults,” the Exposé reports. *“This is what vaccination has done to the people of England.”*

Covid “vaccines” appear to permanently damage natural immune function! Vaccine effectiveness, by the way, is not really a measure of a vaccine. It is actually a measure of a vaccine recipient’s immune system performance post-injection compared to the immune system performance of a “pureblood.”

The idea behind a vaccine, including the so-called covid “vaccines,” is that they train the immune system to recognize a foreign invader, in this case the SARS-CoV-2 spike protein.

It does this by introducing artificial spike protein pieces – or in the case of mRNA (messenger RNA) injections, by laying a blueprint for the body to produce its own spike proteins.

The claim all along is that these spike proteins and / or spike protein blueprints go away after a time, leaving your body to handle the rest. But what does the initial impact do to the body in the longer term?

The answer appears to be that the immune system is not only weakened but also set on a crash course to eventual destruction. It seems to continue waning over time, leaving a jabbed person prone to every disease that comes along much like an AIDS patient.

“The problem we’re seeing here is that the immune system isn’t returning to its original and natural state,” the Exposé reports. *“If it was, then the outcomes of infection with Covid-19 would be similar to the outcomes among the not-vaccinated population.”*

“Instead, it continues to decline at a rate that means the not-vaccinated population have a better performing immune system, so this means the Covid-19 injections are decimating

the immune systems of the fully vaccinated.”

Extrapolated out, the Exposé determined that on average, fully vaccinated Brits currently have 65 percent less immunity to the Fauci Flu than the average unvaccinated person. So much for stopping the spread.

“... the average fully vaccinated person in England is down to the last 35% of their immune system for fighting certain classes of viruses and certain cancers,” the Exposé adds. **“The question is, when will the remaining 35% of their immune system be depleted?”**

More news on [AIDs](#)

[The fully vaccinated may already be suffering from jab-induced AIDS, government data suggests](#)

[Doctors are testifying that COVID-19 vaccines are giving people cancer and AIDS](#)

[SGT Report: Vaccines used for intentional and malicious infliction of harm, planned since 2002](#)

[Freaky Fauci spent \\$205K stolen from American taxpayers to create transgender monkeys](#)

[Official government data from Germany suggests covid fully vaccinated people will develop AIDS](#)

[Cases of vaccine-induced VAIDS on the rise due to mass covid vaccination](#)

[How they plan to kill BILLIONS with the common flu: Covid vaccines induce “AIDS” immune system failure, opening door to death via common flu strains](#)

[Dr. Fauci ran grotesque AIDS vaccine experiments on minority children in the 90s, causing organ failure, deformities, brain damage](#)

[It's like déjà vu... flashback video: Fauci says kids can get AIDS from casual contact – withheld life-saving drugs from gays with AIDS](#)

ATTENTION: VAXXED OR NOT – If you have been vaxxed or not this is going to be vitally important to you or someone you probably know. IT IS IMPORTANT THAT EVERYONE WHO HAS HAD THE JAB GET AN AIDS TEST!

What the above article does not tell is that Covid-19 was/is a Retro-Virus at the time of its release. HIV1 and SARS2 was intentionally and methodically inserted into the Genome giving it the equivalency of 92% of the virus HIV1. The AIDS victims do not die at the same time. A Retro-Virus is merely a virus that is tampered with, and then the virus continues to replicate itself once in the human body.

Indian scientists discovered this insertion as early as February, 2020, and it was confirmed by March, 2020. The man who received a Nobel Peace Prize for Medicine for discovering the HIV1 virus. Dr. Luc Montagnier died of cancer on February 8, 2022. The World Health Organization, and the CDC, NIH, NIAID, all ignored Dr. Montagnier’s warning information. Dr. Montagnier stated that it was inserted at what would have been to be a BSL-4, using CRISPR editing technologies. The 4 inserts were methodically “cut and paste” efforts to make people sick and worse over extended time.

AIDS does not mean a person will or has to die immediately, but with known therapies, a person can live for years. The basketball player Earvin “Magic” Johnson has lived for thirty years with his HIV. Dr. Judy Mikovits has said this for over two years.

Covid “vaccines” cause AIDS: Here is proof

Wednesday, February 16, 2022 by: Ethan Huff

(Natural News) Evidence continues to mount showing that Wuhan coronavirus (Covid-19) “vaccines” are causing recipients everywhere to develop AIDS.

Covid-19 Vaccine Induced Acquired Immune Deficiency Syndrome, or VAIDS, appears to be one of the more serious long-term adverse effects caused by the injections. In essence, the shots are destroying people’s immune systems over time, leaving them prone to infections of all kinds.

It is not so much that the effectiveness of the injections wanes over time, as some claim, but rather that immune system performance does. Fauci Flu shots act as the grim reaper, so to speak, for the immune system.

The effectiveness of the jabs is negative in terms of the immune protection they provide. The data shows that immune function undergoes a net reduction post-injection, which is the opposite of what a vaccine is supposed to do.

“A vaccine effectiveness of +50% would mean that the fully vaccinated are 50% more protected against Covid-19 than the unvaccinated,” reported the Daily Exposé. *“In other words, the fully vaccinated have an immune system that is 50% better at tackling Covid-19.”*

“But a vaccine effectiveness of -50% would mean that the unvaccinated were 50% more protected against Covid-19 than the fully vaccinated. In other words, the immune system performance of the vaccinated is 50% worse than the natural immune system performance of the unvaccinated. Therefore, the Covid-19 vaccines have damaged the immune system.”

The average double injected person has just 35% of his immune function remaining.

The U.K. Health Security Agency (UKHSA) publishes a weekly Vaccine Surveillance Report containing four weeks’ worth of data on “cases,” hospitalizations and deaths by jab status. These reports continue to show that the worst-off folks are the fully vaccinated.

The latest report clearly shows that the case rate is lowest among the unvaccinated and highest among the vaccinated. The triple jabbed population is seeing double the rate of cases compared to the unvaccinated population, while the double jabbed is seeing triple the rate. UK agencies have dubbed it as VLAIDS or Vaccine Laced Acquired immune Deficiency Syndrome.

“This data alone should deeply concern even the most avid vaccine advocates,” the

Exposé reports.

Using Pfizer's vaccine effectiveness formula, the Exposé found that the real-world effectiveness of the jabs is -183 percent, on average. This is absolutely astounding and highly disconcerting.

"The lowest Covid-19 vaccine effectiveness was seen in the 40-49 age group in England throughout January 2022, recorded at minus-209.4%, with the 50-59 age group not far behind," it was determined.

The U.K. data goes even further to show that the fully vaccinated now have negative immune performance. The average double jabbed person in England is now down to just 35 percent of their normal immune capacity, which continues to drop over time.

This means that the fully jabbed are operating on fumes in terms of their bodies' ability to fight viruses, bacteria and even cancer.

The worst-off group is once again the 40-49 age demographic, which is declined to -67.7 percent as of January 30. This proves that covid injections are causing damage to people's natural immunity, which continues to worsen over time.

"Real world Covid-19 vaccine effectiveness against death in England between 3rd Jan and 30th Jan 22 was as low as -110.24% in the over 80's, -97% in people aged 70-79, and -98.14% on average in all adults over age 18," the Exposé reports.

The fully vaccinated elderly, meanwhile, may have already developed full-blown VAIDS, according to the data. The 70-79 age demographic is now seeing immune performance of -49.2 percent while those over 80 have immune performance of -52.4 percent.

"In the most recent week ending 21st January the fully vaccinated were statistically over twice as likely to die of Covid-19 than the unvaccinated," the Exposé warns.

Bill Gates: Future Pandemics & Reducing The Population

Published on February 15, 2022

Written by Michelle Edwards

In January, Bill Gates [warned of pandemics](#) yet to come that will be worse than the current one. How does he know this unless they are already planned?

His comments come as he continues to push vaccines through his *Coalition for Epidemic Preparedness Innovation* ([CEPI](#)). Gates founded the global partnership—which is focused on developing vaccines—in 2017 in Davos along with the governments of Norway and India, [Wellcome](#), and the World Economic Forum ([WEF](#)).

A prominent vaccine-based giver, Bill Gates publicly discussed his plan to reduce the world

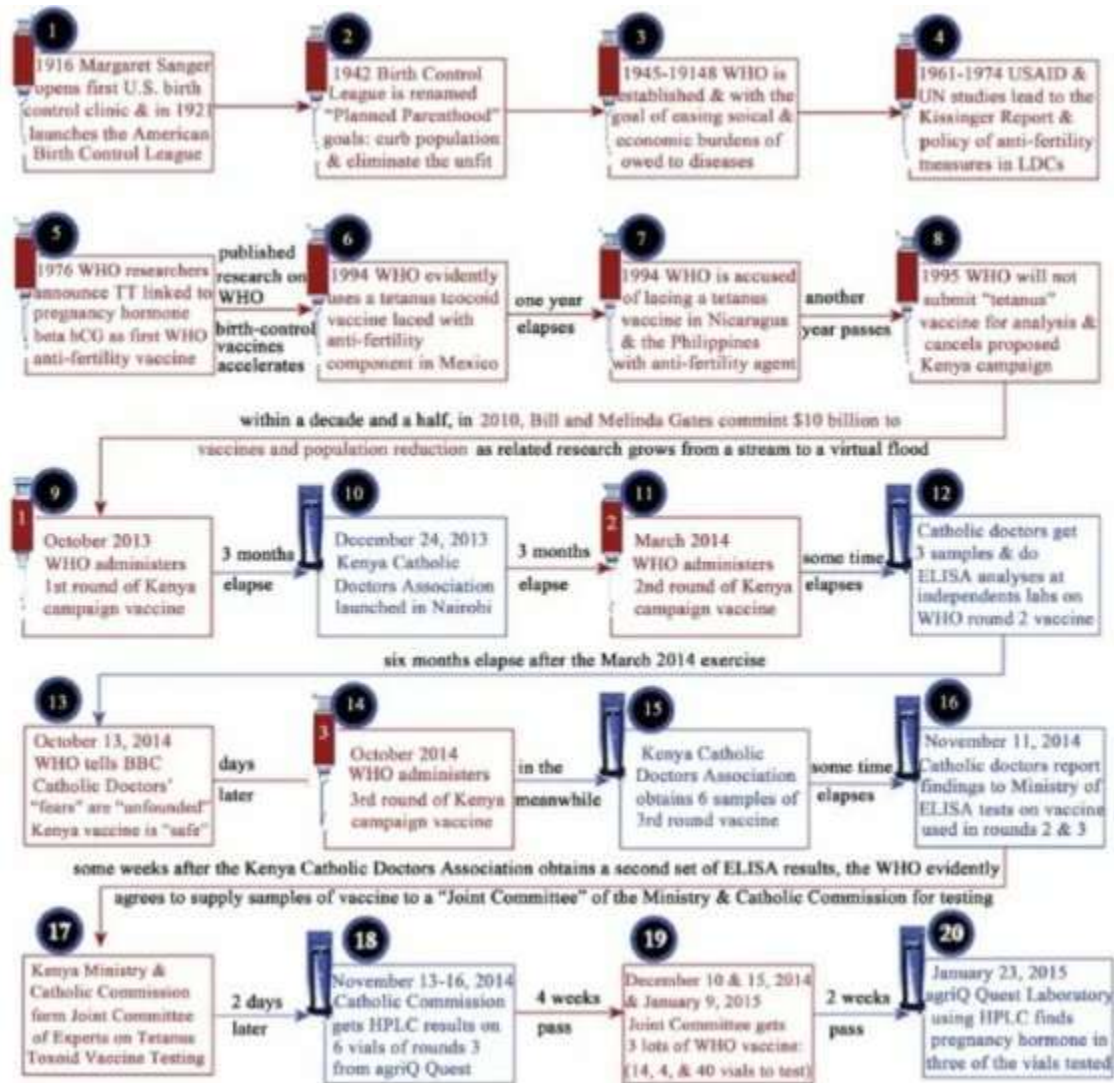
population by 10 or 15 percent in a 2010 TED talk. Notably, Gates' depopulation agenda came on the heels of a secret 2009 meeting of billionaires he'd assembled to allegedly discuss shrinking the world's population.



During his notorious February 2010, TED talk—with over 8.1 million views—Gates unveiled his vision for the future, his significant role in pushing vaccines, his views on climate change, and his goal of zero-carbon emissions globally by 2050. In the talk, Gates specifically outlined his vision to [depopulate](#) humankind by over one billion people, stating:

“The world today has 6.8 billion people. That’s heading up to about nine billion. Now, if we do a really great job on new vaccines, health care, reproductive health services, we could lower that [the world population] by 10 or 15 percent.”

Screenshot / [HCG Found in WHO Tetanus Vaccine in Kenya Raises Concern in the Developing World](#); Open Access Library Journal; A chronology of milestone events leading up to and including the current research project based on the WHO “tetanus” campaign in Kenya 2013-2015.



May 2009 Meeting Of "The Good Club" & Gates' Obsession With Vaccines

The [2009 clandestine meeting of billionaires](#) that huddled before Gates' TED presentation included [Bill Gates](#), [Warren Buffett](#), David [Rockefeller](#), Eli Broad, [George Soros](#), [Ted Turner](#), Oprah Winfrey, and Michael Bloomberg. Citing a story in the Times of London, the 'WSJ' points out that on May 5, the billionaire philanthropists (dubbed "The Good Club") met behind closed doors in Manhattan at the private residence of the president of Rockefeller University.

According to the article, the [world's wealthiest](#) discussed health care, education, "and—by far the most controversial—slowing the global population growth." The article stated:

"Taking their cue from Gates, they agreed that over-population was a priority," the article said, adding that *"this could result in a challenge to some Third World politicians who believe contraception and female education weaken traditional values."*

In addition to Gates, the hush-hush meeting was organized by Mr. Rockefeller and Mr.

Buffet, who shifted over \$31 billion of his assets to Gates around the same time. A probable precursor to the Great Reset widely promoted by Klaus Schwab and the WEF, the meeting was held in response to the significant global economic downturn and the “multiple health and environmental crises plaguing the globe.”

During the intimate dinner and discussion, the oligarchs discussed their primary concern for the planet, followed by Gates’ billionaire friends and other major foundations contributing to his foundation’s vaccine efforts.

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THE WEALTH REPORT

Billionaires Try to Shrink World’s Population, Report Says

By Robert Frank

May 26, 2009 11:57 am ET

Last week’s meeting of the Great and the Good (or the Richest and Richer) was bound to draw criticism.

The New York meeting of billionaires Bill Gates, Warren Buffett, David Rockefeller, Eli Broad, George Soros, Ted Turner, Oprah, Michael Bloomberg and others was described by the *Chronicle of Philanthropy* as an informal gathering aimed at encouraging philanthropy. Just a few billionaires getting together for drinks and dinner and a friendly chat about how to promote charitable giving.



Associated Press

Already involved in vaccines for fertility regulation, the Rockefeller’s clear involvement in population control is discussed in more detail later in the article. Like the Rockefellers, CNN founder Ted Turner has voiced concerns about overpopulation for decades.

A 1996 interview with ‘Audubon’ magazine quoted Turner as saying, “*We’re all 5 billion of us on this little earth swimming around in space, and there’s too many of us. A total (world) population of 250-300 million people, a 95 percent decline from present levels, would be ideal.*”

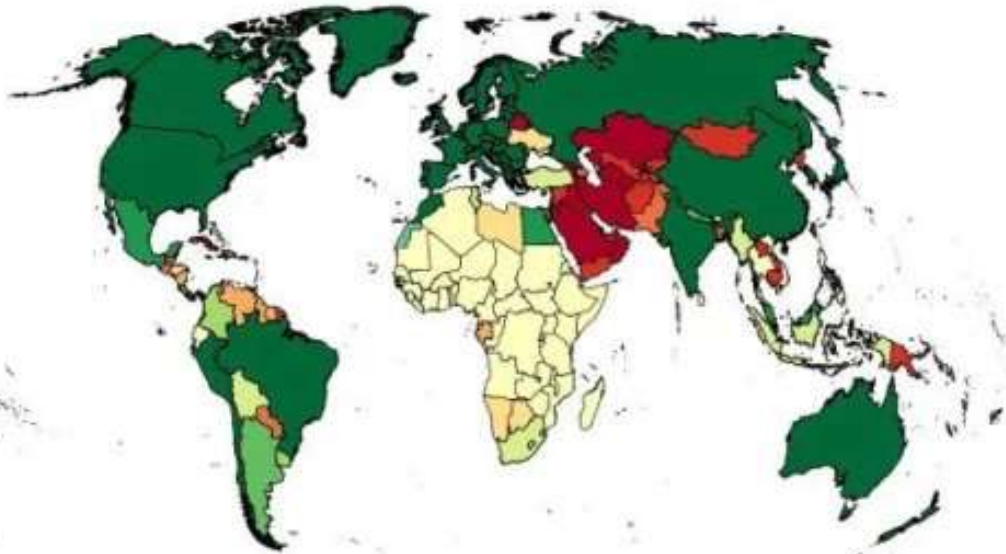
Some even believe Turner is the anonymous creator behind the Georgia Guidestones—the granite tablets that sit atop a rural hill about 30 minutes from CNN headquarters. The First Guide says in the engraved script:

“Maintain humanity under 500 million in perpetual balance with nature.”

With pandemics offering a platform to mass-distribute vaccines, “*The Good Club*” gathering occurred at the height of the H1N1 swine flu “*pandemic*.” In April 2009, just a month before the billionaire’s meeting, Gates and the World Health Organization (WHO) were advised by Professor Neil Ferguson of Imperial College, London, that “*40 percent of people in the UK could be infected [with H1N1] within the next six months if the country was hit by a pandemic.*”

Figure 3: Global Vaccine Coverage

Percentage of Population Covered with Vaccines Pre-purchased or Domestic Supply
(based on Publicly-Known Contracts)



Screenshot / [World Bank Group “How to End the COVID-19 Pandemic by March 2022.”](#) **Sources:** The COVAX, Duke Global Health Innovation Center, World Population Prospects, news sources. **Notes:** Includes only known pre-purchases of vaccines with reported efficacy greater than 50% in Phase 3 trials. Some deals for which the number of courses is not available in the public domain may not have been recorded. Orders by multilateral organizations (e.g., the COVAX AMC, European Union, African Union) are distributed to eligible members in proportion to their population. China is allocated all uncontracted production capacity of Sinovac, Sinopharm, and CanSino. Russia is allocated all uncontracted production capacity of Gamaleya, and India is allocated all uncontracted production capacity of Bharat Biologics, and the uncontracted doses of the domestically-licensed AstraZeneca/Oxford and Novavax, which are under license for production in the country by the Serum Institute of India (SII).

Among his [many alliances](#), Ferguson is Principal Investigator for the Gates Foundation,

Gavi and [COVAX](#); the Director of the [WHO](#)'s Collaborating Center for Infectious Disease Modeling; an Adviser to the [WHO](#) on multiple disease topics, including COVID-19; an Adviser to U.S. government agencies, departments, and states for pandemic modeling, planning, and response; and a past consultant on pandemic threats to the World Bank.

Undoubtedly, with generous support from Bill Gates, Ferguson is largely responsible for the first coronavirus [Lockdown Model](#) launched on March 11, 2020, that was [implemented](#) around the world. Based on initial predictions of 600,000 deaths in the U.K., the [mathematical model](#) has since been reformulated at least three times by [Ferguson](#).

His latest predictive model was used to justify the Fourth Wave Lockdowns that swept across Europe in late 2021. With both the funding and the power to turn fiction into reality, [Gates](#) himself has spent a fortune on predictive pandemic models to illustrate what sort of event will kill the most people in the near future.

November 2010 Meeting On The Future Of Cell Phones In Health Care.

Shortly after speaking at the TED conference, [Bill Gates](#) was a keynote speaker at the November 2010 mHealth Summit organized by the Foundation for the National Institutes of Health (FNIH, which, by 2010, had received [\\$300 million](#) in donations from Bill Gates), the National Institutes of Health ([NIH](#)) and [Microsoft External Research](#).

Hosted by the [United Nations Foundation](#), the stated goal of the mHealth Alliance is to promote the use of mobile devices to improve global health, especially in low-income nations. The partnership was created in 2008 by the Rockefeller Foundation, the [Vodafone Foundation](#), the UN Foundation and includes founding members of [MHealth Alliance](#), including [HP](#), [GSM Association](#), and [Norad](#).



Speaking to an audience of over 2,000 conference attendees from around the world, Gates declared the simple critical health care metric that “we as a society” should constantly be trying to improve is the number of children who die before age 5. At the time of his speech, Gates said that number was 8.5 million. He pointed out that in 1960, it was 20 million. According to Gates, the dramatic reduction in deaths—from 20 million to 8.5 million—is the direct result of vaccines.

Providing ongoing funding to scientists worldwide to research mobile phone applications for improving health, Gates was asked his views on the critical applications for mobile health and specific examples of what will be most impactful. With Gates also funding every major global health initiative of the last two decades, he set the stage to support [digital vaccine passports](#) when he responded:

“Vaccines are going to be the key. How would cell phones fit in? If you knew, if you could register every birth on a [cell phone](#), get fingerprints, get a location, then you could take these systems where you go around and make sure the immunization happens, you could run them in a more effective way.

When I think about the biggest impacts of cell phones, I think of patient reminders. [Also], remind mothers to do various things, particularly in that first year of life. [With] this sort of digital patient record, the high payoff is in vaccination coverage.”

The event, which featured over 100 exhibitors, was held in Washington, D.C., and was sponsored by Verizon Wireless. Other sponsors joined Verizon, including Abbott Labs, American Telemedicine Association, CTIS, McKesson Foundation, Microsoft Research, Qualcomm, Robert Wood Johnson Foundation, Skype, the West Wireless Health Institute, and Pfizer.

A MAN OF GREAT INFLUENCE...



Study Supports WHO & Gates Depopulation Agenda

Repeating his intent to curb population growth, Gates told [CNN's Sanjay Gupta](#) in 2011 that *"the benefits [of vaccines] are there in terms of reducing sickness, reducing population growth."* Repeatedly, Gates's alarming quotes have disturbed those aware of his preoccupation with vaccines. His quotes have raised concerns that perhaps a [sinister motive](#) for population reduction might be the driving force behind Gates' obsession.

These depopulation concerns were highlighted in 2014 when three independent accredited biochemistry labs in Nairobi tested samples from vials of the Gates-funded WHO tetanus vaccines. **The tests revealed that nearly 3 million women unknowingly received vaccines laced with a sterilant and contraceptive.**

Moreover, a [2017 Open Access Library paper](#) on the incident, titled "HCG Found in WHO Tetanus Vaccine in Kenya Raises Concern in the Developing World," supported 2014

concerns raised by the Catholic Church asserting an “*abortifacient vaccine was being used as a tetanus prophylactic.*” Indeed, the authors concluded:

“Given that hCG was found in at least half the WHO vaccine samples known by the doctors involved in administering the vaccines to have been used in Kenya, our opinion is that the Kenya “anti-tetanus” campaign was reasonably called into question by the Kenya Catholic Doctors Association as a front for population growth reduction.”

Further backing up the notion that what happened in Kenya was part of a well thought out plan between Gates and the WHO to reduce the global population, a [1968 Annual Report](#) of The Rockefeller Foundation (pg. 52) calls for “*progress on immunological methods, such as vaccines, to reduce fertility.*”

Twenty years later, The Rockefeller Foundation’s [1988 Annual Report](#) mentions a substantial grant given to India for “**a large anti-fertility vaccine for women.**” Then, another generous donation is listed on page 56 “*for research on a potential [contraceptive vaccine](#) based on beta-hCG synthesized bacteria*”—just a few years before the [experiments in Mexico, Nicaragua, and the Philippines](#) that took place in 1993.

Brackets show the years and original amounts of appropriations from which grants have been made. Appropriations may be made entirely to a single institution or they may be allocated to a number of recipients. Such allocations may be made over a period of years until the appropriation is expended. Listings without brackets are grants-in-aid, each of which is made to a single recipient for \$100,000 or less.

	Grants in 1988
Developing Technology for Fertility Regulation	
Frank Alvarez-Sanchez, <i>Asociacion Dominicana Pro-Bienestar de la Familia, Inc.</i> , Santo Domingo, Dominican Republic	\$ 44,870
<i>To complete research on endocrine profiles of women using NORPLANT contraceptive implants</i>	
Chinese Academy of Sciences, Beijing [1988—\$1,250,000] <i>To assist the academy's plan for strengthening research in reproductive and developmental biology in the system of institutes it administers</i>	1,250,000
<i>For use by its Zhejiang Academy of Medicine for three projects concerning the development of spermatozoa</i>	
	28,000
Federal University of Bahia, Salvador, Brazil [1988—\$300,000]	300,000
<i>For research and training in reproductive biology</i>	
Georgetown University, Washington, D.C.	21,910
<i>For research on monoclonal antibodies against epididymal epithelial cells</i>	
Harvard University, Cambridge, Massachusetts	
<i>For a study at its Center for Population Studies on the relationship between body fat and estrogen metabolism</i>	
	46,280
<i>For a colloquium to be held in honor of Robert H. Ebert and his role in establishing joint M.D.-Ph.D. programs</i>	
	10,000
Instituto de Biologia y Medicina Experimental, Buenos Aires, Argentina	25,000
<i>For further research on immunological approaches to male contraception</i>	
Instituto Nacional de la Nutricion Salvador Zubiran, Mexico City	12,500
<i>For a meeting of Latin American scientists studying human reproduction</i>	
Johns Hopkins University, Baltimore, Maryland	100,000
<i>For a study of the histological and physiological regulation of the corpus luteum</i>	
Kerrya Medical Research Institute, Nairobi	13,130
<i>For a laboratory and clinical evaluation of a traditional contraceptive medicine of plant origin</i>	
Latin American Population Sciences Network [1988—\$1,200,000]	
<i>To expand training, research, and intraregional collaboration in reproductive biomedicine and family planning in Latin America (Grants will be made in subsequent years.)</i>	
Marine Biological Laboratory, Woods Hole, Massachusetts	100,000
<i>In support of its course in embryology</i>	
Oregon State University, Corvallis, Oregon	43,940
<i>For a study of the mechanism of attachment of very early embryos to the maternal uterine lining</i>	
Panos Institute, Alexandria, Virginia	23,000
<i>To prepare an introductory dossier on biotechnology and sustainable development for distribution in developing countries (Joint grant with Agricultural Sciences, Health Sciences, and Special Programming, for a total of \$92,000.)</i>	
Population Council, New York, New York	
<i>For study of a sperm immobilizing factor found in human serum</i>	
	50,000
<i>For research on human antizperm antibodies and the development of an antifertility vaccine</i>	
	40,000
<i>For research on a potential contraceptive vaccine based on beta-hCG synthesized in bacteria</i>	
	35,000

Screenshot / The Rockefeller Foundation 1988 Annual Report, pg. 56

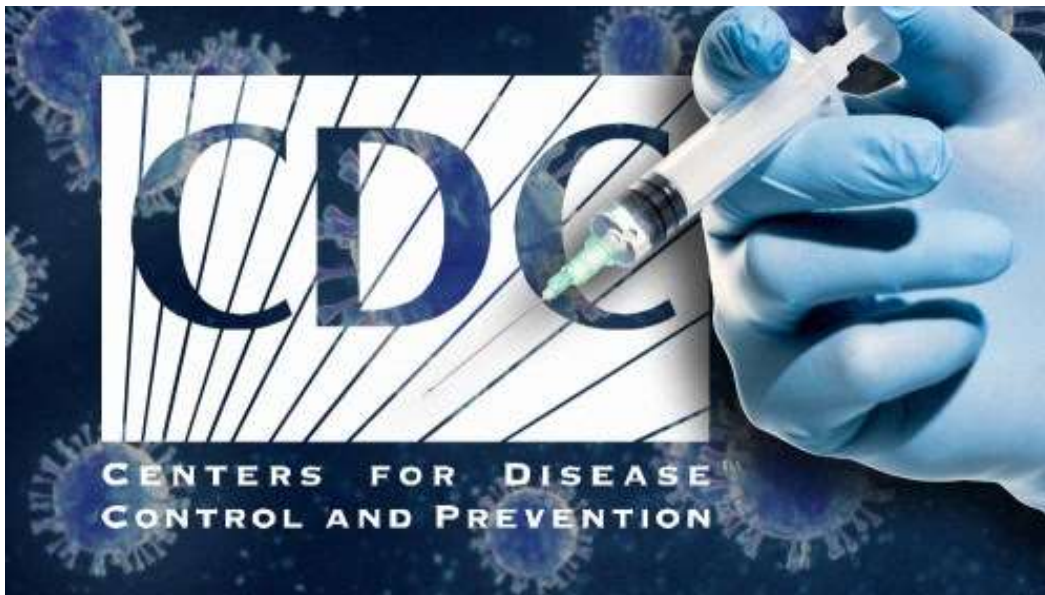
As [signs continue](#) to point to an [end](#) of the [current pandemic](#), Gates' Tuesday proclamation of future [catastrophic pandemics](#) is just one of many he's made over the years as he funds and orchestrates global exercises to prepare vaccines for them. At the 2017 Munich

Security Conference in Germany, he warned the world about a potential catastrophe, [predicting](#):

“Whether it occurs by a quirk of nature or at the hand of a terrorist, epidemiologists say a fast-moving airborne pathogen could kill more than 30 million people in less than a year. And they say there is a reasonable probability the world will experience such an outbreak in the next 10 to 15 years.”

Health officials continue to push for mass vaccination despite VAERS being overwhelmed with reports of vaccine-related deaths

NaturalNews.com / Mary Villareal



[\(Natural News\)](#) The Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration's (FDA) Vaccine Adverse Effects Reporting System (VAERS) has received over 23,000 reports of deaths associated with the Wuhan coronavirus (COVID-19) vaccines, yet public health authorities still refuse to halt the mass vaccination campaign.

Dr. Rochelle Walensky and Dr. Anthony Fauci are still pushing the narrative that nobody had died or suffered [severe adverse effects from the vaccine](#), despite the doses being experimental. In a Senate hearing, Walensky and Fauci both dodged direct questions about the number of deaths and injuries attributed to COVID vaccines and undermined the validity of the VAERS data in the process.

Moreover, “fact-checkers” continue to cite the CDC, saying it cannot prove that any of the deaths recorded were caused by the vaccines. To date, Walensky still has not fulfilled her promise to provide Americans with evidence-based estimates of the numbers.

During the past two years, data analyst Jessica Rose has been conducting a thorough

analysis of the data in VAERS, and according to her, the database was supposed to watch for safety signals that may have been missed during clinical trials. The data, when interpreted according to a standard method of determining causation by the *World Health Organization*, should signal a red alert.

“It’s not debatable that something is going on here,” she said.

Rose, who has a Ph.D. in computational biology and post-doctoral degrees in molecular biology and biochemistry, began specializing in pathogenic viruses, including HIV research, in a level 3 lab. She previously conducted epidemiological modeling after she earned a master’s degree in immunology and applied mathematics. She also acted as a postdoctoral researcher in biology at the Israel Institute of Technology for four years and is an independent data analyst and researcher.

Rose pointed out that over the past 30 years until 2021, the average number of adverse events reported annually for all vaccines combined was around 39,000, while the number of deaths was only about 140. But from December 2020 to early February, over [23,000 deaths associated with COVID-19 vaccines](#) have been reported to VAERS, and more than 10,000 of those occurred in the United States. During the same period, 127,855 hospitalizations and 1.1 million adverse events have been tied to COVID-19 vaccines. (Related: [Manipulating VAERS data through underreporting.](#))

Officials still dismiss validity of VAERS data

Yet, top public officials continue to dismiss the validity of VAERS data, arguing that many of them are junk or false data that have been entered into the system. The CDC even insists there is no way that one can say for sure the deaths reported to VAERS are caused by COVID-19 vaccines.

But Rose said it’s not sensible to say such a thing, considering that the reports are made in the context of specific products. She emphasized that VAERS has a “highly vetted data set” in which false entries are punishable, and duplicate reports are removed from the system.

Medical experts are well aware of the limitations of VAERS. Rather than taking each report at face value, regulators remove fraudulent reports. They also look for [reporting patterns that can be corroborated by additional evidence](#) to help researchers identify potential adverse events that are not detected in clinical trials.

Rose recently teamed up with epidemiologist and cardiologist Dr. Peter McCullough on a study of VAERS reports on myocarditis. They acknowledged that the percentage of the reported deaths and adverse events caused by the vaccines is unknown. Because of that, Rose said, it is all the more pressing that health officials find out the actual numbers. (Related: [Latest VAERS estimate: 388,000 Americans killed by the COVID vaccines.](#))

“And it’s really important for us to do this fast. Because the percentage of deaths caused by these products is high, then every day that we wait many people are dying,” she said.

Triple “Vaccinated” Deaths Skyrocketed 495% in January; 80% of All New Covid Cases Are Fully Jabbed

NoQ Report ^ | 15 February 2022 | Ethan Huff
Posted on 2/15/2022,

The plandemic of the “*fully vaccinated*” rages on as the latest data shows that the vast majority of hospitalizations and deaths from the Wuhan coronavirus (Covid-19) are occurring in people who took the jabs.

Public Health Scotland (PHS) is reporting that an astounding four out of every five covid hospitalizations and deaths are jabbed, meaning only 20 percent of hospitalizations and deaths blamed on covid are occurring in the unvaccinated.

According to the figures, cases were down overall in February compared to January. However, the bulk is still comprised of fully vaccinated individuals, including the triple-vaccinated.

The data shows that the latest “wave” of negative health outcomes is occurring in three-pricked people, a demographic in which the death rate soared by 495 percent in the month of January.

“The main difference between the two months is that the double vaccinated accounted for the majority of cases between 11th Dec and 8th Jan 22; recording 145,890 cases, but the triple vaccinated accounted for the majority of cases between 8th Jan and 4th Feb 22; recording 46,951 cases.”

The plandemic would already be over were it not for the “vaccines” It turns out that the case rate is dropping substantially among the unvaccinated while it continues to rise among the fully vaccinated, and especially among the fully-fully vaccinated who are getting three shots or more.

Between December 11 and January 7, the non-jabbed population accounted for just 15 percent of all new cases of the Fauci Flu. One month later from January 8 through February 4, that percentage dropped to less than 13 percent.

Meanwhile, the vaccinated population accounted for 85 percent of all new cases between December 11 and January 7, with just 9 percent of those cases occurring in the one-dose vaccinated. (Related: Cases of covid among the fully vaccinated in Taiwan are also way, way up.)

Thirty-two percent of all new cases in the vaccinated category occurred in the triple vaccinated while 59 percent occurred in the double vaccinated.

“But fast forward one month and we find that the vaccinated accounted for 87% of cases, with the one-dose vaccinated accounting for 4% of those cases, the double vaccinated

accounting for 33% of those cases, and the triple vaccinated accounting for 63% of those cases,” the Exposé further reported.

“This means that despite cases falling among all demographics they actually fell the most among the not vaccinated, single vaccinated, and double vaccinated, with the lowest drop coming in the triple vaccinated. This doesn’t make sense if the Covid-19 vaccines are effective. Clearly they are not, at least when it comes to preventing infection.”

.....
Since percentages are often misleading or confusion, I will simplify what **495%** means in round numbers. If 1,000 people died in a specific month, year after year, a **495%** increase means **3,950 additional** people died from unexplained causes that spiked the data. This kind of data analysis is what actuaries’ use to set insurance premiums. All governmental agencies, public health service, Social Security, and a lot of other activity: Las Vegas sports betting, etc.
.....

FRONT PAGE HEALTH WND NEWS CENTER WND (World Net Daily)

'It's the jab': Top insurance companies report spike in excess deaths. *“You can debate why; I know why, you know why”*

By Art Moore

Published February 17, 2022 at 8:07pm

In January, the CEO of a major Midwest insurance company disclosed in a virtual Chamber of Commerce meeting that his company had seen a 40% increase in all-cause deaths in the last half of 2021, describing it as four times higher than a once-in-200 years event.

That startling rise came as the daily number of deaths from COVID-19 was less than half of what it was the previous year, suggesting the vaccines are the most likely cause.

The CEO, Scott Davison of OneAmerica, said he found the data to be *“consistent across every player in that business.”*

Now, a former Blackrock portfolio manager, Edward Dowd, has followed up by compiling fourth quarter death claims data from major insurance firms.

“Bottom line is, they saw an acceleration in mortality in the second half of 2021, OK. Given the 'miracle vaccines,' that should not have occurred,” said Dowd in a podcast interview with Kristi Leigh.

Dowd cited fourth quarter rises in death claims, compared to the 2019 rate, of 57% for Lincoln National, **41%** for Prudential, **32%** for Hartford, **24%** for MetLife and **21%** for RGA.

He pointed out insurance companies *"make their money giving whole life policies because they can predict death rates, which are pretty steady."*

Referring to the backtracking on Davison's statement last month, Dowd said they can "retract" it "all they want."

Do insurance companies understand the cause behind the spike in deaths?

"That doesn't matter. It doesn't matter what they say. Deaths are rising. Now, you can debate why. I know why. You know why."

Dowd said the Dutch insurer AEGON saw a **268%** increase in claims in the U.S. in the third quarter.

The company, he said, *"did a reinsurance deal for a high face amount individual policies, at what looked like very bad economics for them."*

In a conference call, Dowd noted, an analyst asked why they would do that deal.

"I can speculate why they did this deal. This deal looks bad now, but a year or two from now it may look like a genius move. And they actually think there's going to be 300,000 excess deaths due to — they call it 'Covid and indirect Covid,' whatever that means — in the U.S. in 2022. So they actually raised their expectations for mortality in the U.S. during the conference call."

"So they're not saying it's the jab, but it's the jab."

Earlier this month, Dowd told Steve Bannon on the "War Room" broadcast that if Pfizer and FDA refuse to release vaccine trial data, he will assume there was fraud.

It was reported early in February, 2022 that 4.5 billion people around the world have had received the 2 jab vaxx, the statistical projections suggest a "Depopulation" of a minimum of 2 billion people. **2 billion people will die in 2022 and 2023.**

(NaturalHealth365) National Institute of Allergy and Infectious Diseases (NIAID) director and United States White House medical advisor, Dr. Anthony Fauci, has been accused of funding and pursuing dangerous gain-of-function research on bat coronaviruses in Wuhan, China, even after U.S. government officials attempted to shut the research down. Now, he and his ilk are being accused of committing crimes against humanity. This is not news to us, and was reported when this series began and in other articles previous to this ongoing series.

The inclusions that are not declared by the manufacturers were the focus for this particular analysis, primarily graphene and carbon-related nanostructures in form of carbon or graphene composites, graphene in association with polyethylene glycol, graphene oxide, iron oxide compounds, and calcite.

The Four Vials

The analysis of all four vial contents identified objects that are similar and have been defined and illustrated within the report individually.

The Identified inclusions were:

1. Graphene nano ribbons coated with Polyethylene Glycol
2. Graphene Composite Form 1.
3. Graphene Composite Form 2.
4. Microcrystalline Calcite with Carbonaceous inclusions.
5. Graphene Nano Form with and without fluorescence
6. Graphene nano objects
7. Graphene nano scrolls

Moderna 01

The first sample that was evaluated was the Moderna 01 which was examined by Raman spectroscopy. The investigation clearly showed that all the inclusions within the vaccine have a strong carbon signal with confirmed graphene compositions of some representative forms.

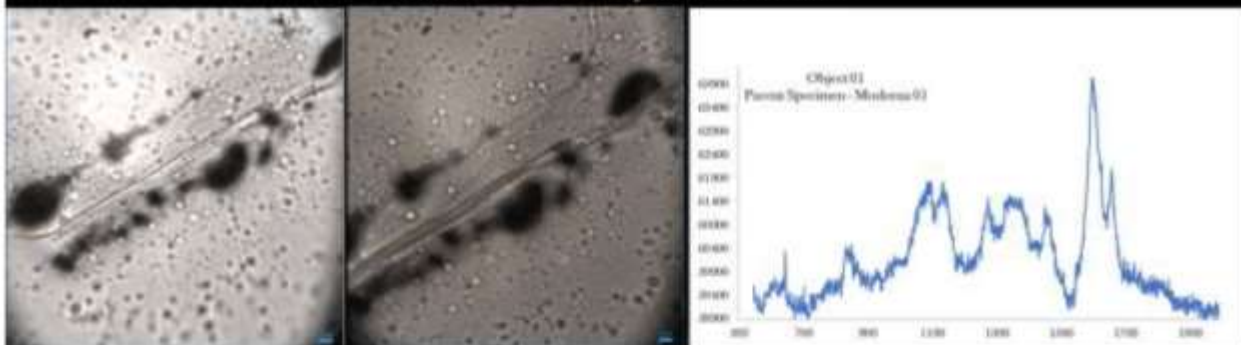
Two clear signals were obtained from two objects. The flat ribbon-like inclusions exhibited clear graphene spectra integrated with the spectrum of glycol and other minor compounds. The other clear signal was obtained from a calcite microcrystalline form and Carbon composite forms also had a clear graphene signal.

It is important to point out that some nano amorphous carbon forms showed a clear Graphene signal, however, these forms also exhibited fluorescence which masked the Graphene peak.

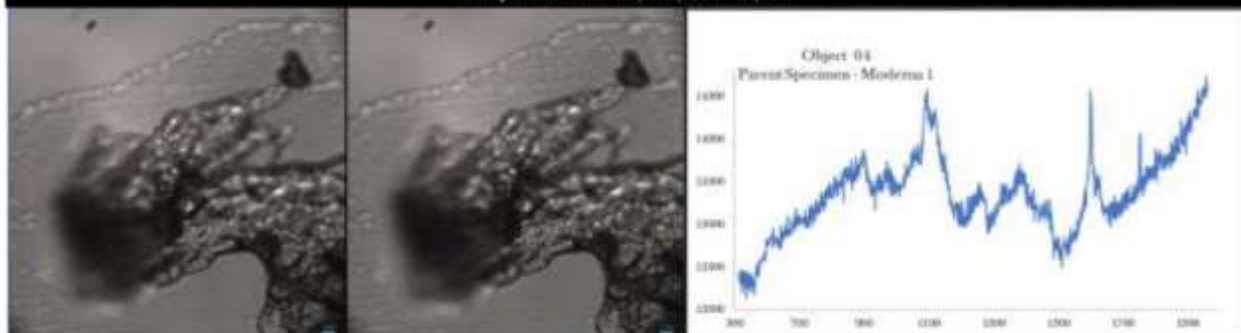
Moderna 02

Particles that carry the mRNA load were clearly seen and Graphene composite 01 was prominently present even at low resolution and Graphene Nano objects were present in "great abundance." within the vial sample.

MODERNA 1 Raman Spectra of the Inclusions



Graphene with Polyethylene Glycol

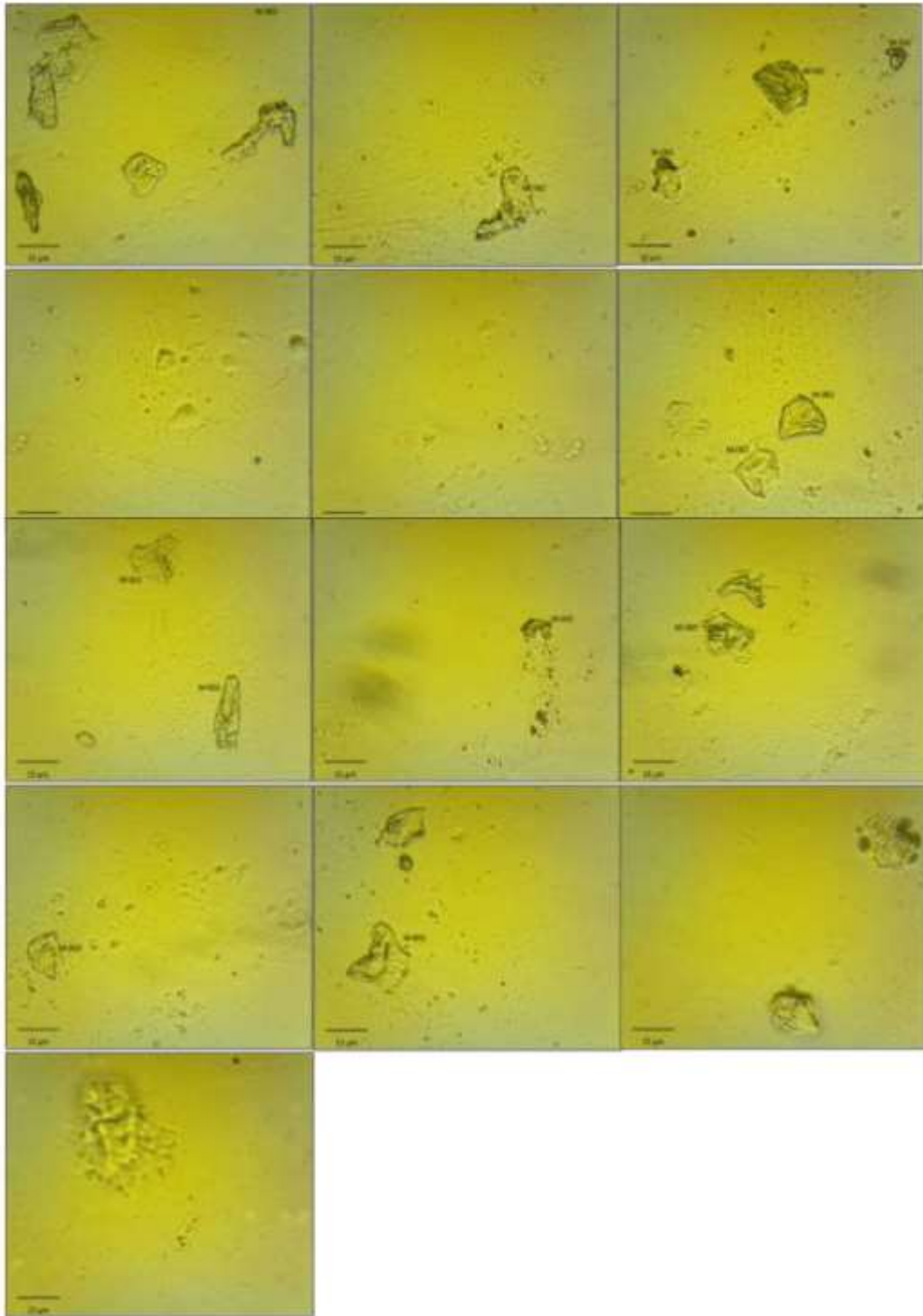


Carbon Composite 2



Calcite with Carbon

On higher magnification, the slide material seemed to abound in carbon-related forms. Figure 3.17 shows different shapes and forms that were noted along various transects across the slide. It is noteworthy, that the noted deposits are on three separate planes, with a significant difference in the depth of focus.



AstraZeneca

AstraZeneca was the third vaccine that was evaluated for its inclusion, and as it was almost transparent it made “spotting of inherent colors slightly easier”. Under wet microscopic observation, the solution exhibited instantaneous movement of nanoscopic particulate material which when observed closely seemed to be driven by convection current.

When dry, the particles exhibited traction movement. In figure, 3.21. the microscopic form is clearly visible as it is lying on top of the solid film while the nanoparticles are still in motion in the background as can be seen by the shifting position of the shadow. A clear output of this mechanism was that as the medium solidified, it became more difficult for the nanoparticles to navigate through the viscous material.

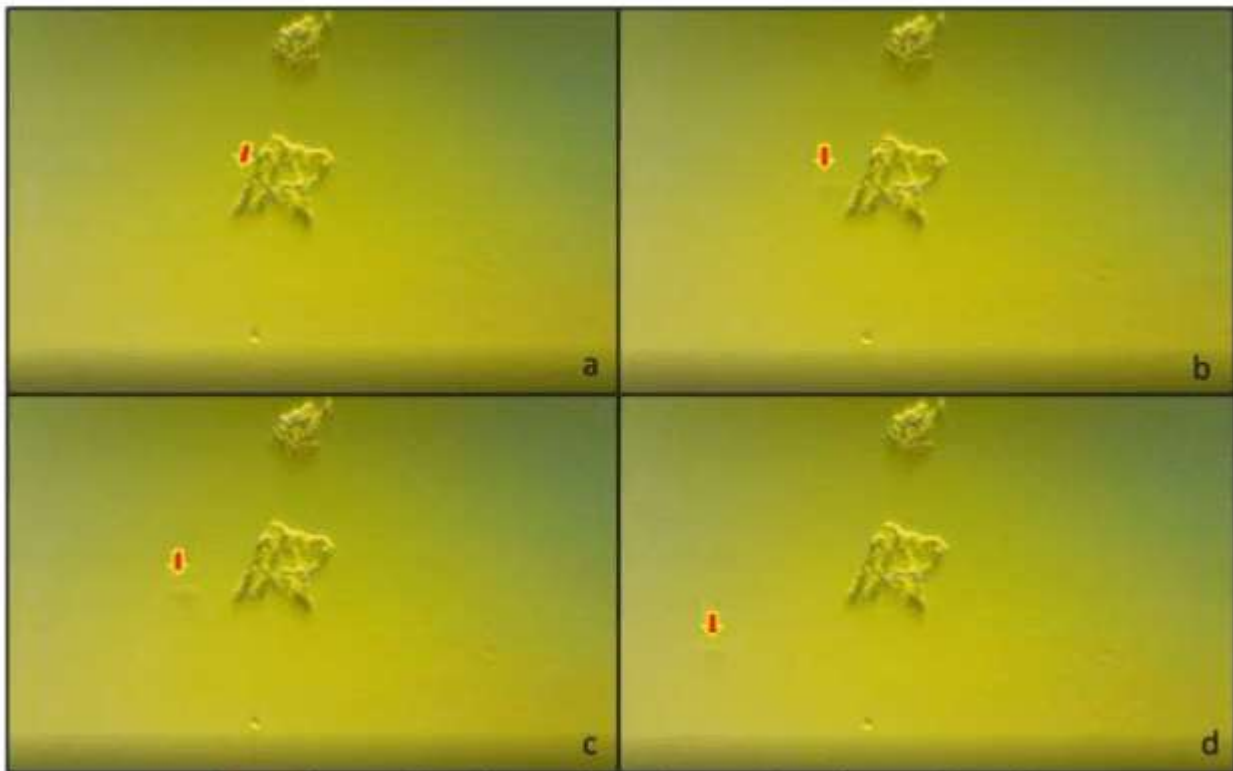


Figure 3.21. Lamellar convection columns with solidified top resulting in deposition of the flaky particle. The arrow points to the position of the nanoparticle in the deeper column of cooler material.

Confirmed inclusions within AstraZeneca were of the presence of Graphene in all the identified representative forms. The carbon composites are of two forms as they are in the Moderna vaccines. These two forms showed distinct graphene signatures. Also, besides Graphene the spectrum is dominated by iron oxide and other forms of carbon associations.

Pfizer

Pfizer was the fourth vaccine vial that was evaluated for its inclusions. The pipette specimen showed some extremely interesting inclusions. As the material was sucked into the pipette, distinct translucent to transparent sheets were seen floating about as seen in figure 3.28.

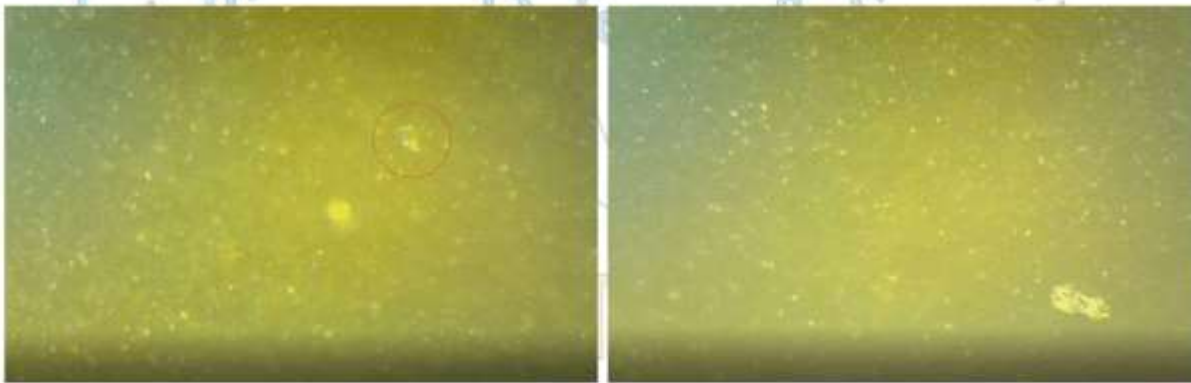


Figure 3.28. Floating lighter material. In the background, the golden sparkly particles are the future self-assembly nano particles that will encapsulate the mRNA.

The two objects of interest that were clearly noted to be floating about but could not be located once the slide had dried, were: (1) an extremely pointy transparent spicule like object (figure 3.30) and the other was a thin translucent perforated sheet (figure 3.31).

Where, both the objects are of interest to this study, the nature of the spicule remains vital for future work to identify.

As the solution was poured onto a slide for observation, the mixture exhibited the same nanoparticulate self assembly mechanism as was observed in both Moderna and AstraZeneca vaccines. As the material dried out, the inclusions settled at various depths depending upon their relative densities.

Figure 3.32 shows an assembly of various forms of inclusion that were identified within Pfizer.

These fall in the same category as mentioned in section 3.1.

Three of these samples showed carbon composite signatures with possible graphene in. The signals of amorphous carbon-like materials were extremely complex with carbon along with iron oxide and several other compounds in them.

Ribbon forms of nearly transparent microforms are found in fair numbers in the slide. These are often half embedded in the solution with one end projecting outside the material. The carbon composites of both form 1 and 2 also are present in great numbers. Form 1 settles on top of the material while form 2 is found at mid-levels of the solidified medium. Graphene nanoforms are present in fair numbers within the slide material along with some scrolls. Figure 3.32. Representative inclusions found within Pfizer vaccine.

The signals of amorphous carbon-like materials were extremely complex with carbon along with iron oxide and several other compounds in them. The graphene complex 1 is graphene with polyethylene glycol signal forming the bulk of the spectrum. Though, for initial assessments, this study can confirm the presence of graphene in Pfizer.

Notably, one of the samples that was shot, displayed a fair influence of fluorescence.

To Conclude

All three vaccines commonly employ the self-assembling lipid nanoparticles as drug delivery mechanisms. Where the central find of this project has been the confirmation of the presence of graphene in all four samples, it is important to evaluate this find in the context of the subject itself.

It is also important to mention, that the source of fluorescence within the samples was unknown while the investigations were underway, and due to tight timescales were not able to be investigated at the time.

Toxicology Report Summary

A summary of the findings detailed in the attached toxicology report is as follows:

- Graphene nanomaterials (GFNs) can penetrate the body's natural barriers and damage the central nervous system
- Graphene oxide (GO):
 - a. can damage internal organs
 - b. damages the reproduction and development system
 - c. destroys blood health
 - d. damages and destroys cells
 - e. can trigger cancer and accelerate ageing
 - f. damages mitochondria and DNA
 - g. triggers an inflammatory response and three different kinds of cell death
 - h. causes changes in gene function

An Open Access review highlighting the toxicity of the graphene family nanoparticles can be viewed [here](#).



Toxicity of graphene-family nanoparticles: a general review of the origins and mechanisms

Lingling Ou², Bin Song¹, Huimin Liang¹, Jia Liu¹, Xiaoli Feng¹, Bin Deng³, Ting Sun² and Longquan Shao^{1*}

Abstract

Due to their unique physicochemical properties, graphene-family nanomaterials (GFNs) are widely used in many fields, especially in biomedical applications. Currently, many studies have investigated the biocompatibility and toxicity of GFNs in vivo and in vitro. Generally, GFNs may exert different degrees of toxicity in animals or cell models by following with different administration routes and penetrating through physiological barriers, subsequently being distributed in tissues or located in cells, eventually being excreted out of the bodies. This review collects studies on the toxic effects of GFNs in several organs and cell models. We also point out that various factors determine the toxicity of GFNs including the lateral size, surface structure, functionalization, charge, impurities, aggregations, and corona effect etc. In addition, several typical mechanisms underlying GFN toxicity have been revealed, for instance, physical destruction, oxidative stress, DNA damage, inflammatory response, apoptosis, autophagy, and necrosis. In these mechanisms, (toll-like receptors-) TLR-, transforming growth factor β - (TGF- β -) and tumor necrosis factor alpha (TNF- α) dependent pathways are involved in the signalling pathway network, and oxidative stress plays a crucial role in these pathways. In this review, we summarize the available information on regulating factors and the mechanisms of GFNs toxicity, and propose some challenges and suggestions for further investigations of GFNs, with the aim of completing the toxicology mechanisms, and providing suggestions to improve the biological safety of GFNs and facilitate their wide application.

Keywords: Graphene-family nanomaterials, Toxicity, Toxicokinetics, Mechanisms, Physicochemical properties, Future prospects

Source

In conclusion, it can be stated that the four samples of vaccines (Moderna 1, Modern 2, AstraZeneca, Pfizer) all contain significant amount of carbon composites, graphene compounds, and iron oxide.

These ingredients were undeclared by the manufacturers and are absent from the list of ingredients for the vaccines. However, studies show how dangerous the Graphene family is, yet individuals have not been made aware that they are being injected with the deadly substance.

The lab report can be read in full [here](#).

This article originally appeared on [The Expose](#).

Nobel Prize-winning Virologist and Outspoken Critic of COVID Vaccine Mandates Dies at 89

February 10, 2022



Nobel Prize-winning virologist and outspoken critic of COVID vaccine mandates dies at 89

PATRICK DELANEY for LIFESITE NEWS

Dr. Luc Montagnier made headlines opposing the experimental COVID vaccination campaigns, the mandates for their reception, and was an early expert voice assessing the virus was the result of human manipulation.

PARIS ([LifeSiteNews](#)) — Dr. Luc Montagnier, the Nobel Prize winning biologist and virologist who sounded alarms regarding the SARS-CoV-2 virus, experimental vaccine campaigns, and the “indefensible” mandates for their reception, died yesterday at age 89.

As reported by [FranceSoir](#), the scientist and professor passed away in peace at the American Hospital of Paris in Neuilly-sur-Seine “surrounded by his children.”

Montagnier is best known for his **discovery of the human immunodeficiency virus (HIV)** for which he was awarded the [2008 Nobel Prize in Physiology or Medicine](#). Throughout his career, he worked in a variety of distinguished research and lecturing capacities at the Pasteur Institute in Paris, Queens College in New York, Shanghai Jiao Tong University in China, and the French National Centre for Scientific Research. He was also the [recipient](#) of dozens of awards — including the Hippocrates Award of the Hellenic Society for Internal Medicine — and 13 honorary doctorate degrees.

In the last two years, Dr. Montagnier made headlines challenging the dominant government and media narrative regarding the novel coronavirus and the massive experimental gene-based vaccines being imposed across the world as a response.

In April 2020, he came out and asserted that the **sequence of the SARS-CoV-2 virus indicated that it was the result of human manipulation and was released from the Wuhan laboratory.** After facing enormous ridicule from social media “fact-checkers,” including the theory’s being labeled as “false” for over a year, **evidence began to surface in May 2021 that, indeed, this assessment was correct.**

In fact, in June, emails obtained from a Freedom of Information Act request **emerged** that colleagues of White House medical czar **Dr. Anthony Fauci had informed him the previous year about “unusual features” of the virus that pointed to a possible man-made origin,** just prior to his public statements downplaying this assertion, until in May 2021 he acknowledged it may have validity.

Also in the spring of 2021, before the appearance of the Delta variant, **Dr. Montagnier granted an interview where he called the campaign of mass vaccination against the coronavirus during the pandemic “unthinkable” and a historical blunder that is “creating the variants” and leading to deaths from the disease.**

“It’s an enormous mistake, isn’t it? A scientific error as well as a medical error. It is an unacceptable mistake,” he said. “The history books will show that, because it is the vaccination that is creating the variants.”

And, finally, just last month, as the U.S. Supreme Court was in recess considering challenges to the Biden administration’s experimental COVID-19 injection mandates, Montagnier **wrote** an op-ed in ‘*The Wall Street Journal*’ with Yale law professor Jed Rubenfeld, declaring that the **Omicron variant had made all such “vaccine” requirements “legally indefensible and contrary to the public interest.”**

The Supreme Court **decided** to block Biden’s business vaccine mandate but allowed these requirements for government healthcare providers.

FranceSoir concluded that despite the significant criticism the French virologist endured in the autumn of his life, due to these interventions, he was always committed to the principles of free scientific inquiry and communication for which the publication expressed gratitude.

Nearly 24,000 Deaths After COVID Vaccines Reported to VAERS, Data Show

VAERS data released Friday by the Centers for Disease Control and Prevention included a total of **1,119,063 reports of adverse events** from all age groups following COVID vaccines, including **23,990 deaths** and **192,517 serious injuries** between Dec. 14, 2020, and Feb. 11, 2022.

By Megan Redshaw

Every Friday, VAERS publishes vaccine injury reports received as of a specified date. The Centers for Disease Control and Prevention (CDC) today released new data showing a total of 1,119,063 reports of adverse events following COVID vaccines were submitted between Dec. 14, 2020, and Feb. 11, 2022, to the Vaccine Adverse Event Reporting System (VAERS). VAERS is the primary government-funded system for reporting adverse vaccine reactions in the U.S.

The data included a total of 23,990 reports of deaths — an increase of 375 over the previous week — and 192,517 reports of serious injuries, including deaths, during the same time period — up 4,382 compared with the previous week.

Excluding “foreign reports” to VAERS, 760,102 adverse events, including 10,909 deaths and 79,111 serious injuries, were reported in the U.S. between Dec. 14, 2020, and Feb. 11, 2022.

Foreign reports are reports foreign subsidiaries send to U.S. vaccine manufacturers. Under U.S. Food and Drug Administration (FDA) regulations, if a manufacturer is notified of a foreign case report that describes an event that is both serious and does not appear on the product’s labeling, the manufacturer is required to submit the report to VAERS.

Of the 10,909 U.S. deaths reported as of Feb. 11, 18% occurred within 24 hours of vaccination, 23% occurred within 48 hours of vaccination and 60% occurred in people who experienced an onset of symptoms within 48 hours of being vaccinated.

In the U.S., 546 million COVID vaccine doses had been administered as of Feb. 11, including 321 million doses of Pfizer, 206 million doses of Moderna and 18 million doses of Johnson & Johnson (J&J).

From the 2/11/22 release of VAERS data

Every Friday, VAERS publishes vaccine injury reports received as of a specified date. Reports submitted to VAERS require further investigation before a causal relationship can be confirmed. Historically, VAERS has been shown to report only 1% of actual vaccine adverse events.

U.S. VAERS data from Dec. 14, 2020, to Feb. 11, 2022, for 5- to 11-year-olds show:

8,173 adverse events, including 179 rated as serious and 3 reported deaths.

The most recent death involves a 7-year-old girl (VAERS I.D. 1975356) from Minnesota who died 11 days after receiving her first dose of Pfizer’s COVID vaccine when she was found unresponsive by her mother. An autopsy is pending.

16 reports of myocarditis and pericarditis (heart inflammation).

29 reports of blood clotting disorders.

U.S. VAERS data from Dec. 14, 2020, to Feb. 11, 2022, for 12- to 17-year-olds show:

29,154 adverse events, including 1,675 rated as serious and 38 reported deaths.

The most recent deaths involve a 13-year-old male (VAERS I.D. 2042005) from an unidentified state who died from a sudden heart attack seven months after receiving his second dose of Moderna, and a 17-year-old female from an unidentified state (VAERS I.D. 2039111) who died after receiving her first dose of Moderna. Medical information was limited and it is unknown if an autopsy was performed in either case.

68 reports of anaphylaxis among 12- to 17-year-olds where the reaction was life-threatening, required treatment or resulted in death — with 96% of cases attributed to Pfizer's vaccine.

639 reports of myocarditis and pericarditis with 627 cases attributed to Pfizer's vaccine.

158 reports of blood clotting disorders, with all cases attributed to Pfizer.

U.S. VAERS data from Dec. 14, 2020, to Feb. 11, 2022, for all age groups combined, show:

19% of deaths were related to cardiac disorders.

54% of those who died were male, 41% were female and the remaining death reports did not include the gender of the deceased.

The average age of death was **72.7**.

As of Feb. 11, 5,086 pregnant women reported adverse events related to COVID vaccines, including 1,635 reports of miscarriage or premature birth.

Of the 3,557 cases of Bell's Palsy reported, 51% were attributed to Pfizer vaccinations, 40% to Moderna and 8% to J&J.

851 reports of Guillain-Barré syndrome (GBS), with 40% of cases attributed to Pfizer, 30% to Moderna and 28% to J&J.

2,323 reports of anaphylaxis where the reaction was life-threatening, required treatment or resulted in death.

1,592 reports of myocardial infarction.

13,102 reports of blood clotting disorders in the U.S. Of those, 5,846 reports were attributed to Pfizer, 4,670 reports to Moderna and 2,542 reports to J&J.

3,992 cases of myocarditis and pericarditis with 2,456 cases attributed to Pfizer, 1,335 cases to Moderna and 170 cases to J&J's COVID vaccine.

Pfizer and BioNTech Omicron-targeted COVID vaccine delayed.

Pfizer and BioNTech's new vaccine specific to the Omicron variant was delayed by several weeks due to a "slower-than-expected" data gathering process, Ugur Sahin, BioNTech's CEO said Thursday.

Once a new vaccine is ready the company said it will consider whether a variant-specific vaccine was still needed, Sahin said.

"If the wave ends, that does not mean it can't begin again," he said, adding BioNTech could create new vaccines as variants emerge.

"I really don't see the situation as dramatic anymore," Sahin said, referring to how the COVID would develop in future. Pfizer and BioNTech had originally planned to release a new vaccine by the end of March, but said it was dependent on how much clinical data regulators would require.

Autopsies show two teen boys died of heart inflammation caused by Pfizer vaccine

Pathologists who examined the autopsies of two teenage boys who died days after receiving Pfizer's COVID-19 vaccine concluded the vaccine caused the teens' deaths.

The three pathologists, two of whom are medical examiners, published their findings Feb. 14 in an early online release article, "Autopsy Histopathologic Cardiac Findings in Two Adolescents Following the Second COVID-19 Vaccine Dose," in the Archives of Pathology and Laboratory Medicine.

The authors' findings were conclusive. Two teenage boys were pronounced dead in their homes three and four days after receiving the second Pfizer-BioNTech COVID-19 dose.

There was no evidence of active or previous COVID-19 infection.

The teens had negative toxicology screens (i.e. no drugs or poisons were present in their bodies).

Autopsies of two teenage boys who died days after receiving Pfizer's COVID vaccine prove the vaccine caused their deaths.

Judge blocks Air Force from punishing officer who refused COVID vaccine for religious reasons

Federal judge Tillman E. Self III issued a preliminary injunction for an Air Force Reserve officer who was denied a religious exemption from the military's COVID vaccine mandate, calling the military's process for granting religious exemption "illusory and insincere."

The judge said the Air Force likely violated the officer's First Amendment rights when it denied her request for a religious exemption and subsequently appeal, and ordered the branch to refrain from taking *"any adverse action"* against the officer on the basis of "this

lawsuit or her request for religious accommodation, specifically including forcing her to retire.”

As of Feb. 8, the Air Force had only approved 3,313 vaccine exemptions, but they were granted for medical or nonreligious administrative reasons. At the time the unnamed officer filed her lawsuit on Jan. 6, the Air Force had not granted any religious accommodations.

To date, the Air Force has granted only nine religious exemptions, denied 3,665 requests and is still considering 3,288 requests — 142 active-duty airmen have been administratively separated for refusing the vaccine, the branch said in its COVID update last week.

Children’s Health Defense asks anyone who has experienced an adverse reaction, to any vaccine, to file a report following these three steps.

Complaint goes to court: Fauci, Pharma CEOs, and more accused of crimes against humanity before the ICC

Representing seven applicants on behalf of the British people, a United Kingdom legal team recently filed a complaint with the International Criminal Court (ICC) accusing major pandemic players of numerous Nuremberg Code violations, including [crimes against humanity](#) and **war crimes that range from suppressing early therapeutics to engaging in economic and psychological warfare** on U.K. citizens.

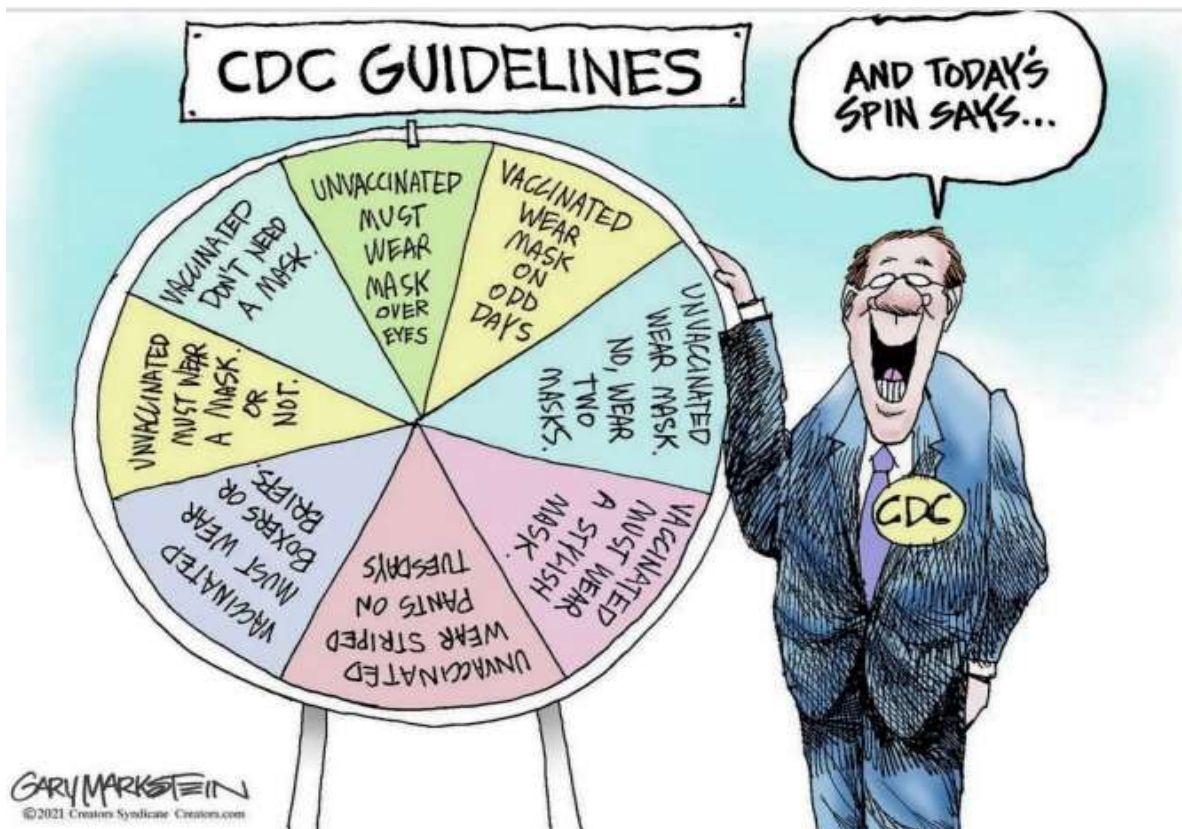
Dr. Michael Yeadon, one of the seven applicants and former vice president and chief scientist of allergy and respiratory research at Pfizer, has openly expressed his concern over the vax propaganda and mandate madness and announced his jaw-dropping belief that “[[COVID-19 booster shots](#)] are going to be used to damage your health and possibly kill you.”

All told, over a dozen individuals have been listed as defendants in the legal filing with the ICC:

1. Dr. Anthony Fauci, director of the NIAID
2. Dr. Peter Daszak, president of EcoHealth Alliance
3. Bill and Melinda Gates
4. Albert Bourla, CEO of Pfizer
5. Stephane Bancel, CEO of Moderna
6. Pascal Soriot, CEO of AstraZeneca
7. Alex Gorsky, CEO of Johnson & Johnson
8. Tedros Adhanom Ghebreyesus, director-general of the World Health Organization
9. Boris Johnson, U.K. prime minister
10. Christopher Whitty, U.K. chief medical adviser

11. Matthew Hancock, former U.K. secretary of state for Health and Social Care
12. June Raine, U.K. chief executive of Medicines and Healthcare products
13. Dr. Rajiv Shah, president of the Rockefeller Foundation
14. Klaus Schwab, president of the World Economic Forum

There's no question that anyone trying to bring legal action against these powerful figures will have the odds stacked against them. [Read here](#) to learn more about the ICC legal filing.



This Canadian FOIA request of Pfizer's own documents prove that the Covid-Jab is a bioweapon that has no medical benefit whatsoever. The only conclusion that can be made, in light of this bombshell information, is that governments are intentionally and knowingly committing Crimes Against Humanity against their own people.

Pfizer FOIA Proves Covid-Jab's a Cabbalist Jewish (Zionist) Bioweapon & Government Know They're Committing Genocide

Rumble — "The Covid-Jab will make Thalidomide look like a joke." The preponderance of evidence that has come to light now proves, without a shadow of a doubt, that governments the world over are committing genocide against their own people.

This Canadian FOIA request of Pfizer's own documents prove that the Covid-Jab is a bioweapon that has no medical benefit whatsoever. The only conclusion that can be made, in light of this bombshell information, is that governments are intentionally and knowingly committing Crimes Against Humanity against their own people.

Pfizer's documents prove that the intent of the Covid-Jab is to maim and kill, and that this is no longer speculation, but proven established fact."

<https://rumble.com/vtxdu-bombshell-pfizer-foia-proves-covid-jabs-a-bioweapon-and-government-know-the.html>

Mainstream scientists now embracing vaccine depopulation explanation for why the vaccines are killing so many people

01/12/2022 / By JD Heyes

A growing number of 'mainstream' scientists are coming to the conclusion that the COVID-19 vaccines, at least some of them, have actually been designed to depopulate the planet and rid the world of a growing number of dependents and those who are not strong enough to stand on their own and 'produce' for the globalist regime.

"After hearing the witness statements to the German Corona Investigative Committee by former vice president of Pfizer Dr. Mike Yeadon who has been a scientist for 36 years, lawyers with Reiner Füellmach draw the same conclusion: The injections normally called Corona vaccines are designed to experiment on the human race and to find out what dosage of a yet unknown toxin is needed in order to kill people," Free West Media [noted in a recent report](#).

Continuing, the outlet cited Yeadon, who noted that the rising mortality rates linked to the vaccines are directly linked to certain lot numbers on different batches, with some appearing to be more lethal than others. When looking at the body of evidence, it must be concluded that the vaccines, which have been shipped globally, are designed to [largely reduce the dependent population](#) consisting mostly of the infirmed and elderly, two demographics that are viewed as burdensome on societies, the lawyers involved in the analyses conclude.

Dr. Füellmach told *Perspektiv*, for instance, that the attorneys are preparing international legal action and no longer doubt what the objective has been all along, which is why globalist Western 'democracies' have been pushing vaccines so hard, as well as vaccine mandates: "Poisoning and mass murder through so-called Corona vaccines is intentionally being perpetrated against the peoples of the world," Free West Media added.

In an interview, journalist Ulf Bittner from EU/EES Healthcare blog and Sverige Granskas said that there are links between vaccine lot numbers that are traceable to injuries and deaths to regions of Sweden, according to the outlet, which added: "*Bittner*

is in contact with a vaccine coordinator who has provided documents to keep track of how many people have been injured and lost their lives related to the different batches of the so-called vaccines.”

Some highlights from the interview:

— Different barcode numbers from vaccine doses indicate that some are just placebos and that those have been administered to politicians so as not to harm them, according to a Slovenian nurse. “Is it the same in other countries?”

— Lot numbers for top vaccine manufacturers Moderna, Johnson & Johnson and BioNTech-Pfizer have much higher mortality rates than vaccines made by other pharmaceutical companies.

— Vaccine makers are currently still experimenting with doses to find out which ones are the most lethal, Dr. Füellmach stated, citing the Corona Investigative Committee. Those findings constitute evidence for massive punitive damages and charges of murder and attempted murder.

— Indian lawyers have already filed a case alleging premeditated murder.

— There is a concentrated smear campaign being waged against anyone of authority or knowledge who speaks out against the vaccines or any pandemic-related mandates and regulations. They are being labeled “right-wing extremists” and their reputations are being attacked in an effort to silence and/or discredit the opposition. That [includes former Pfizer VP Mike Yeadon](#).

— If the lawsuits are successful, then at least \$1 million per person will be demanded.

— Earlier in the pandemic, just 10 percent of adverse effects were being reported, but that figure has now fallen to around 1 percent, according to the experts.

— “Over the span of this past year there has been an excess mortality of 40 percent,” the CEO of a life insurance company in Indiana has testified, which is believed to be due to the vaccines.

— “Any vaccine is a poison, it is the dosage which makes the difference. This is not a vaccine, as a vaccine provides immunity, while these products demand incessant injections. Either a vaccine works or it does not,” the outlet reports, citing the interview.

Are Covid “Vaccines” a Biological Weapon Designed by the Synagogue of Satan for Ethnic Cleansing?

Thursday, February 03, 2022 by: Ethan Huff

This is by far one of the biggest issues of the century. Only a few have dared to touch the story for fear of being labeled anti-Semitic. This is Demonic and Satanic in scope!

[I have addressed this topic here several times in greater detail in the past few months, two on the “Ethno-Bomb” just a few weeks ago.] Link to: By admin on Thu, 01/27/2022 - 14:06

[Are COVID-19 Injections the “ethno-bomb” Israel Began Developing in the late 1990s? - Part 2](#)

By admin on Wed, 01/26/2022 [Are COVID-19 Injections the “ethno-bomb” Israel Began Developing in the late 1990s?](#)

This is the invisible Biblical story about Satan’s Stratagem to exterminate the blood line descendants of Abraham, Isaac, and Jacob.

(Natural News) There is [growing speculation](#) based on evidence from the past that so-called covid “vaccines” might be the manifestation of an alleged decades-old plot by Ashkenazi Jews to ethnically cleanse the world of Arabs and other outsiders.

Back in the late 1990s, ‘The Sunday Times’ (U.K.) reported that the modern-day nation of Israel, which was declared into existence on May 14, 1948, by then-World Zionist Organization head David Ben-Gurion, had supposedly been working on an “ethno-bomb” to target the state’s enemies.

This biological weapons program, the Nov. 15, 1998, report explained, citing Western intelligence sources, aimed to “*identify distinctive genes carried by Arabs to create a genetically-modified bacterium or virus.*” The way it was described back then sounds almost exactly like what we now know to be true about Wuhan coronavirus (Covid-19) injections:

“The intention is to use the ability of viruses and certain bacteria to alter the DNA inside their host’s living cells. The scientists are trying to engineer deadly micro-organisms that attack only those bearing the distinctive genes.”

Considering the fact that the covid plandemic is largely centered around a “testing” scheme that is really just [genetic harvesting in disguise](#), it is hardly a stretch to imagine that the horrific events of the past two years might actually be an ethnic cleansing operation under cover.

Since we also know that the jabs are a form of experimental gene therapy, it would also make sense that whatever they contain might have been designed to selectively target certain ethnic groups or lineages while protecting others.

At the time when The Sunday Times article was published, Bill Richardson, who served as Deputy Assistant to the Secretary of Defense in both the Reagan and H.W. Bush administrations, tried to “debunk” that Israel was working on an ethno-bomb program as described. In doing so, however, Richardson’s words actually confirmed that what we are seeing today probably is an ethno-bomb situation happening on a global scale.

“Even if an ethno-bomb were developed in a petri dish, there’s a long leap from having a mechanism to having an environmental viability, a weapon, or vector, or means of dissemination,” Richardson said.

Richardson’s use of the word vector is particularly interesting in light of the fact that both the Johnson & Johnson (Janssen) and AstraZeneca covid injections are viral vector shots. And the J&J shot actually uses what is known as Adenovirus 26 to deliver the modified DNA that instructs a person’s cells to produce spike proteins.

Pfizer CEO Albert Bourla was given an award for being one of the world’s “most influential and important Zionists”

It turns out that the ethno-bomb that Richardson claimed did not exist was at least attempted in South Africa back in the 1980s. The plan was to create and unleash an “ethnic bullet,” as it was also called, for research purposes in order to test out its viability for potential later expanded use.

Dr. Daan Goosen says that he and his colleagues were ordered at the time to develop a “pigmentation weapon” that targeted only black people. They discussed spreading it in beer, maize (corn) and vaccinations, though a UPI report claims that such a weapon was never actually developed – at least not at that time.

Fast-forward to today and what was described back then is eerily similar to what we are now seeing today with covid jabs, except on a global scale. Not only do governments everywhere insist that people get “tested” repeatedly, but they are also hell-bent on injecting every arm on the planet, using force if necessary.

Other biological weapons such as “immunogenic contraceptive” technology and “emerging infectious diseases” (i.e., Ebola and HIV) were also being developed and tested around the same time. None of these things existed prior to when they suddenly appeared as part of programs like “Project Coast,” for instance, which was another chemical and biological weapons program based in South Africa.

Today, one of the most aggressive jab-pushers is none other than Albert Bourla, the CEO of Pfizer. Bourla has repeatedly spoken about his “love of Israel” and about how his parents supposedly survived World War II. He was also given the Theodor Herzl award on Nov. 9, 2021, which is exclusively given to “the most influential and important Zionists in the world.”

Bourla, as [we reported](#), wants his company’s injections to be forced on everyone, including children. Anyone who resists, he infamously stated, should be regarded as a criminal.

Could it be that Pfizer’s mRNA shots were specifically designed to target certain racial groups while leaving others alone? Are these injections the modern-day equivalent of

King Herod's "Massacre of the Innocents" in which baby boys under the age of two were executed in an attempt to eradicate the true Hebrews?

Keep in mind that Bourla and others like him are fake Jews. The Biblical Jewish people descended from the tribe of Judah, but the Bourlas of the world are Ashkenazi impostors pushing political Zionism for profit with their Big Pharma *pharmakeia* (*sorcery*).

WARNING: 'Vaccine is Worse than We Feared, Could be Looking at Hundreds of Thousands More Dead'

People receiving the experimental injections appear to be much worse off than those who remain unvaccinated.

The number of Americans who have suffered serious side effects or died after receiving the mRNA injection billed as a "vaccine" is exploding. Furthermore, injected people seem to be much worse off than those who refuse the experimental jab. Yet, despite the "vaccine" and "boosters" not protecting people from Covid, and increasing the chances of infection from Omicron, left-wing governments worldwide continue to pressure and mandate citizens to receive them.

Terrifying 'Vaccine' Side Effects

One American News (OAN) reports that as of January 4, 2022, nine hundred and forty-six thousand Americans have experienced serious side effects or died after being injected. In addition, the U.S. Department of Health states that more than 100,000 Americans have been hospitalized after receiving the jab.

Those suffering from the injection's side effects are not just nameless figures on a page, reports OAN. For example, [Angelia Desselle](#) from Louisiana could barely stand after her shot and suffers from a neurological disorder that, according to doctors, is the result of the vaccine. Likewise, Shawn Skelton from Indiana has been debilitated and lost control of her body since the Pfizer shot.

Fully "vaccinated" Jummai Nache from Minnesota had to amputate her legs and hands after being vaccinated. 13-year-old Maddie de Garay from Ohio is paralyzed from the waist down, tube fed, and lost complete control of her bodily functions.

Health officials in Vietnam [suspended](#) the use of the Pfizer vaccine after over 120 children were hospitalized for severe reactions to the injections. In another nearby district, three children even died.

Safer To Be Unvaccinated?

According to the Vaccine Adverse Event Reporting System (VAERS) and the U.S. Centers for Disease Control and Prevention (CDC), just under **24,000 deaths** have occurred following the injections.

However, Columbia University [researchers report](#) that the actual number of people who have died due to getting one of the experimental injections is significantly higher than the official figures. Columbia's underreporting factor estimates that **20x times that number, or around 400,000 deaths, is far more accurate.**

Furthermore, former 'New York Times' reporter [Alex Berenson](#), reports the mRNA shots are now showing a strong negative efficacy. The injections are actually increasing individuals chances of infection from Omicron.

Children Dying

According to OAN, tens of thousands of people, including children, have also died following the vaccination. Thirteen-year-old [Jacob Clynick](#) of Michigan died in his sleep shortly after getting his second Pfizer shot. An 11-year-old girl from Georgia died shortly after her Pfizer vaccine. Also, a 5-year-old girl died four days after getting her first Pfizer shot. In addition, an 8-year-old girl suffered a stroke and a brain hemorrhage seven days after the Pfizer shot.

"We are now seeing the ramifications of this untested, unproven, and hastily developed vaccine, and it is much worse than we feared," said OAN's Pearson Sharp, "and this is just the beginning." He continued, "unless Americans and parents stand up to these unscientific mandates, we could be looking at hundreds of thousands more dead and permanently injured victims from the biggest experiment on human beings in history."



'Vaccine Mania': Fauci, Big Pharma Detail Plans for 'Indefinite' Rollout of Shots

At a virtual meeting held the first day of the World Economic Forum's Davos Agenda 2022, Moderna CEO Stéphane Bancel and colleagues, including Dr. Anthony Fauci, detailed their plans for "vaccine mania" to persist indefinitely.

By Dr. Joseph Mercola

Story at-a-glance:

- At a virtual meeting held the first day of the World Economic Forum's (WEF) Davos Agenda 2022, Moderna CEO Stéphane Bancel and colleagues, including Dr. Anthony Fauci, **detailed their plans for "vaccine mania" to persist indefinitely.**
- Moderna is actively working with "Fauci's team" to create a new shot for fall 2022. Moderna is also developing an Omicron-specific jab that they hope to release as early as March 2022.
- Moderna is planning to combine multiple shots, such as a COVID-19 shot, a flu shot and a respiratory syncytial virus (RSV) shot, into one injection — coming in 2023 — to help avoid "compliance issues."
- An agreement between Pfizer and BioNTech to develop the first mRNA shingles vaccine was reached in January 2022.
- Additional shots are in development to target HIV, zika virus, Nipah virus, cancer, respiratory syncytial virus (RSV), cytomegalovirus (CMV), Epstein-Barr virus, influenza (mRNA) and more.

Many experts have [sounded the alarm](#) that the [COVID-19](#) pandemic was all about the shot and a [larger agenda](#) to impose totalitarian control worldwide. Already, one shot has turned into two doses and a third [booster](#).

A [fourth booster](#) is also being discussed, including by [Moderna](#) CEO Stéphane Bancel, [who said](#) that the efficacy of the third shot is likely to decline over several months, necessitating another shot soon thereafter.

"I will be surprised when we get that data in the coming weeks that it's holding nicely over time — I would expect that it's not going to hold great," [Bancel said](#) in an interview with Goldman Sachs.

Conveniently, Moderna is working on an [Omicron](#)-specific jab that they hope to [release](#) as early as March 2022 — and this is only the beginning.

Writing on Substack, contributor [Eugyppius explained](#):

"Moderna, just one of multiple [pharmaceuticals](#) eager to exploit our new vaccine mania, are expanding their manufacturing capacity to produce as many as 6 billion mRNA vaccine doses per year."

The information came straight from the horse's mouth, at a virtual meeting held the first day of the World Economic Forum's (WEF) [Davos Agenda 2022](#), at a session titled ["COVID-19: What's Next?"](#)

Along with Bancel, the meeting was attended by [Dr. Anthony Fauci](#), director of the U.S. National Institute of Allergy and Infectious Diseases (NIAID), Richard Hatchett, CEO of the Coalition for Epidemic Preparedness Innovations, and professor Annelies Wilder-Smith from the London School of Hygiene and Tropical Medicine, who together detailed their plans for “vaccine mania” to persist indefinitely.

Combined shots planned to avoid ‘compliance issues’

During the discussion, Bancel states that Moderna is actively preparing for “*what should the vaccine be in the fall of 2022, and what should it contain.*” The company is “*working with public health experts like Fauci’s team to figure this out. Because soon we’re going to have to decide what goes into the vaccine for fall of 2022,*” he said [\(6:25\)](#).

Fauci’s NIAID is part of the U.S. National Institutes of Health (NIH), which, some may be surprised to learn, actually owns half the patent for Moderna’s COVID-19 injection.

In fact, the NIH owns thousands of pharmaceutical patents, and the U.S. Centers for Disease Control and Prevention spends \$4.9 billion a year out of its \$12 billion budget buying and distributing vaccines.

“Tony Fauci was able to choose, to designate, four of his high-level employees who each get individual patent shares,” [according to Robert F. Kennedy Jr.](#) in an interview with James Corbett. “They will collect \$150,000 a year for life if the Moderna vaccine is approved, which it has been.” [\(8:31\)](#)

In addition to working closely with Fauci, Moderna is planning to combine multiple shots, such as a COVID-19 shot, a [flu shot](#) and a respiratory syncytial virus (RSV) shot, into one injection — coming in 2023 — to help avoid “*compliance issues.*” [Fauci said:](#)

“The other piece we’re working on is for 2023, is how do we make it possible from a societal standpoint that people want to be vaccinated?”

“And we’re going to do this by preparing combinations, we’re working on the flu vaccine, we’re working on an RSV vaccine, and our goal is to be able to have a single annual booster, so that we don’t have compliance issues, where people don’t want to get two to three shots a winter, but they get one dose, where they get a booster for corona, and a booster for flu and RSV, to make sure that people get their vaccine.”

When asked how soon this would occur, he continued [\(7:20\)](#):

“So the RSV program is now in Phase 3, the flu program is in Phase 2 and soon in Phase 3, I hope as soon as second quarter of this year. So the best case scenario would be the fall of 2023, as a best case scenario, I don’t think it would [be available] in every country, but we believe it’s possible to operate in some countries next year.”

Vaccines for at least 20 pathogens in the works

SARS-Cov-2 isn't the only virus that Moderna and other pharmaceutical companies, along with health officials, are intent on targeting with more shots. Remember the zika virus, which Kennedy described as another pandemic fabricated for the purpose of selling pharmaceuticals and advancing totalitarian control? ([34:10](#)) There's a vaccine on the way for it.

How about Nipah virus? Nipah virus, a zoonotic pathogen for which no treatments exist, is the inspiration for the film "**Contagion**." The virus can only be experimented on in BSL-4 laboratories. As an aside, the National Bio and Agro-Defense Facility in Kansas will be the [first biocontainment facility](#) in the U.S. where research on Nipah (and Ebola) can be conducted on livestock.

In 2019, Nipah Malaysia was also among the deadly virus strains [shipped](#) from Canada's National Microbiology Lab to the Wuhan Institute of Virology. If you haven't heard of Nipah yet, you likely will soon — another vaccine is in the works for it. [Bancel said \(43.45\)](#):

"We're working with Dr. Fauci's team, we're working with Richard [Hatchett], to work on many more pathogens ... The entire scientific community has known for years that there's at least around 20-ish pathogens that are a risk for which we need vaccines, you know we have zika vaccine in Phase 2 ... we're working on a Nipah vaccine, those are viruses that not everybody has heard of.

"Because we need to have the data. What dose, what construct from a genetic standpoint is required ... so that if a new pathogen emerges from that family we can very quickly move into a Phase 3."

More mRNA shots are coming

Many other vaccines are also under development, including a Phase 3 study looking at combining [Pfizer's](#) COVID-19 injection with their [Pevnar 20™](#) (pneumococcal 20-valent conjugate vaccine) for adults aged 65 and older.

In a related news release, Kathrin U. Jansen, Ph.D., senior vice president and head of vaccine research and development at Pfizer spoke about the importance of "*raising awareness of the importance of adult*" vaccinations, echoing Bancel in their desire to create combination shots so adults can get multiple vaccines at one doctor or pharmacy visit.

"As the COVID-19 vaccines and booster doses continue to be administered, we believe that health care providers have an opportunity to talk to their adult patients about other recommended vaccines in line with CDC guidance," [she said](#).

An agreement between Pfizer and BioNTech to develop the first mRNA [shingles](#) vaccine was also [reached in January 2022](#). According to a [Pfizer news release](#):

“While there are currently approved vaccines for shingles, there is an opportunity to develop an improved vaccine that potentially shows high efficacy and better tolerability, and is more efficient to produce globally, by utilizing mRNA technology.”

A Phase 1 study by Moderna for its mRNA Epstein-Barr virus shot is also underway. The first dose of the experimental shot was given to a study subject Jan. 5. In a [news release](#), Moderna detailed their intent on rolling out additional mRNA vaccines against a number of additional viruses as well:

“The start of this Phase 1 study is a significant milestone as we continue to advance mRNA vaccines against latent viruses, which remain in the body for life after infection and can lead to chronic medical conditions. Moderna is committed to developing a portfolio of first-in-class vaccines against latent viruses for which there are no approved vaccines today, including vaccines against CMV [cytomegalovirus], EBV and HIV.”

“Our research team is working to bring even more vaccines against latent viruses to the clinic. We believe these vaccines could have a profound impact on quality of health for hundreds of millions of people around the world.”and make them richer and buy politician votes to make them mandatory for all to receive!

Other mRNA shots also in development include:

- An mRNA cancer vaccine for non-small cell lung cancer ([NSCLC](#)).
- mRNA influenza shots, which are under development by several companies, including Pfizer, Moderna, [Sanofi](#) and Translate Bio.
- An mRNA HIV vaccine, one of which is being studied by Moderna in collaboration with the NIH.
- Various additional mRNA cancer vaccines, including one targeting advanced melanoma — being [developed by BioNTech](#) and Regeneron Pharmaceuticals — and several being [developed by Moderna](#), targeting melanoma, NSCLC, colorectal cancer and pancreatic cancer.

Ramping up production for billions of doses

In case there were any doubts that the powers that be intend to use injections as an increasingly integral part of your health care routine and daily life, Bancel described plans for billions of doses of shots to be manufactured in a matter of months. [He said](#) during the WEF session ([43:45](#)):

“The other piece is manufacturing. If you look in 2020, we were able to ship 20 million doses to the U.S. government when the vaccine was authorized. That is not a lot.”

“But this year we’re going to have 2 to 3 billion doses of capacity in a six-month timeframe, which is what I believe it will take us to get authorization of a vaccine, if all the work has been done before ... you could have 1.5 billion doses available in six

months, and that's just from Moderna. And you have other platforms, it could be a much bigger number ..."

With censorship now so pervasive, and [Big Tech](#) colluding with dictators and pharmaceutical companies to bury the harms occurring through these experimental vaccines — including death — it's now more important than ever to let your voice be heard in support of medical freedom and opposition of government health officials intimidating, threatening and coercing citizens to violate their conscientiously-held beliefs.

The ethical principle of informed consent to medical risk taking, which includes the legal right to make voluntary decisions about getting experimental injections, must be protected. For now, however, as [Eugyppius explained](#):

"The vaccinators are a great sword of Damocles over our heads. As I type this, they are scouring the earth for the novel pathogens their products require, and they, together with their bureaucratic and academic allies, will do their level best to call into being new pandemic scares and vaccination campaigns whenever possible — perhaps every flu season."

What is a disease without a cause?

By Jon Rappoport February 4, 2022



A disease without a cause is called a business model. A

You make a list of symptoms. You say many people are experiencing this cluster of symptoms.

You give a label to this list of symptoms. A name. The name of a disease or a disorder or a syndrome.

Over time, through promotion, the name sticks.

Like the old fashion cold is now Covid-19.

If there's a name, a label, there is money in it.

You fund research to find the cause of the disease. This research can stretch out for a long time. Possibly forever. Example, Dr. Fauci's 40 year search for a cure for HIV:AIDS. He got the government to give him more than a half billion of your tax dollars In his HIV scandemic.

Meanwhile, you develop and sell drugs to treat the disease. Money.

You keep reporting "progress" on finding the cause. *"At first, we looked for environmental factors. But now we know the basis is almost certainly genetic. We're homing in on the specific genetic dysfunction..."*

Over time, what's forgotten is this: is there really a single disease with a single cause?

And think it through; if you can't verify a single cause, you don't have a disease. You just have the original list of symptoms.

Alzheimer's would be an example. Microcephaly (babies born with small heads and brain damage) would be another. The disease names seem to carry the day. *"Well, if there's a name, a label, there must be a unique disease."*

Wrong.

If there's a name, a label, there is money.

Money for research, for drug development, money from drug and vaccine sales.

Researchers are tasked with making the list of symptoms seem compelling. *"We've done brain studies. There are remarkable similarities among patients who have Disease X. As you can see from these scans, in Figure A..."*

Still, no dice. No verified cause. Therefore, no justification for using the disease label or claiming you have found a unique disease.

But it doesn't matter, because the business model is working well.

Here's another example. ADHD. Has a single cause been found for this list of symptoms? No. Therefore, there is no laboratory test for ADHD. No test to confirm the

diagnosis of ADHD. Because a test would detect the cause is present in the patient—and there is no cause to look for.

In fact, if you examine the complete catalog of all so-called mental disorders—about 300 of them—there is no defining lab test for ANY of them. Not a one. Each so-called disorder is simply a list of behaviors which have been clustered together by committees of psychiatrists and given a name. ADHD. Bipolar. Clinical depression. And so on.

But it doesn't matter. Because the business model is working. Money is pouring in. Drugs are selling.

Let's take this even further. A hundred years of Rockefeller medicine have "established" that there are thousands of separate and distinct and unique diseases, disorders, and syndromes. And each one has a cause. For many diseases, the cause *"hasn't been discovered yet."* Meaning: *"We're writing fiction. We have no justification for calling these diseases, diseases."*

The drugs and the vaccines are the \$\$\$ payoff

For many other diseases, researchers claim, the causes have been found. The most popular type of cause? A virus.

A virus that had never been seen before. A virus that was "discovered" in a lab.

A lab—as [I've discussed in depth](#)—that lets in no outsiders, no truly independent observers, to see, in detail, what's actually going on.

For that reason, and several others, there is no solid reason to believe these viruses, these causes are actually being discovered. Are actually real.

Which leaves us with thousands of lists of symptoms?

But there is always a business model. The full Rockefeller model is worth trillions of dollars. More dollars every day.

The drugs and the vaccines are the \$\$\$ payoff.

I've spent decades demonstrating their toxicity.

Here's a very interesting medical trick. A criminal trick. The researchers say a brain disorder called ABC exists but they haven't found the cause yet. A parent has a child with severe problems and takes him to the doctor. The doctor pronounces a diagnosis: *"Yes, your boy has ABC."*

"I think my son was damaged by the vaccine"

The parent goes away and does some research. The list of symptoms for ABC could be the result of a vaccine. In fact, the boy developed his severe problems quite soon after vaccination.

She goes back to the doctor and says, *"I think my son was damaged by the vaccine."*

The doctor says, *"That's impossible. Your boy is suffering from ABC. And you see, we've done studies of boys with ABC, and many of them were never vaccinated. So when you say the cause of your boy's ABC was a vaccine, we've ruled that out."*

The parent doesn't know what to do.

Of course, the trick is, ABC was never proved to be a unique disorder in the first place. It's really the NAME of an unproven disorder. The studies the doctor is referring to are completely irrelevant.

ABC is a disorder without a proven cause. Therefore, it is no disorder at all. It's just a list of symptoms.

The parent's boy has many of those symptoms. He acquired them—and the damage he suffered—from a vaccine. If you wanted to put a name to what the boy has, call it what it is: vaccine damage.

What is a disease without a cause? A business model

Not ABC.

Part of the business model for ABC is: *"We use that disease label so we can avoid having to pay out huge compensation-dollars for damage caused by a vaccine."*

If the impact of this trick isn't getting through to you, let me give you a grossly exaggerated analogy.

Engineers claim there is a phenomenon called River Floundering. It is unique but the cause hasn't yet been found. The basic symptom is: boats on rivers develop the propensity to sink.

Joe takes his boat out on a river. Overhead, a bridge collapses and destroys his boat. Joe barely escapes with his life. After six months, he emerges from the hospital and sues a number of parties.

But he loses his case. In court, experts testify that his boat was suffering from River Floundering. That's why it sank. Many studies of Floundering show bridges-collapsing did not occur when *"the sinking happened."* Therefore, the collapsing bridge was not the cause of Joe's boat's disorder, River Floundering.

What is a disease without a cause?

A business model.

Jon Rappoport is a medical journalist and has been a major commentator on how the Covid pandemic was hatched in 2019. Jon's articles are thought provoking and insightful to how the man on the street is exploited and made to feel good about it.



Avoid the Covid FREE test Kits if you want to remain Alive and “Unvaxxed!”

Two weeks ago the Biden administration was promoting the availability of FREE virus test kits to the public. The original order was to be for 500-million self or home test kits and two weeks ago, Biden or Arthur Roberts, Biden's double increased the order by an additional 500-million. Ask yourself why 1-billion test kits? On page 48 above, the government reported that 525.2-million doses of vaccines has been administered (307-

million of Pfizer; 200-million of Moderna; and 18-million of J&J. The Census Bureau reports the population of the U.S. at 331,499,000. The numbers do not make sense. It sounds like over kill to me [pun intended]! The Biden “free” test kits, you know they are exactly free, you pay for them on April 15th yearly, have been purchased from China, and this is of serious concern given what the original Chinese tests and face masks were found to have been laced with, or have you forgot?

IMPORTANT VIDEO BELOW

Mark Steele discusses the REAL reason for push to vaxx every person on the planet!
<https://seed177.bitchute.com/CL6NVTZ5Q3Yv/0DvpXsU70zD7.mp4>

Pfizer Trials: All Injected Mothers Lost Their Unborn Babies Pfizer trial documents reveal attempts to cover up the death of 100% of unborn babies in outcomes actually reported

By [Dr. Mark Trozzi](#) Global Research, January 28, 2022

Please recall our November 23, 2021 post titled [“The FDA and Pfizer are a Match Made in Hell”](#).

There we described how the FDA took only 108 days to approve Pfizer’s injection, but wanted 55 years to produce the documents!

Thankfully [Public Health and Medical Professionals for Transparency](#) filed a lawsuit after the FDA denied their request to expedite the release of the records, and the records are being released, albeit still too slowly.

Among the first reports handed over by Pfizer was a ‘Cumulative Analysis of Post-authorization Adverse Event Reports’ describing events reported to Pfizer up until February 2021. [You can download this entire report here.](#)

Look at table 6 from this Pfizer report. It is titled “Missing Information”. Its first heading under the topic “Missing Information” is “Use in pregnancy and lactation”. It includes this paragraph:

“Pregnancy outcomes for the 270 pregnancies were reported as spontaneous abortion (23), outcome pending (5), premature birth with neonatal death, spontaneous abortion with intrauterine death (2 each), spontaneous abortion with neonatal death, and normal outcome (1 each). No outcome was provided for 238 pregnancies (note that 2 different outcomes were reported for each twin, and both were counted).”

On the surface this states that of 270 pregnancies, there were 23 spontaneous abortions, 5 “outcomes pending”, 2 premature birth with neonatal death, 2 spontaneous abortions with intrauterine death, 1 spontaneous abortion with neonatal

death, and 1 normal outcome. But note also “no outcome was provided for 238 pregnancies”.

[FOIA Docs Reveal Pfizer Shot Caused Avalanche of Miscarriages, Stillborn Babies](#)

So really we have no idea what happened with 243 (5 + 238) of the pregnancies of these injected women; they have just not been included in the report. What we do know is that of 27 reported pregnancies (270 subtract 243), there are 28 dead babies! This appears to mean that someone was pregnant with twins and that 100% of the unborn babies died.

[Here is an excellent article by LifeSite News which goes into greater depth about these shocking revelations.](#) LifeSite News cuts Pfizer some slack on the 5 “outcomes pending” which creates the possible impression that 87.5% of the babies of the injected women died. With all respect to LifeSite, I feel correct in not counting the 5 “outcomes pending” and hence arrive at the conclusion that 100% of the unborn babies died in the injected women for whom results are presented.

The LifeSite News article also reveals deceptive number games in another article titled “Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine”, which was published in the ‘*New England Journal of Medicine*’ on December 31, 2020. These deceptive practices attempted to cover up the fact that in first trimester pregnancies, the Pfizer injection produced 82% miscarriages.

On January 12th we shared the [excellent analysis by the Canadian Covid Care Alliance](#) of this same “Safety and Efficacy” article from the ‘*New England Journal of Medicine*’. This Pfizer-friendly study is a complete sham; it is replete with misrepresentation and deceptive methods. The deception and truth is revealed in detail in this [video and article by the CCCA.](#)

Dr Trozzi’s brief and Dr Nagase’s excellent interview discussing this sham [article is here.](#)

They’re killing babies; what can we do?

These injections are criminal; period. Help us serve the [Cease and Desist Declaration of the World Council for Health](#), to any and all governments, clinics, hospitals, medical regulatory bodies, doctors, nurses, politicians, or anyone participating in any way in the manufacture, shipping, distribution, promotion, or administration of these injections. The message to anyone involved in these injection campaigns is “*Stop now. This is a crime. You will be criminally and civilly responsible. The cat is out of the bag. Justice is coming.*”

The [Declaration can also be found here](#) along with information and instructions for serving it.

Please keep photos and notes of to whom, when and where the declaration and notice is served. We are finalizing more resources on the World Council for Health web site to upload these photos and details. These resources will be fine tuned and [found here very soon.](#)

There are at least five million Canadians, and billions of global citizens who have resisted the injections. We, as well as many coerced injection victims who are waking up with buyer's remorse, must be the army that stops this, and return human rights and real health care to our society.

The original source of this article is [Dr. Trozzi](#)
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Blessings,

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