

Mass Murder

By Syringe Needle!
Part 60

Pastor Bob has been saying Covid-19 was a “bioweapon” since October of 2019. I have been unequivocal since October 31, 2019. Today, on April 11, 2022, Stew Peters host of the Stew Peters Show unveiled the premiere *“Watch the Water”* with Dr. Bryan Ardis. This 48-minute video is proof of how Covid-19 was created and disbursed through the public water system of some 400 public water systems in thirty major cities across the U.S. Although the video does not mention it, the “bioweapon” was disbursed through Chem-Trail aerial spraying day and night almost daily across the U.S. and smaller cities and rural areas. THIS IS A HUGE REVELATION by Dr. Bryan Ardis. Share the link to the video that exposes how our government planned to reduce the population through a “bioweapon” disguised as a virus.

This was a collaborative effort to “poison” millions of Americans and Dr. Bryan Ardis unveils a satanic diabolical plan to murder the citizens by its government and big pharma and how it was done under the guise of a rogue novel virus that attacked human respiratory systems. This is a shocking revelation of how the CDC, NIH, and FDA are compromised and that this is a Genocidal attack on the American public and cannot be trusted to be looking out for the public well-being. This crime against humanity can be confirmed through what I had stated in my recent article [Eugenics Depopulation Exposé! The “REAL” Story about Covid!](#) I posted it this past week on April 9th, 2022. Dr. Bryan Ardis video below should be viewed by every breathing American and they should demand that the government of the U.S. be held accountable for the murder death of millions that have already died and millions that will die in the next five years due to being poisoned by enzymes from lethal snakes.

STEW PETERS SHOW

World Premiere: Watch The Water (Full Movie)

The Stew Peters Show
BY STEW PETERS SHOW
APRIL 11, 2022

Catch every segment of the show at [StewPeters.com](#)
47:32 / 47:32

The plandemic continues, but its origins are still a nefarious mystery. How did the world get sick, how did Covid really spread, and did the Satanic elite tell the world about this bioweapon ahead of time? Dr. Bryan Ardis (www.ardisantidote.com) has unveiled a shocking connection between this pandemic and the eternal battle of good and evil which began in the Garden of Eden.

In this Stew Peters Network exclusive, Director Stew Peters, award-winning filmmaker Nicholas Stumphauer and Executive Producer Lauren Witzke bring to light a truth Satan himself has fought to suppress.

Visit <http://ardisantidote.com/> to learn how to protect you and your loved ones during this biological war.

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Will everyone who got “vaccinated” for COVID be dead by 2025?

Thursday, April 07, 2022 by: Ethan Huff



([Natural News](#)) Attorney Todd Callender, CEO of a large insurance group, is warning that excess mortality and “every kind of disease” is skyrocketing among the “fully vaccinated” for the Wuhan coronavirus (COVID-19).

Callender spoke via a video call about how excess mortality is up 84 percent while excess diseases are up 1,100 percent. In 2022 alone, he said, his company is expecting a 5,000 percent increase in deaths, compliments of Operation Warp Speed.

“I happen to be in the morbidity business,” Callender explained during the call. “I don’t think that it’s by coincidence, by the way, that Moderna has now just received licensure of their emergency use authorization HIV vaccine. So, they gave everybody AIDS, and here’s your salvation, another vaccine.”

Preliminary mortality data from the *Centers for Disease Control and Prevention* (CDC) from 2021 shows an expected death count of 2,948,273. In actuality, there were 3,447,405 deaths, meaning there were 499,132 excess deaths for the year.

With a 5,000 percent increase in excess deaths so far in 2022, Callender estimates that as many as 25,455,732 jabbed people in the United States could die just this year alone.

“Add to that the 2.95 million expected deaths, and the result is: 28,405,732 total deaths for 2022,” Hal Turner reported.

Did the DoD know about future mass COVID jab deaths back in 2015?

At this rate, assuming it continues on the current trajectory, everyone who got injected for the Chinese Flu will be dead by 2025. This was also forecasted in the population reduction charts that have been posted at the Deagel website for many years.

Before scrubbing the information, Deagel.com’s forecast for the U.S. population in 2025 is 100 million fewer people. For Germany during the same time period, there is expected to be 25 million fewer people.

“About one-third of Germany’s population remain unvaxxed,” Turner explained. “Today’s population is 83 million, so Deagel’s report may be quite accurate.”

Since Deagel has been around since 2015, the Department of Defense (DoD) guy who runs it appears to have known since at least that far back that there was going to be a *plandemic*, and that many, if not all, of the people who got “vaccinated” for it will soon die.

“Deagel has always had the forecast at the year 2025,” Turner said. *“The numbers may have fluctuated but the date never did.”*

We also [now know](#) that Big Pharma and the *Food and Drug Administration* (FDA) have known for at least the past year-and-a-half – and likely long before that – that the COVID-19 “vaccines” damage the immune system and trigger antibody-dependent enhancement (ADE).

In essence, the jabbed now have vaccine-induced AIDS (VAIDS) and could succumb to a deadly cytokine storm (ADE) at any moment. For some, this has already happened and they are now chronically ill or deceased. For the rest, well, time will certainly tell what becomes of them.

“Fifteen fully vaxxed and boosted professional tennis players had to withdraw from the Miami Open this week because of chest pains,” wrote a reader at ‘Natural News’. *“You draw your own conclusions.”*

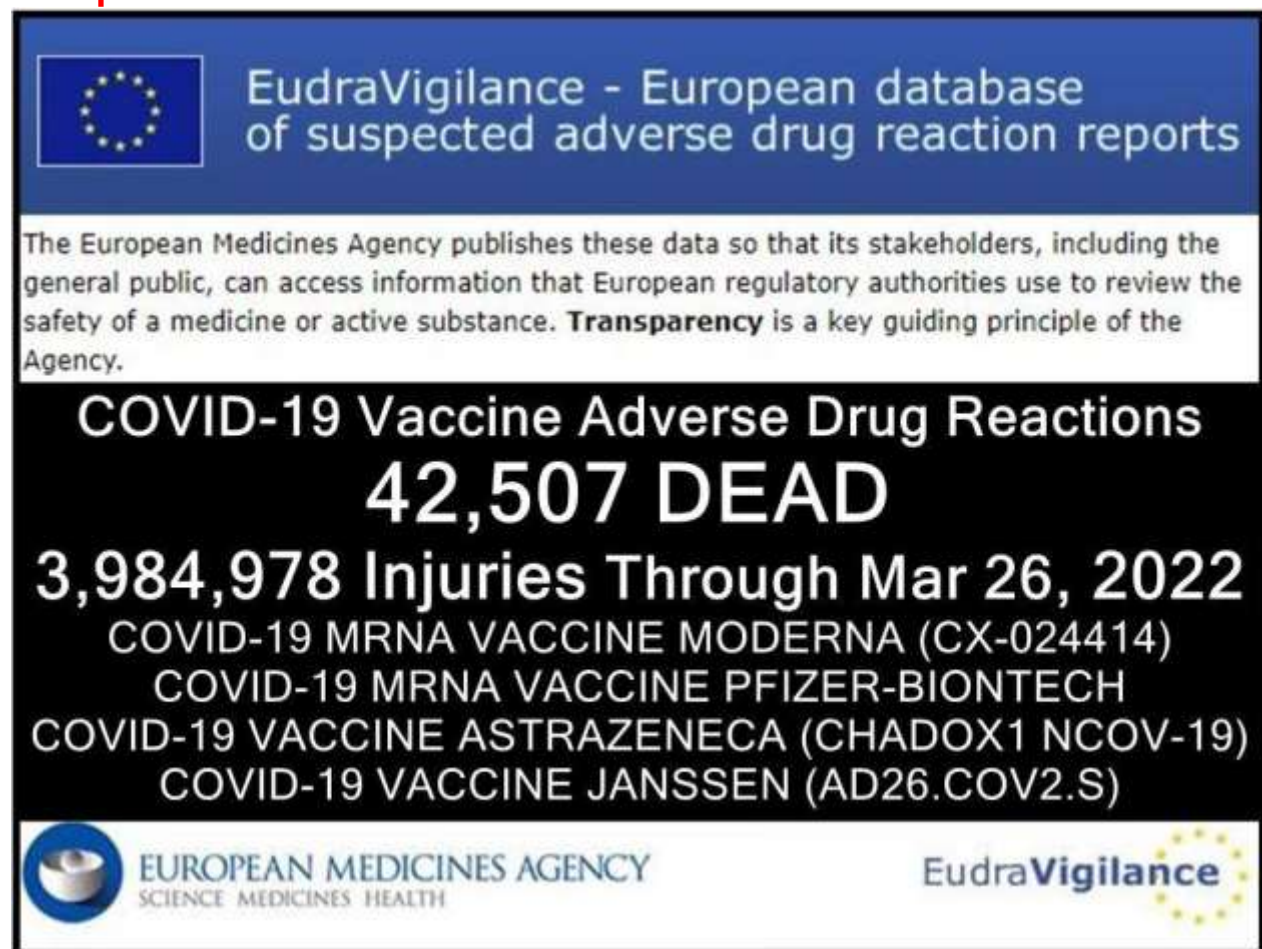
“99.9% people do more research for a used car than any vaccine they may take,” wrote another. “A pro vaxxer is most of the time someone has done zero research.”

“Vaccines have historically been soft-kill bioweapons wrapped in the ‘Hegelian dialectic’ as ... ‘mankind’s greatest achievement,’” added someone else. “Vaccines certainly have been the predator class ‘greatest achievement’ to #1 dupe the sheep class into poisoning themselves especially their own children, and second, make the SICK industry rich and more powerful beyond their own wildest dreams.”

Here’s the full interview with Todd Callender, via Brighteon.com:

[Brighteon.com/338e937f-2fe0-4746-b7c5-db94d80760e7](https://www.brighteon.com/338e937f-2fe0-4746-b7c5-db94d80760e7)

42,507 DEAD 3,984,978 Injured Following COVID Vaccines in European Database of Adverse Reactions



The European Medicines Agency publishes these data so that its stakeholders, including the general public, can access information that European regulatory authorities use to review the safety of a medicine or active substance. **Transparency** is a key guiding principle of the Agency.

COVID-19 Vaccine Adverse Drug Reactions
42,507 DEAD
3,984,978 Injuries Through Mar 26, 2022
COVID-19 MRNA VACCINE MODERNA (CX-024414)
COVID-19 MRNA VACCINE PFIZER-BIONTECH
COVID-19 VACCINE ASTRAZENECA (CHADOX1 NCOV-19)
COVID-19 VACCINE JANSSEN (AD26.COV2.S)

EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EudraVigilance

by Brian Shilhavy Editor, Health Impact News

You Cannot Boost Your Way Through COVID

Analysis by Dr. Joseph Mercola Fact Checked

STORY AT-A-GLANCE

- A preprint study posted April 3, 2022, reports high rates of infection with BA.1, BA.1.1 and BA.2 — variants of Omicron — among triple-jabbed health care workers. In all, the incidence rate among the triple-jabbed with one of these variants was 22%, and only 10% remained asymptomatic.
- March 29, 2022, the U.S. Food and Drug Administration authorized a second booster (dose No. 4, for those taking Pfizer or Moderna) for adults over age 50, as well as a third booster (dose No. 5) for immunocompromised people aged 12 and older. The additional boosters are to be given four months after the last dose
- The U.S. Centers for Disease Control and Prevention is also recommending adults who have received two doses of Janssen’s viral vector DNA shot to get a third shot using either Pfizer or Moderna, despite there being no data on the safety or effectiveness of mixing the various shots.
- FDA authorized doses 4 and 5, without input from its expert voting panel, based on data showing the Moderna shot was only 11% effective, and caused side effects in 40% of recipients, and the Pfizer shot was 30% effective and caused side effects in 80% of people.
- The lead author of that paper, Dr. Gili Regev-Yochay, an infectious disease specialist at Sheba Medical Center in Tel HaShomer, Israel, has publicly stated that “Not a third dose, not a fourth dose, not a fifth dose will do anything to stop infections [long-term]”.

That the mRNA-based COVID shot is not a real vaccine is evidenced by the sheer number of “boosters” required to keep COVID-19 at bay. When the injections were released at the beginning of 2021, the promises flowed.

Getting the two-dose regimen was said to be 95% effective and would keep you safe from serious infection. If everyone would just roll up their sleeves and get the jab, the pandemic would be over in no time. By mid-July 2021, just over half the adult U.S. population had received the shot. (Specifically, 56% had received one dose, and 49% were fully vaccinated with two doses.¹)

Well, before the year was over, reality started setting in, as effectiveness waned^{2,3,4} far more rapidly than anyone expected. What’s worse, the shot actually increased the infectivity of the Delta variant,⁵ and toward the latter part of 2021, hospitals around the world were starting to fill up with “vaccinated” COVID patients.^{6,7,8}

A preprint study,⁹ posted April 3, 2022, also reports high rates of infection with BA.1, BA.1.1 and BA.2 — variants of Omicron — among triple-jabbed health care workers. In all, the incidence rate among the triple-jabbed with one of these variants was 22%, and only 10% remained asymptomatic. As concluded by the authors:

“We report high incidence of omicron infections despite recent booster vaccination in triple vaccinated individuals. Vaccine-induced antibody titres seem to play a limited role in risk of omicron infection. High viral load and secretion of live virus for up to nine days may increase transmission in a triple vaccinated population.”

FDA Authorizes Fourth and Fifth Doses

In mid-August 2021 — just eight months into the COVID jab campaign — the U.S. Food and Drug Administration authorized the first booster (the third dose of mRNA), starting with the immunocompromised.¹⁰

Then, March 29, 2022, the FDA cleared a second booster (dose No. 4, for those taking Pfizer or Moderna) for adults over age 50, as well as a third booster (dose No. 5!) for the immunocompromised aged 12 and older.^{11,12} The additional boosters are to be given four months after the last dose.

The U.S. Centers for Disease Control and Prevention is also recommending adults who have received two doses of Janssen’s viral vector DNA shot to get a third shot using either Pfizer or Moderna.¹³ This despite there being ZERO data on mixing the various shots.

FDA authorized doses 4 and 5 based on data showing the Moderna shot was only 11% effective, and causing side effects in 40% of recipients, and the Pfizer shot was 30% effective and caused side effects in 80% of people.

So, in a little over one year, we’ve gone from “two mRNA jabs will ensure you won’t carry the virus or get sick or die of COVID” to “you need a booster every four months and you can still contract, transmit, get sick and die of COVID.” At this rate, we’re looking at three injections per year, and the fully-jabbed and boosted are still getting sick with COVID.

For example, we recently found out that 7 in 10 “vaccinated” CDC employees got breakthrough infections in August 2021,¹⁴ and Princess Cruises reported an outbreak onboard the Ruby Princess in March 2022, despite a 100% “vaccination” rate among both crew and passengers, plus proof of a negative COVID test prior to boarding.¹⁵ As noted by Robert F. Kennedy Jr. in the video above, *“it’s time to follow the science.”*

COVID Policy Has Nothing To Do With Science

Remarkably, the FDA made the decision to approve another booster without convening its expert voting committee, as is the norm. As noted by Dr. Marty Makary in a Wall Street Journal op-ed:¹⁶

“The Food and Drug Administration last week authorized Americans 50 and over to get a fourth COVID vaccine dose. Some of the FDA’s own experts disagree with the decision, but the agency simply ignored them.

It will convene its advisory committee this Wednesday [April 6, 2022] to discuss future vaccine needs. That's like having lawyers present arguments to a judge who's already issued a verdict ... Decisions like this only reinforce the perception that COVID policy is driven by groupthink and politics."

Even Dr. Paul Offit, whose faith in vaccines is legendary, expressed surprise and dismay at the FDA's decision to move forward without holding an open meeting to allow experts to comment on the data. He told CNBC:¹⁷

"It's just sort of fait accompli. So, is this the way it works? We talk endlessly about how we follow the science — it doesn't seem to work out that way."

Dr. Peter Hotez, another well-known vaccine pusher, has also expressed concern about the continued booster trend. He told CNBC that vaccine policy should not merely be based on keeping people out of the hospital, but should also seek to prevent COVID infection and "long COVID."

He pointed out that the effectiveness of the third dose against hospitalization from Omicron infection has been shown to decline from 91% to 78% in just four months. *"That gives me pause for concern that the boosters are not necessarily holding up as well as we'd like,"* he said. It is really hard to believe that both of these vaccine pushers are actually waking up and beginning to question the narrative.

FDA's Decision Based on Shockingly Bad Data

The FDA reportedly based its decision to authorize doses 4 and 5 on Israeli data posted on the preprint server medRxiv, February 15, 2022.^{18,19} What evidence was provided in this as yet non-peer-reviewed study that was compelling enough to circumvent the voting committee and public comment? According to the authors:

"Breakthrough infections were common, mostly very mild, yet, with high viral loads. Vaccine efficacy against infection was 30% and 11% for BNT162b2 [Pfizer] and mRNA1273 [Moderna], respectively. Local and systemic adverse reactions were reported in 80% and 40%, respectively."

This is worth repeating. FDA authorized doses 4 and 5 based on data showing the Moderna shot was only 11% effective, and caused side effects in 40% of recipients, and the Pfizer shot was 30% effective and caused side effects in 80% of people. I know, you are probably shaking your head, saying, "What?!" That's beyond astounding.

The FDA is charged with confirming that medical products are safe and effective. By authorizing the fourth and fifth COVID shots with abysmal effectiveness and sky-high adverse reaction rates they make it abundantly clear that that they are a completely captured agency and have completely abrogated their responsibility for public health.

The lead author of that paper, Dr. Gili Regev-Yochay, and infectious disease specialist at Sheba Medical Center in Tel HaShomer, Israel, has even publicly stated that "Not a

third dose, not a fourth dose, not a fifth dose will do anything to stop infections [long-term].”²⁰

Experts: We Cannot Boost Our Way Out of the COVID Pandemic
In an April 4, 2022, article, Forbes staff reporter Robert Hart writes:²¹

“While a fourth dose appears to be beneficial at preventing serious illness in older or high-risk people, Dr. Amesh Adalja, a senior scholar at the Johns Hopkins Center for Health Security, told Forbes that repeated boosting is not ‘a viable strategy’ and it’s not clear that younger groups without high-risk health conditions ‘benefit much from even third doses.’”

Professor Deepta Bhattacharya, an immunologist at the University of Arizona, agrees, saying the current strategy is “not sustainable.” Similarly, Dr. Dan Barouch, a physician and vaccine researcher at Harvard Medical School, told Hart that getting a booster shot every three to six months is impractical for wealthy countries and “simply not possible” in poorer ones.

What we really need, Barouch said, is “vaccines with better durability.” John P. Moore, professor of microbiology and immunology at Weill Cornell Medicine also weighed in, telling Hart he doesn’t think we can “simply boost our way out of the pandemic.”

Regions With Low COVID Jab Rates Have Fared Well

Adding to suspicions that the COVID jabs aren’t doing much of anything is the fact that areas with low injection rates, such as Africa, have fared no worse than those with very high rates.

As reported by The New York Times,^{22,23} the Kamakwie district in Sierra Leone has registered a total of just 11 COVID cases since the beginning of the pandemic, and no deaths. Sierra Leone, in total, has had just 125 COVID deaths since the pandemic was declared. This, despite gathering for large weddings, concerts and football matches without masks.

Bill and Melinda Gates went on record early on in the pandemic stating Africa would be destroyed by COVID unless we made a concerted effort to get the COVID jab to them.

Their greed-fueled prediction turned out to be completely false, and while the African Union has been pushing to reach a 70% injection rate in West and Central Africa, the low incidence of COVID has sparked arguments against continuing the injection campaign this year, as health care funds are needed for other far more common ailments, such as malaria, HIV/AIDS and tuberculosis.

Importantly, Africa wasn’t spared because SARS-CoV-2 didn’t sweep through it, because it did in spades. Studies looking at blood samples reveal two-thirds of the population in sub-Saharan countries have antibodies against SARS-CoV-2 — evidence

that they were exposed, recovered and developed the best protection possible — natural immunity.^{24,25}

Areas with more reliable death registries and other data collection, such as South Africa, do show excess deaths during 2020 and 2021, which are being attributed to COVID. But by the third quarter of 2021, only 4% of Africans had received the jab and, by and large, it seems they are far better off because of it.

As noted by Del Bigtree in the featured Highwire video, the shots have basically decimated the immune function of those who took them, and the FDA has no other plan or option now than to roll out a never-ending series of boosters to “top up” people’s immune defenses, even if it’s only to a slight degree. They have nothing else. The damage is done.

COVID Shots ‘Proven to Cause More Harm Than Good’

While the official narrative is that the COVID shots may be “less than perfect but still better than the alternative” (i.e., getting the infection when you’re unvaccinated), immunologist Dr. Bart Classen published a study²⁶ in the August 2021 issue of Trends in Internal Medicine, disputing this claim.

The study,²⁷ “U.S. COVID-19 Vaccines Proven to Cause More Harm than Good Based on Pivotal Clinical Trial Data Analyzed Using the Proper Scientific Endpoint, ‘All Cause Severe Morbidity,’” details a core problem with the Pfizer, Moderna and Janssen (Johnson & Johnson) trials.

All three employed a surrogate primary endpoint for health, namely “severe infections with COVID-19.” This, Classen says, “has been proven dangerously misleading,” and many fields of medicine have stopped using disease-specific endpoints in clinical trials and have adopted the far superior endpoint “all-cause mortality and morbidity”.

The reason for this is because if a person dies from the treatment or is severely injured by it, even if the treatment helped block the progression of the disease they’re being treated for, the end result is still a negative one. The COVID jab would fare very poorly using this metric.

To offer an extreme example of what you can do with a disease-specific endpoint, you could make the claim that shooting people in the head is a cure for cancer, because no one who got shot in the head died from cancer. When reanalyzing the clinical trial data from these COVID shots using “all-cause severe morbidity” as the primary endpoint, the data reveal they actually cause far more harm than good.

The proper endpoint was calculated by adding together all severe events reported in the trials, not just COVID-19 but also all other serious adverse events. By doing this, severe COVID-19 infection gets the same weight as other adverse events of equivalent severity. According to Classen:²⁸

“Results prove that none of the vaccines provide a health benefit and all pivotal trials show a statistically significant increase in ‘all cause severe morbidity’ in the vaccinated group compared to the placebo group.

The Moderna immunized group suffered 3,042 more severe events than the control group. The Pfizer data was grossly incomplete but data provided showed the vaccination group suffered 90 more severe events than the control group, when only including ‘unsolicited’ adverse events.

The Janssen immunized group suffered 264 more severe events than the control group. These findings contrast the manufacturers’ inappropriate surrogate endpoints:

Janssen claims that their vaccine prevents 6 cases of severe COVID-19 requiring medical attention out of 19,630 immunized; Pfizer claims their vaccine prevents 8 cases of severe COVID-19 out of 21,720 immunized; Moderna claims its vaccine prevents 30 cases of severe COVID-19 out of 15,210 immunized.

Based on this data it is all but a certainty that mass COVID-19 immunization is hurting the health of the population in general. Scientific principles dictate that the mass immunization with COVID-19 vaccines must be halted immediately because we face a looming vaccine induced public health catastrophe.”

To make the above numbers more clear and obvious, here are the prevention stats in percentages:

- Pfizer 0.00036%
- Moderna 0.00125%
- Janssen 0.00030%

We also have a cost-benefit analysis²⁹ by Stephanie Seneff, Ph.D., and researcher Kathy Dopp, published in March 2022, which shows the COVID jab increases children’s risk of dying from COVID infection. Children under 18 are also 51 times more likely to die from the jab than they are to die from COVID if not vaccinated.

Jamie Jenkins,³⁰ former head of health and labor market analysis at the British Office for National Statistics, has also revealed that 4 million doses must be administered to children, 5 to 11 years of age, to prevent a single ICU admission in this age group.³¹

Assuming two doses per child, that means 2 million children must take their chances with serious and potentially lifelong side effects to prevent a single child from requiring intensive care due to COVID-19.

But you may be relieved to know that at least the pharma companies will be earning tens of billions of dollars from this recommendation. The COVID jabs are, without a doubt, the most financially successful pharma product in the history of the world. And the icing on the cake? Everyone, from the manufacturer to the person who administers

the shot, has complete immunity from any prosecution for their nefarious plan to destroy the health of children.

Menstrual Problems Among Transgendered

One side effect that has made headlines in alternative media over the past year is abnormal bleeding and menstrual irregularities. For example, vaginal bleeding has been reported both in children who aren't old enough to begin menstruation and in post-menopausal women.

Now, an online survey by researchers at Washington University in St. Louis reveals transgendered people are also reporting breakthrough menstruation, despite being on menstruation-suppressing hormones. As reported by Newswise:³²

"The study is the first to examine vaccine-associated breakthrough bleeding in people who take testosterone or other hormones that suppress menstruation. The research focuses on individuals with a range of gender identities such as transgender, nonbinary or gender-fluid.

Previous studies of COVID-19 vaccine related menstrual symptoms have largely focused on cisgender (cis) women, those whose gender identity matches the female gender they were assigned at birth ...

Out of over 160,000 survey respondents, the researchers identified 552 people who said they used testosterone or other gender-affirming hormones and did not usually menstruate. Most of these respondents (84%) selected more than one gender category, with 460 identifying as transgender, 373 specifying man or man identified, 241 identifying as non-binary and 124 indicating they were genderqueer/gender non-conforming.

One-third of these respondents reported breakthrough bleeding after receiving a COVID-19 vaccine, 9% reported chest or breast soreness and 46% reported having other symptoms they would usually associate with a period, such as cramping and bloating.

Some respondents used the survey's open-ended text boxes to report significant negative mental health impacts in response to their period symptoms, including anxiety, depression, gender dysphoria, panic attacks and suicidal ideation ...

'I hope that discussing these findings openly allows people to know that this could be a side effect so they can prepare appropriately,' said [lead author Katharine] Lee.

'This is especially important given the fact that some people described mental health outcomes like anxiety, depression and suicidal ideation as responses to unexpected breakthrough bleeding after vaccination.'

Dr. Bryan Ardis: “COVID-19 is not a virus – people die by being given a snake venom.”

APR 13

Posted by Editor, cairnsnews

DR. BRYAN ARDIS – WATCH THE WATER – STEW PETERS – APR 12, 2022

from Han Barkmeyer

The Plandemic continues, but its origins are still a nefarious mystery. How did the world get sick, how did Covid really spread, and did the Satanic elite tell the world about this bioweapon ahead of time? Dr. Bryan Ardis (www.ardisantidote.com) has unveiled a shocking connection between this pandemic and the eternal battle of good and evil which began in the Garden of Eden.



mRNA spike protein is Cobra venom

Last December, Dr. Bryan Ardis received a text message from an Emergency Room physician friend of his that sent him down an unexpected and bizarre rabbit hole that may explain the adverse events from the vaccines that we've been reporting. The text read: *“Hey Dr. Ardis...If you got bit by a rattlesnake, would you go to a hospital and get anti-venom?”*

Bryan had no idea what this meant and he immediately set about researching snake anti-venom. He discovered that most are either monoclonal- or polyclonal antibody treatments – just like the monoclonal antibodies that the Useless CDC just removed as a COVID treatment, in favor of Remdesevir, which is almost guaranteed to kill you but which is now nonetheless the ONLY government-approved treatment for infants and children with COVID in the US.

He says, *“I realized, all of a sudden, monoclonal antibodies ARE anti-venom. The Federal Government doesn't want us using anti-venom. Why are they fighting anti-venom and why are we finding anti-venom works against COVID? Is it not a virus? Is it a venom? This is what I want to know: Is COVID a venom and is this why they don't want you using monoclonal antibodies?”*

Bryan checked the publications saying that the original source of COVID-19 was either from bats, snakes or pangolins and he noticed that every time anyone mentioned snakes, the fact-checkers would descend upon them and spin them towards the bats.

“There’s no fact-checking about bats. They keep letting you look at bats,” he says. This, despite the fact that Chinese experts were saying that it could not have been bats, because these bats hibernate and COVID broke out in the middle of winter.

Plus, when they studied the antibodies of those who were sick in Wuhan, they found that the genetic sequences were not like bats, they were most similar to two snakes, proteins from the Chinese krait and the king cobra. Bryan continues, *“Then I find, in April of 2020 that there’s a study in France where they’re finding that the receptors in the brain called nicotinic acetyl choline esterase receptors, that these are actually bound most tightly to snake venom of krait and cobra and that the spike protein from SARS-CoV-2 is most identical to Chinese krait and cobra venom.”*

“Then, I find out that there’s an actual doctor who works at the University of Pittsburgh in May of 2020, works in a computational lab doing genetic sequencing and he’s been researching for 5 months, sequencing spike proteins, trying to solve the mystery of SARS-CoV-2 victims and he says he’s got a big press release to announce all of their findings and Bing Liu is his name.”

Next thing you know, the young Dr. Bing Liu was dead in a lurid murder-suicide. *“And that’s when I freaked out,”* Bryan says. *“When I say to you that they have lied about everything in relationship to COVID, they’ve even lied about the viral part of COVID.”*

Bryan cites a massive study published in January 2020 gene-mapping all of the proteins and peptides in king cobra venom, which isolated 19 venoms and peptides that specifically target organs in the body. He found that the main funder of the study was Genentech, a subsidiary of Roche.

He says, *“I am convinced that COVID-19 is not a respiratory virus of any kind. It is actually venom poisoning and they’re using, I believe, synthesized peptides and proteins from venoms of snakes and they’re administering them and targeting them to certain people.”*

“The amazing thing about these 19 toxins found in cobra venom, they’re specifically sequenced to target specific organs, like the pancreas in a diabetic, like the heart in a heart disease patient, like the liver in a hepatitis patient.”

“This is the most original of all bioweapons, ever. Snake venom...When I say this is the most evil thing I have ever encountered in my entire life, could you ever have imagined that the one greatest symbol of evil in all of Christendom...the Serpent. Can you think of anything more evil than envenomating the entire world with snake venom and the injecting snake venom into your veins and then using mRNA technology that they’ve been isolating from snake venom for years, that they know are unusually stable – more stable than any other mRNA they’ve isolated from other natural organisms for decades.”

“In 2015, they took mRNA that they isolated from cobra venom and krait venom and they actually wrapped the mRNA in nanoparticle hydrogel...and they made it even more stable. Then, they add what’s called dyna beads to those nanoparticle hydrogels, surrounding the mRNA of snake venom and it made it even more stable and made it last longer, made it easier to get inside of your cells. You know what dyna beads are? Magnetic metal nanoparticles.”

A 2016 episode of The Blacklist even featured extensive predictive programming of these details. Bryan says that when he saw that episode, he knew he was right and that he was supposed to see that, “Because it was confirmation to me that other people knew this was planned all along – which we’ve known this is a plan – the FBI figures out that it’s actually peptides found in krait venom that poisoned Reddington...”

“I believe this was the plan all along. They’re using mRNA – I believe mRNA extracted from king cobra venom. The king cobra and I think they want to get that venom inside of you and make you a hybrid of Satan, no longer belonging just to God or a creation of God’s.”

Bryan turns to Stew Peters and says, “When I say that the mRNA inside of the Pfizer and Moderna shots is derived from snake venom, it just sounds crazy, right? But I want you to read...from July 6th last year, 2021, the cofounder of Moderna, read the title, show it to the camera:

‘Moderna co-founder using mRNA technology to treat venomous snake bites.’ Stew says.

There are endless clues that support Bryan’s suspicions. As Canadian Dr. Hoffe noted, people who’d been vaccinated had elevated D-dimer levels. Before the advent of COVID, elevated D-dimer numbers were commonly indicative of snake venom poisoning.

Bryan says, *“The kidney failure caused by Remdesevir is the number one organ targeted by king cobra venom. It’s the number one!”* and he says there isn’t one symptom or adverse reaction from the COVID vaccines that cannot be correlated back to snake venom from cobras, kraits and other poisonous snakes.

Share this:

The lead article in this week’s segment of Mass Murder has struck the world with such a shock that the pharma-government-military complex are in panic mode. They are lashing out with all kinds of denials but the following post by Mike Adams provides the proof of a company that offers Snake Venom peptides used to carry snake venom in water confirming the revelations of Dr. Bryan Ardis. Since airing the video “Watch the Water” with Stew Peters, Dr. Ardis was interviewed by Mike Adams the Health Ranger. Mike Adams has shared the story of Venom Tech below.

VenomTech company announces massive library of SNAKE VENOM peptides for pharmaceutical development; “nanocarriers” stabilize snake venom in WATER (PubMed)

Wednesday, April 13, 2022 by: Mike Adams



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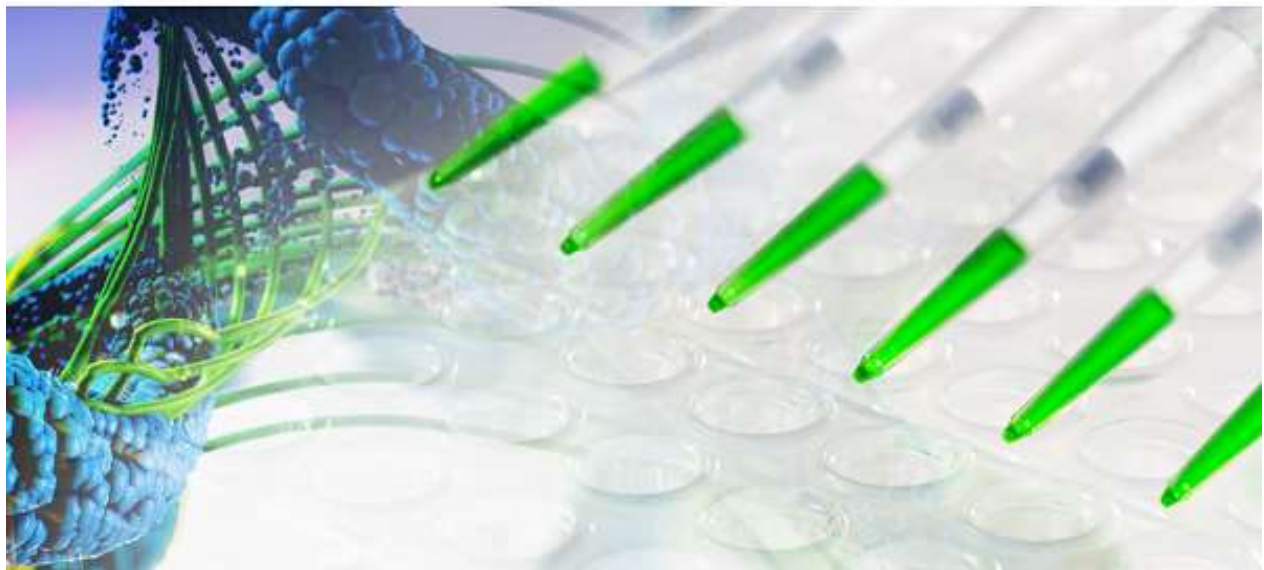
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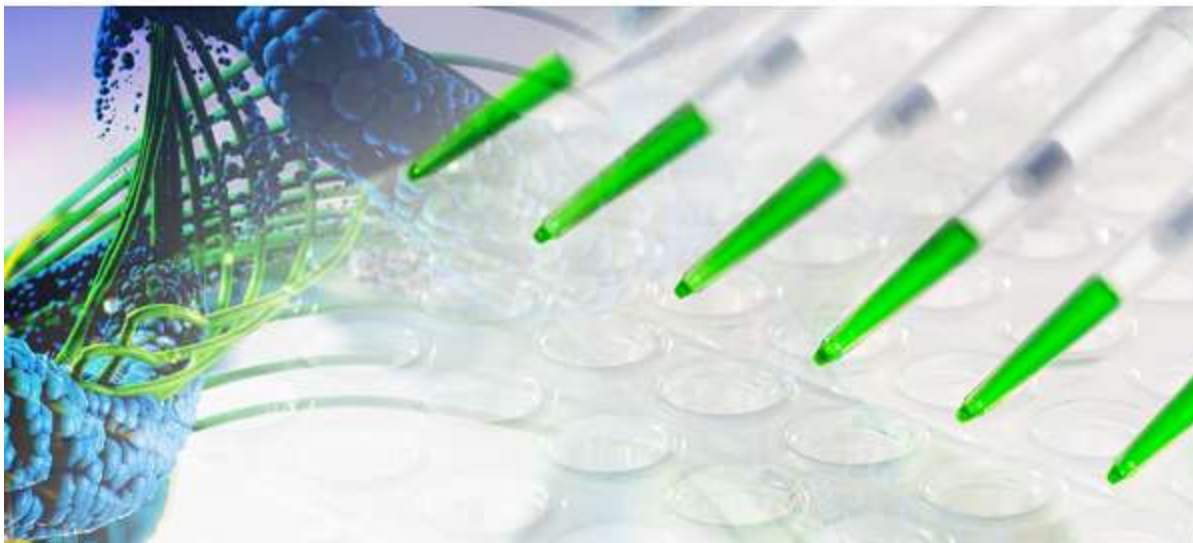
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([Natural News](#)) Astonishingly, it is rapidly becoming apparent in the aftermath of the [Dr. Bryan Ardis revelations about snake venom origins](#) for covid-19 that many people — even some in alt media — are completely unaware that snake venom is commonly used as the starting point for pharmaceutical research.

Earlier today, a UK company literally named “[Venomtech](#)” announced a massive venom peptide and venom fragment library to be used for drug discovery by pharmaceutical companies (as well as pesticide used for agricultural companies). The news was widely covered in the biotech media, including at [News-Medical.net](#), which published the announcement, “[Venomtech announces new drug development collaboration with Charles River.](#)”



From that announcement:

Venomtech is collaborating with Charles River Laboratories, International Inc. to help drug developers explore venom-derived compounds for a wide range of therapeutic targets. This newly formed collaboration will bring together Venomtech's biology expertise and vast venom-derived peptide library, with Charles River's drug development and screening knowhow, providing pharmaceutical manufacturers with a one-stop service to explore this unique natural resource.

Venomtech's Targeted-Venom Discovery Array™ (T-VDA™) libraries provide researchers with a straightforward solution to rapidly screen thousands of individual venom fragments, with each array specifically designed to maximize hits for a specific target.

The announcement carries this statement from Venomtech CEO Paul Grant:

Venomtech has been at the forefront of venom research for drug discovery for more than a decade... we can now showcase our innovative technology, introducing the wider industry to the potential of venoms for the successful delivery of more leads, more quickly, for a broad range of [cellular] targets.

...we can now offer our clients access to bespoke venom libraries, potentially accelerating their [drug] discovery pipelines using this powerful natural resource.



The Venomtech company is described as follows:

Venomtech is a global leader for venom research enterprises, based out of world-class laboratories at Discovery Park in Kent, UK.

...[we are] helping our customers worldwide make pioneering advances in drug discovery, crop protection, and cosmetics. We have the largest library of naturally sourced venom-derived compounds in the UK, from a growing collection of vertebrate and invertebrate species

Note that Venomtech's clients include pharmaceutical companies, pesticides companies and cosmetic product manufacturers. Venom-based molecules are widely used in drug research and other areas of biotech.

So to those in the corporate media — and even in alt media — who are expressing shock and dismay at Dr. Ardis claiming that snake venom is the most likely origin for research into SARS-CoV-2 gain-of-function enhancement or even covid vaccines, you are ignorant of the state of the art in biosciences.

The use of snake venom in pharmaceuticals isn't a "conspiracy theory." It's a common practice, representing what most bioscience experts would describe as the cutting edge of drug discovery.

For the record, by the way, we are not ascribing any nefarious accusations to the Venomtech company here. We mention them solely to prove to any skeptics that snake venom is, in fact, widely used as a resource for pharmaceutical development (and it has been for decades).

What Dr. Ardis has claimed is not science fiction. It is the state of bioscience in 2022.

Anyone dismissing the “snake venom” theory in relation to covid treatments or vaccines is flatly ignorant of the resources used in today’s drug discovery pipelines.

20,000 varieties of venom peptides

[As VenomTech says on their own drug discovery page:](#)

Our naturally derived peptide, protein, and small molecule compounds enable pioneering perspectives and solutions that have proven effective even on hard-to-hit targets where traditional approaches have previously failed. They affect a variety of molecular targets, such as ion channels, GPCRs and enzymes, with a high degree of selectivity and potency, reaping the benefits of millions of years of evolution rather than just over a hundred years of drug discovery.

Our customers have access to a library of 20,000 peptides, proteins, and small molecules derived from venoms – the largest library of naturally sourced compounds available in the UK – supplied as an innovative Targeted-Venom Discovery Array™ and custom arrays with a demonstrated track record of success for drug discovery applications.

We believe the Venomtech company very likely has a very bright future in its industry, by the way. “Biomimicry” means copying nature, and Big Pharma has a long history of pirating molecules from nature and turning them into multi billion-dollar profit centers. The best ideas come from nature, of course, even though the FDA and other health regulators claim natural molecules are useless and can’t be considered “medicine.” Yet Big Pharma gets most of its blockbuster drugs from natural molecules, such as lovostatin molecules found in red yeast rice (now turned into high profit statin drugs).

Never forget that the symbol for the World Health Organization is a snake and a staff that dominate the planet:



World Health Organization

And the symbol of the American Medical Association (AMA) is a serpent encircling a staff, resembling a DNA strand while also representing the idea of the serpent's venom:



World Economic Forum brags about drugs made from venom, admits ability to synthesize venom particles using RNA technology

If you're looking for even more proof that snake venom is used in drug development, take a look at [this article from the World Economic Forum](#), published as part of the WEF's [Annual Meeting of the Global Future Councils](#) (2018):

“Venomics – the scientific analysis of venom – offers some groundbreaking solutions to health problems from heart disease to diabetes, to managing chronic pain.

In fact, there are already six drugs approved for use by the Food and Drug Administration in the United States that are derived from venom.

But with 15% of the world's animals producing venom of some kind, we have really only just begun to scratch the surface of their potential contribution to medicine.

Captopril is an angiotensin-converting enzyme (ACE) inhibitor, a type of drug used to treat high blood pressure and improve survival and reduce the risk of heart failure after a heart attack. Its main compound is derived from a species of pit viper found in Brazil.

Prialat, derived from the venom of cone snails, is used by some of the estimated 22 million adults in the US who suffer from severe and chronic pain.

Byetta is part of a new wave of drugs designed to lower blood glucose in patients with type 2 diabetes. Its key ingredient, exendin-4, is found in the saliva of the Gila monster, a large lizard species native to the southwestern US and northwestern Mexico."

Synthesizing snake venom for mass production, using RNA technology
Also from that WEF article:

"One reason for the growing interest in this field is that advances in DNA and RNA technology allow research to be carried out much faster.

For instance, traditionally, live venom would be extracted from the animal, then injected into an unsuspecting live rodent or fish to study its impact.

Nowadays, the DNA and RNA of the venom have already been identified, which allows researchers to synthesize its components and test out their theories."

Nanocarriers can stabilize snake venom peptides for delivery via water:
In response to Dr. Ardis' revelations about the possibility of snake venom peptide delivery via water systems, there has been almost derision from certain influencers who claim that snake venom wouldn't be stable in municipal water systems. In effect, they are absurdly claiming that tap water is anti-venom.

If that were true, all snake bites could simply be treated by drinking tap water.
In truth, the National Library of Medicine has published a study that reveals the existence of "nanocarriers" which can stabilize snake venom peptides in order to achieve delivery via water systems.

Entitled, "[Nanoparticles Functionalized with Venom-Derived Peptides and Toxins for Pharmaceutical Applications](#)," the study abstract explains the mechanism by which snake venom peptides are stabilized in water and other solutions: (emphasis added)

“Venom-derived peptides display diverse biological and pharmacological activities, making them useful in drug discovery platforms and for a wide range of applications in medicine and pharmaceutical biotechnology. Due to their target specificities, venom peptides have the potential to be developed into biopharmaceuticals to treat various health conditions such as diabetes mellitus, hypertension, and chronic pain. Despite the high potential for drug development, several limitations preclude the direct use of peptides as therapeutics and hamper the process of converting venom peptides into pharmaceuticals. These limitations include, for instance, chemical instability, poor oral absorption, short half-life, and off-target cytotoxicity. One strategy to overcome these disadvantages relies on the formulation of bioactive peptides with nanocarriers. A range of biocompatible materials are now available that can serve as nanocarriers and can improve the bioavailability of therapeutic and venom-derived peptides for clinical and diagnostic application. Examples of isolated venom peptides and crude animal venoms that have been encapsulated and formulated with different types of nanomaterials with promising results are increasingly reported.”

Mic drop.

So for anyone who thinks that snake venom can't be stabilized for delivery in water systems, they clearly don't know the state of the science. Nanocarriers accomplish the task quite simply.

Once you become aware of Big Pharma's technology, Dr. Ardis' claims don't seem outlandish at all.

The bottom line in all this is rather clear: The only people lashing out against Dr. Ardis' claims about snake venom in covid-19 vaccine formulations or snake venom peptide exposure through various environmental vectors (water, air, contact surfaces) are people who are uninformed about the widespread use of snake venom peptides in medical research and drug delivery systems.

The “shock” that many people experience when first hearing about snake venom used in drug development is an artifact of their lack of knowledge about modern medicine. The widespread use of venom from snakes, lizards, frogs, cone fish, stingrays and other creatures is well known in pharmaceutical research circles. It isn't a “fringe” theory, nor a conspiracy theory.

It is a biological fact.

Millions of Americans swallow reptile venom every single day and call it “medicine”

Remember the WEF article linked above? It states, *“Prialt, derived from the venom of cone snails, is used by some of the estimated 22 million adults in the U.S. who suffer from severe and chronic pain.*

Millions more take Captopril, and there are several other venom-derived, FDA-approved drugs that are routinely prescribed by doctors.

The irrefutable fact is that millions of Americans swallow reptile venom every single day. They just call it “meds.”

The fact that most of them are completely ignorant of the origins of these substances doesn't excuse those in the corporate media or indy media for also being ignorant. Those who are going to comment on Dr. Ardis and the snake venom theory should at least familiarize themselves with the state of the art in biosciences. If they fail to do that, they are just flinging nonsense much like Jen Psaki at the White House.

And haven't we had enough of all the lies and ignorance in our world? Isn't it time we listened to people whose words actually have a basis in fact rather than those who are pushing narratives to protect Big Pharma's dishonest narratives?

Here are parts 1 and 2 of my recent interview with Dr. Bryan Ardis, followed by my Situation Update podcast which further analyzes what may be going on with snake venom and covid-19 (also now called “Covenom-19”):

And here's my Situation Update podcast that discusses mRNA transfection transhumanism and the “reptilian-human hybrid” phenomenon:

[Brighteon.com/dc8f6219-379f-478a-91d8-8e0beb55312e](https://www.brighteon.com/dc8f6219-379f-478a-91d8-8e0beb55312e)

U.S. Department of Defense awarded a contract for 'COVID-19 Research' in Ukraine 3 months before Covid was known to even exist

BY THE EXPOSÉ ON APRIL 13, 2022

The world first started to hear about a novel coronavirus in early January 2020, with reports of an alleged new pneumonia like illness spreading across Wuhan, China. However, the world did not actually know of Covid-19 until February 2020, because it was not until the 11th of that month that the World Health Organization officially named the novel coronavirus disease as Covid-19.

So with this being the official truth, why does United States Government data show that the U.S. Department of Defense (DOD) awarded a contract on the 12th November 2019 to Labyrinth Global Health INC. for 'COVID-19 Research', at least one month before the alleged emergence of the novel coronavirus, and three months before it was officially dubbed Covid-19?

The shocking findings however, do not end there. The contract awarded in November 2019 for 'COVID-19 Research' was not only instructed to take place in Ukraine, it was in fact part of a much larger contract for a 'Biological threat reduction program in Ukraine'.

Perhaps explaining why Labyrinth Global Health has been collaborating with Peter Daszak's EcoHealth Alliance, and Ernest Wolfe's Metabiota since its formation in 2017.

The Government of the United States has a website called '[USA Spending](#)', an official open data source of federal spending information. According to the site as of 12th April 2021 the US Government has spent a mind-blowing \$3.63 trillion "in response to COVID-19". But that's not the only information on Covid that can be found within the site.

Hidden within the 'Award Search' are details on a contract awarded by the Department of Defense to a company named '[Black & Veatch Special Projects Corp](#)', which is allegedly "a global engineering, procurement, consulting and construction company specializing in infrastructure development".

The contract was awarded on September 20th, 2012 and is described as "Professional, Scientific, and Technical Services". Obviously this is very vague and most likely of little interest to anyone who happens to stumble across it. But there is something contained deep within the details that should be of interest to anyone and everyone.

The 'Award History' for the contract contains a tab for 'Sub-Awards' detailing the recipients, action date, amount, and very brief description for 115 Sub-Award transactions. Most of the Sub-Awards are extremely mundane for things such as "laboratory equipment for Kyiv", or "office furniture for Kyiv".

But there is one Sub-Award that stands out among the rest, and it is was awarded to Labyrinth Global Health INC for "SME Manuscript Documentation and COVID-19 Research".

An award for Covid-19 research isn't exactly shocking when the world is allegedly in the grip of a Covid-19 pandemic, but considering the fact the sub-contract was awarded 12th November 2019, at least one month before the alleged emergence of the novel coronavirus, and three months before it was officially dubbed Covid-19, the award for Covid-19 research should come as a shock to everyone.

But the shock doesn't end there, because the place the contract for Covid-19 research was instructed to take place was Ukraine, as was the entire contract awarded by the DOD to [Black & Veatch Special Projects Corp](#).

The contract details found on the 'USA Spending' site actually reveal that the specific DOD department that awarded the contract was the Defense Threat Reduction Agency (DTRA). The contract was awarded 20th September 2012, and concluded on 13th October 2020.

Whilst the details are vague, the US Government site also reveals that \$21.7 million of the \$116.6 million contract was spent on a 'Biological threat reduction program in Ukraine'.

Why did the Department of Defense pay a company that is allegedly "a global engineering, procurement, consulting and construction company specializing in infrastructure development", to help implement a "Biological threat reduction program in Ukraine"?

And why did both the DOD and said company then pay Labyrinth Global Health INC to carry out COVID-19 research in Ukraine at least one month before the alleged emergence of the novel coronavirus, and three months before it was officially dubbed Covid-19?

Founded in 2017, [Labyrinth Global Health](#) is allegedly a "women-owned small business with deep expertise and a proven track record supporting initiatives for scientific and medical advancement."

They describe themselves as "a multicultural and international organization with offices in four countries and a team of experts with diverse backgrounds and competencies, including microbiology, virology, global health, emerging infectious disease nursing, medical anthropology, field epidemiology, clinical research, and health information systems."

One of those offices just happens to be located in Kyiv, Ukraine, which the company dubs "a gateway to Eastern Europe".

Putting the biolabs in Ukraine to one side for now, let's return to the subject of Covid-19. If the US Government was funding Covid-19 research before Covid-19 was publicly known to exist then this suggests they either knew Covid-19 existed naturally, or they were involved in constructing this virus in a lab.

But if the contract evidence isn't enough for you to come to this conclusion (it should be), then perhaps coupling it with evidence that the U.S. National Institute of Allergy & Infectious Diseases' (NIAID), and Moderna had a coronavirus candidate in December 2019 will be.

A confidentially agreement which can be viewed here, states that providers 'Moderna' alongside the 'National Institute of Allergy and Infectious Diseases' (NIAID) agreed to transfer 'mRNA coronavirus vaccine candidates' developed and jointly-owned by NIAID and Moderna to recipients 'The University of North Carolina at Chapel Hill' on the 12th December 2019.

US BIOLABS IN UKRAINE



Exclusive US biolabs in Ukraine, and they are financed at the expense of the US Department of Defense.

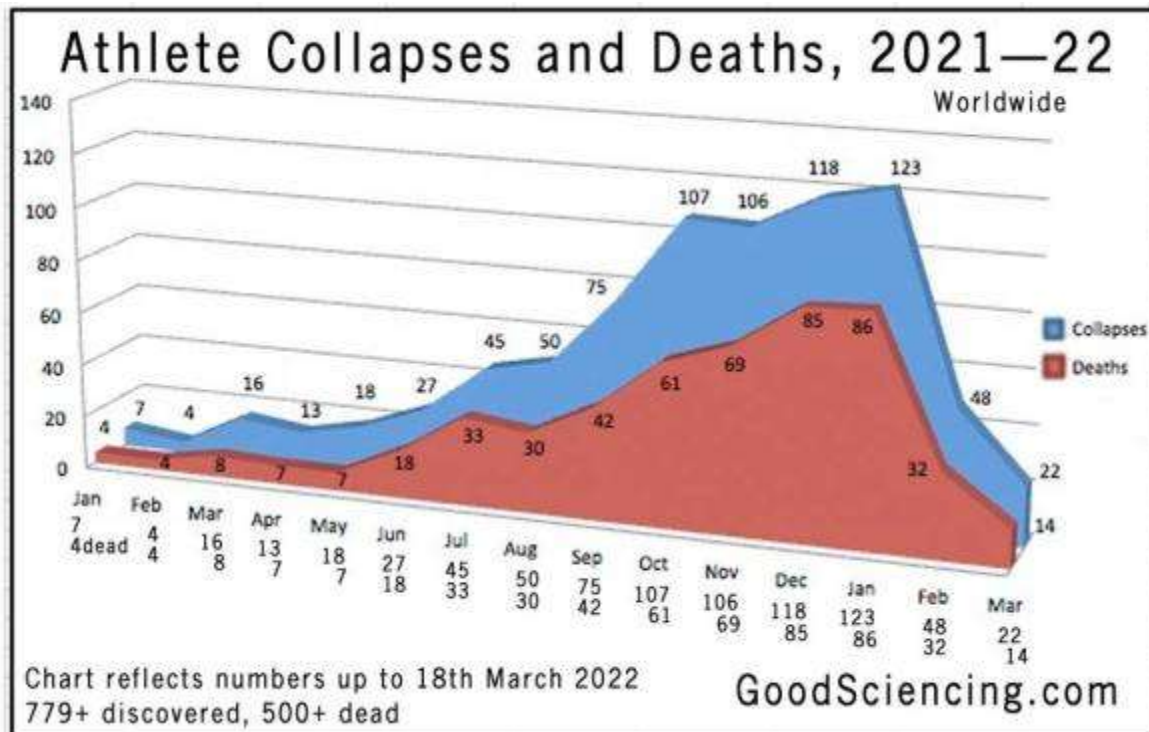
The laboratories are located in Odessa, Vinnytsia, Uzhgorod, Lviv (three), Kiev (three), Kherson, Ternopil, and near Crimea and Luhansk. 2 other possible locations Kharkiv and Mykolaiv

833 Athlete Cardiac Arrests, Serious Issues, 540 Dead, After COVID Shot, Good Sciening

Post-vaccination injuries in athletes include cardiac arrest; blood clots or thrombosis; stroke; irregular heartbeat; arrhythmia; neuropathy; and, death. With most of the post-injection injuries being cardiac arrests.

Good Sciening is a small team of investigators, news editors, journalists, and truth seekers.

They [state on their website](#):



“It doesn’t really matter who we are. What really matters is that we care carrying on an investigation and we’re presenting the evidence we’ve found, almost all of it documented in mainstream media publications. We’re doing this anonymously because we’ve seen people viciously attacked and threatened for doing things like this, so we’re not going to open ourselves or any of our contacts to that.”

As well as receiving new cases and updates from alert readers, they note that they are also receiving hate mail and death threats.

Good Sciening has a non-exhaustive and continuously growing list of mainly young athletes who had major medical issues in 2021/2022 after receiving one or more Covid injections. You can view the list [HERE](#).

“Initially, many of these were not reported. We know that many people were told not to tell anyone about their adverse reactions and the media was not reporting them. They started happening and ramping up after the first Covid vaccinations. The mainstream media still are not reporting most, but sports news cannot ignore the fact that soccer players and other stars collapse in the middle of a game due to a sudden cardiac arrest. Many of those die – more than 50%.”

“Most, if not all of these athletes have suffered heart problems after Covid vaccines. At the time of initial writing, 28 died. That was not normal, but then, 10 days later, 56 deaths were listed, and the numbers are climbing. Any other real vaccine would have been pulled off the market long before now. The media would be asking questions. They would be pressuring governments. But they are not. And governments continue running TV and radio and newspaper ads encouraging people to get their 1st, 2nd, 3rd, 4th shot.”

Many posts on Facebook, Instagram, Twitter, forums and news stories are being removed. *“So now we are receiving some messages saying there is no proof of the event or of vaccination status. That is partly because this information is being hidden,”* Good Sciencing notes, *“more people are writing to tell us that in many cases, we didn’t mention a person’s vaccination status. There is a good reason for that. None of the clubs want to reveal this information. None of their sponsors want to reveal it. The players have been told not to reveal it. Most of their relatives will not mention it. None of the media are asking this question.”*

[Daily Mail reported](#) on 28 January that Sunderland FC manager Lee Johnson suggested the Covid injection could be behind his goalkeeper Lee Burge being ruled out of playing with an ‘inflamed heart’ and said ‘it happens a lot after these injections’. Two days later [the club confirmed](#) Johnson had been sacked. *“Form your own conclusions as to why the club would sack the manager who cares about his players,”* Good Sciencing wrote.

“We know there is a concerted worldwide effort to make this information go away, so that fact alone tells us it must be collected, investigated and saved so other researchers can look at it to see if there are any useful patterns ... We really appreciate the athletes named in this list who have confirmed what happened to them so the truth can be known. They care about their fellow athletes, even if the clubs, their sponsors, media and politicians care more about money.”

Read the full article: [833 Athlete Cardiac Arrests, Serious Issues, 540 Dead, After COVID Shot, Good Sciencing](#)



[833 Athlete Cardiac Arrests and Serious Issues, 540 Dead, Following Covid Injection](https://tapnewswire.com/2022/04/833-athlete-cardiac-arrests-and-serious-issues-540-dead-following-covid-injection/)

Original Article: <https://tapnewswire.com/2022/04/833-athlete-cardiac-arrests-and-serious-issues-540-dead-following-covid-injection/>

Dylan Eleven | Truth11.com

Our governments have launched a silent war upon their own people, using quiet weapons, lies and propaganda. The mainstream media is enabling this deception and genocide. Our mission in this war it to bring you the truth.

Pfizer documents reek of FRAUD; Big Pharma liability shield starts to unravel

NaturalNews.com / Mary Villareal

(Natural News) Recently released Pfizer documents show that its Wuhan coronavirus (COVID-19) vaccine can cause systemic damage to the body. This is likely the reason why the pharma giant, through the *Food and Drug Administration* (FDA), previously asked a judge to keep the data from the public for as long as possible – [around 55 years, to be more precise.](#)

In the April 1 episode of “The Ben Armstrong Show,” [the host talked about the Pfizer document dump.](#) With over 55,000 pages of data to be dumped in April, a team has been assembled to go through parts of the massive document.

Pfizer obviously doesn't want the public to know just how dangerous the COVID-19 vaccine is, and that the [company has committed fraud](#) by saying it is safe and effective. Unfortunately, also involved in the scheme are the government, the FDA, the *Centers for Disease Control and Prevention* and several media companies. (Related: [FDA should need only '12 weeks' to release Pfizer data, not 75 years, plaintiff calculates.](#))

Pfizer and Moderna know from their studies how dangerous the vaccines are, and if independent researchers will ever prove fraud, they will lose their liability protection and people will be allowed to sue them.

When the FDA granted Pfizer the full approval for their vaccine in 2021, there are already known side effects. But there is no way to sue the drug manufacturer for vaccine injury.

"If it could be proven that Pfizer's data shows increased all-cause mortality and that the company hid this to encourage people to take the vaccine, then there is an existence of fraud," said former Blackrock executive and investment adviser Edward Dowd. All the protections Big Pharma is enjoying at the moment will be gone.

This is why Pfizer wants to keep its documents away from the public's eye for as long as possible. "If you didn't do anything wrong, you wouldn't care if people looked at your stuff, that you know is supposed to be public record in the first place," Armstrong said.

Armstrong also showed an interview with Dr. Naomi Wolf, whose team found how dangerous the COVID vaccines are. Wolf indicated that authorities are using these vaccines to experiment on people and use them as lab rats. She said these are not vaccines at all. According to Wolf, the mRNA injections made by Pfizer and Moderna manipulate genes – making them a form of gene therapy rather than a vaccine.

Pfizer's efforts to conceal data indicate fraud in itself. Meanwhile, Dowd considers Pfizer's attempt to conceal data that shows the actual risks of its COVID-19 vaccine as an obvious evidence of fraud. He pointed out the Herculean efforts of Pfizer in withholding its data despite legal challenges to release it.

"Many reports have also shown that there had been more deaths in the vaccinated compared to the unvaccinated. FDA's backing of Pfizer in its initial refusal to release the data is an attempt to conceal vaccine deaths", Dowd said.

"Pfizer got blanket immunity with EUA [emergency use authorization]. If there is fraud and it comes out, fraud eviscerates all contracts – that's case law," Dowd noted. (Related: [Whistleblower: Pfizer FORGED signatures of trial participants, falsified and fabricated trial data.](#))

Another whistleblower, Dr. Jessica Rose, also obtained information from the Pfizer document dump, which shows that toxic fats have been used in the vaccine and are causing problems in people. These toxic fats apparently go to the organs.

Follow [Vaccines.news](#) for more news about Pfizer's COVID-19 vaccine documents. Watch the April 1st episode of "The Ben Armstrong Show" to know more about Pfizer documents showing that the company's COVID-19 vaccine can cause system damage to the body.

This video is from [The New American channel on Brighteon.com](#).

More related stories:

[Court REJECTS FDA request to hide Pfizer data for 75 years.](#)

[Children's Health Defense to sue FDA over fraudulent Pfizer covid vaccine "approval".](#)

[Former Pfizer employee flags FDA study, warns that Pfizer vaccine increases COVID by over 300%.](#)

[COVID vaccine injury reports jump by 27,000 in one week, FDA pulls 'bait and switch' with Pfizer vaccine approval.](#)

[Whistleblower: Pfizer vaccine trial data was falsified, participants who experienced adverse effects were ignored.](#)

DIE-OFF CONTINUES: Mainstream media censors information about rising COVID vaccine deaths

Friday, April 08, 2022 by: Mary Villareal

([Natural News](#)) Mainstream media outlets are trying to hide the [sheer number of deaths associated with the Wuhan coronavirus \(COVID-19\) vaccines](#). Fortunately, those numbers are recorded through the government's own Vaccine Adverse Event Reporting System (VAERS) and same kinds of technology around the world.

According to the Pfizer and AstraZeneca U.K. data, injuries associated with the COVID-19 vaccine include strokes, heart attacks, miscarriages, Bell's Palsy, sepsis, paralysis and more. There had also been reports that the COVID-19 vaccines have been causing blood clots.

The European database also verified that there had been over 32,649 fatalities and 3,003,296 injuries following injections of four experimental COVID-19 shots: Pfizer-BioNTech, Moderna, AstraZeneca and Johnson & Johnson (J&J).

In a summary of data through December 18, 2021, Pfizer vaccines alone caused 15,788 deaths and 1,476,269 injuries; Moderna caused 9,612 deaths and 431,805 injuries; Oxford/AstraZeneca logged in 6,862 deaths and 1,103,016 injuries; and there had been 2,075 deaths and 109,349 injuries for J&J.

These estimates were based on reports submitted to EudraVigilance, and totals are expected to be much higher based on the percentage of adverse reactions that have been reported.

In Scotland, the statistical report showed that the number of cases by vaccination status still proves that the majority of the cases come from the vaccinated population, with thousands being confirmed to be among those who have had their boosters.

In late 2021, it was found that around [45 percent of deaths following COVID vaccination](#) happen in the first two weeks. Peter Schirmacher, a top pathologist, said around 30 to 40 percent of people who died within two weeks after vaccination were killed not by the virus, but by the vaccine.

In taking a conservative view regarding the reports recorded on VAERS, this will show that around 1,145 people have been killed by the vaccine at minimum. However, taking this ratio to the over 230 million vaccinated, then the numbers would fall to around 4.9 deaths per million killed by the vaccine.

This means that the COVID-19 vaccines are at least five times deadlier than the smallpox vaccines, which were deemed to be too unsafe to use. These estimates only assume deaths in the first two weeks following vaccination, and all excess deaths afterward were assumed to have been caused by something else. (Related: [SCIENCE FACT: Chicken pox vaccine is made with “human embryonic lung cell cultures” and human diploid cell cultures from aborted fetal tissue.](#))

CDC continues to float false narratives about vaccines.

In mid-2021, the *Centers for Disease Control and Prevention* (CDC) was [caught driving the false narrative](#) that vaccines are protecting people against COVID-19. However, this only appeared so because the agency stopped testing “vaccinated” people for the virus.

Reports say the CDC has decided to test only the unvaccinated people for the virus to make it appear that they were the only ones catching the variants.

“The CDC stopped monitoring non-severe COVID-19 cases among vaccinated people in May. It’s hard to assess delta’s risk without knowing what mild breakthrough cases look like – or whether they’re becoming more common,” according to a report.

This is why governments try to claim that the [only people getting sick from the virus are the unvaccinated](#). By refusing to test or monitor anyone who had been inoculated, the data will of course suggest that the vaccines “work.”

In a July 2021 motion, America’s Frontline Doctors (AFLDS) called for an [immediate stop to COVID-19 vaccination](#). According to them, the vaccines were only granted emergency use authorization by the *Food and Drug Administration*, and should not have been given the green light.

In a press release, the group specifically asked that COVID-19 vaccinations be halted for three groups: young Americans aged 18 and below who are at “zero risk” from dying of COVID; those who have recovered from COVID who have acquired natural immunity; and those who have not received informed consent as defined by federal law.

The AFLDS said at the time: *“It is unlawful and unconstitutional to administer experimental agents to individuals who cannot make an informed decision as to the true benefits and risks of vaccines.”*

Watch the video below for more information about [COVID vaccine deaths](#).

This video is from the [TNTVNEWS channel on Brighteon.com](#).

More related stories:

[Federal lawsuit claims VAERS reporting system is HIDING actual number of coronavirus vaccine deaths.](#)

[Analyst says systematic flaws prevent VAERS from accurately tracking adverse reactions to vaccines.](#)

[VAERS records overwhelming adverse events from COVID-19 vaccines in first two months of 2022.](#)

[VAERS data shows skyrocketing number adverse events following COVID vaccinations.](#)

[CDC caught removing Covid vaccine injury reports from VAERS.](#)

The Many Ways The Spike Protein Annihilates Human Life

'The Spike Protein Is What The 'Vaccine' Is Supposed To Make In Your Body...The Spike Protein Is One Of The Most Contrived Toxins Or Poisons That Man Has Ever Made...And The Aim Of This Toxin Is To KILL Billions Without Anyone Noticing It.' - Dr. Shankara Chetty

The diabolical pathways the spike protein uses to destroy the human body are many. As Dr. Chetty makes clear, there has never been anything more deadly in human history than the spike protein. Below are just some of the methods its creators built into it to make 100% certain billions will die. The techniques the spike protein uses are often referred to as 'cascades'. Whatever term you use, from avalanche to tsunami, once the spike protein has entered your body it is just a matter of time for it to do its demonic work...

AIDS - Total Immunological Collapse And Failure
...This includes widespread auto-immune diseases

Explosion Of Cancer In The Body
...Cancers of all types, including reactivated and brand new cancers...even cancers never seen before

Sterilization

...Destruction of male and female reproductive organs and system

Clotting And Hemorrhaging

...Clotting from the spike protein is abnormal and resistant to degradation

Systemic Fibrosis

...Extensive scarring throughout the entire body

Neuro Degenerative Diseases

...Prions (CJD), Amyloid Deposits (Alzheimers, Parkinsons, ALS, etc.)

Cytokine Storm And ADE (Antibody Dependent Enhancement)

...Hypersensitivity to the Spike Protein

The creators of this “Gene Therapy” are likely to have known the harm the “Spike Protein” would do over time. With more than two years to document the results of the Vaxx since administering the first shots in December of 2020, the VAERS reporting system has documented 1.2+ million adverse reactions among the population.

In the late summer of 2020, Dr. Sherri Tenpenny and Dr. Carrie Madej were calling out those pushing the new “Gene Therapy”. It was known that from early animal test studies the animals all died from this experimental treatment and the animal studies were abruptly canceled. The accumulating evidence to date leaves one to conclude that his experiment was criminal and that responsible need to be indicted and prosecuted for criminal negligence, manslaughter, and pre-meditated murder.

Pfizer Docs Reveal Fraud, Racketeering, RICO & More – Could Face Serious Legal Repercussions

Throughout the COVID-19 pandemic, pharmaceutical companies like Pfizer made billions of dollars’ worth of profits from their supposed miracle drug. While the jab did little to stop the spread of the virus or one contracting it, the Biden administration, Democrats, and even famed Dr. Anthony Fauci promoted it to the general public. As for Pfizer, while their drug hasn’t stopped COVID-19, it has been investigated for numerous side effects. And although Pfizer might have been immune to lawsuits, according to Dr. Naomi Wolf, the company’s own documents could be their undoing.

Dr. Wolf spoke on Steve Bannon’s “The War Room” when she detailed how lawyers are working hard to comb through all the Pfizer documents. She added, *“If fraud can be proven against Pfizer, it breaks up their impunity or their immunity from prosecution, civilly and possibly criminally.”*

Diving deeper into the process being taken by the lawyers, the doctor noted, *“Every day, new facts surface, so I just want people to be patient and understand that there are two tracks. In two weeks, I will present a summary, interim report, and press release*

about the findings for the media, for followers, for the community that have come up. However, that is not the same track, which the lawyers reminded me last night is a longer track of the attorneys – these 250 attorneys – deliberating and creating subcommittees and making decisions themselves, and asking for follow-up documents from the volunteers. That’s going to be a longer process, and it’s also a confidential process.”

Just a few days ago, Edward Dowd, who was once a portfolio manager at Blackrock, discussed the Pfizer agenda and how data and facts are destroying it. He told Robert F. Kennedy Jr., *“The rate of change [in all-cause mortality] is the smoking gun. The rate of change and the acceleration into mandates and boosters. Basically, in my mind, it’s case closed.”*

That wouldn’t be the only time Dowd spoke out against the COVID-19 narrative, as he explained to WND that the CDC data shows the jab was one of the main causes of deaths among the millennial generation. Yet, it is still being pushed, glorified, and promoted even today.

Nationwide WARNING issued by Poison Control about COVID-19 rapid antigen tests

by: Sara Middleton, staff writer | April 14, 2022

([NaturalHealth365](#)) Back when people first questioned the safety and accuracy of the COVID test nasal swabs, the mainstream approach was to deplatform and cry “misinformation,” perhaps the pandemic-era version of “crying wolf.”

But now, officials are raising a [poison control alert](#) about a toxic substance (typically used in pest control products) found in some COVID-19 rapid antigen tests.

At-home COVID tests like the ones handed out by the White House reportedly contain toxic and “potentially deadly” chemical

After issuing millions of at-home rapid antigen COVID tests to American households, the U.S. government acknowledges an increase in the number of reported sodium azide [poisoning](#). It turns out that these at-home kits contain this harmful substance – a concerning discovery that prompted members of the Ohio Poison Control to issue a national warning.

Accidental exposure to sodium azide when using these at-home tests is apparently happening only when the tests are misused. Even so, Ohio Poison Control member and Cincinnati Children’s Hospital toxicologist Dr. Sheila Goertemoeller recently said in an interview with a local television station that the *“toxicology community has been both surprised that this was the ingredient in some of the kits, and also concerned. We have seen exposure in all age groups.”*

Dr. Goertemoeller also stated that her department is *“one of 55 poison control centers and nationwide other poison centers”* that have reported similar findings and states

“there have been more than a couple of hundred exposures nationwide to Sodium Azide in test kits.” According to the Gateway Pundit, nearly 60 million Americans have received free rapid antigen testing kits from the Biden Administration so far. Antigen tests known to contain this deadly chemical include BinaxNOW, Flowflex, BD Veritor, and Celltrion DiaTrust.

To be clear, these tests are not “contaminated” with sodium azide – instead, the compound is intended to be there. The chemical is reportedly used as a liquid reagent and preservative that triggers a chemical reaction after coming in contact with a used nasal swab to help create a positive or negative test.

According to reports, some people have mistakenly used the container of sodium azide as an eyedropper or dipped their nasal swab in the solution before putting the swab in their nose.

What is sodium azide?

According to the U.S. Centers for Disease Control and Prevention (CDC), sodium azide is a *“rapidly acting, potentially deadly chemical that exists as an odorless white solid.”* Sodium azide can be found in the following items or areas:

- Automobile airbags
- Hospitals and laboratories (as a chemical preservative)
- [Pest control](#) and agriculture
- Bomb detonators and explosives

The compound is harmful to human health, explains the CDC because it *“prevents the cells of the body from using oxygen,”* facilitating cell death.

The CDC adds, *“Sodium azide is more harmful to the heart and the brain than to other organs, because the heart and the brain use a lot of oxygen.”*

Symptoms of sodium azide exposure (via inhalation, ingestion, or skin contact) include dizziness, low blood pressure, headache, heart palpitations, skin burns and blisters, seizures, loss of consciousness, and death.

If you ever suspect that you or a loved one are suffering a reaction to a toxic chemical, call Poison Control immediately at (800) 222-1222.

Blackrock’s Edward Dowd Tells Steve Bannon: “Millennials experienced a Vietnam War in the second half of 2021”

The millennial generation experienced 61,000 excess deaths in the second half of 2021. CDC data shows the Millennial generation suffered a [“Vietnam War event,”](#) with more than 61,000 excess deaths in that age group in the second half of 2021, according to an

analysis by a former Wall Street executive who made a career of crunching numbers at BlackRock.

Millennials, about ages 25 to 40, experienced an 84% increase in excess mortality in the fall, he said, describing it as the [“worst-ever excess mortality, I think, in history.”](#) It was the highest increase in excess deaths of any age group last year, seven times higher than the Silent Generation, those who are older than 85.

The increase coincided with the vaccine mandates and the approval of the booster shots.

He said the insurance expert with whom he worked is presenting the data to a financial group and will reveal his identity. [“If you’re on Wall Street and you still think Pfizer and Moderna are good buys, I’ve got news for you: There’s some catalysts coming that are probably not going to be good for holding those stocks.”](#) he said.

Dowd said he also had examined the Pfizer clinical trial data provided by whistleblower Brook Jackson, concluding it, and the fact that Pfizer has tried to hide it, point to “clinical fraud.”

He also posted tables showing excess mortality for Gen X — about age 41 to 56 — since August 2021 was 101,000. The Baby Boomers saw 306,000 excess deaths during the same period.

Watch:

- [Edward Dowd Explains How Thousands Of People Have Died From COVID Vaccines \(rumble.com\)](#)
- [Edward Dowd on Future Recession, Shocking Findings in the CDC Covid Data, and Democide \(rumble.com\)](#)

Insane news item #1: US government to cede control to WHO for future pandemics. This is not a joke.

OK, now the insane news. The U.S. government is about to hand over the keys to the pandemic response to the goofballs at the WHO. The WHO, as we all remember, did not spend a dime on the fastest, safest, and cheapest way to end the pandemic: using repurposed drugs. Even today, they can’t seem to figure out that there are dozens of proven early treatment protocols that save lives. They are corrupt. So why would world governments want to give them the power to exclusively coordinate the pandemic response for the next pandemic?

The bad news: this will soon be a done deal.
Thanks to Mike Yeadon for alerting me to this.

Here’s Mike’s message to me (excerpt):

Steve,

I've heard about this from half a dozen sources & I'm sorry to say that the concerns expressed are wholly justified.

It's a mad idea, but since certain individuals & nations have pretty much taken over the WHO, *I think it's a certainty that, if this new treaty gets signed, within a few years at most, a "public health emergency of International concern" will be declared, and all currently sovereign nations will become controlled subsidiaries of WHO.*

...

No government should even have the power to throw their country over to a third party. If that happened, they'd never give it back.

U.K. parliament signed up to emergency powers on the occasion of the first lockdown over two years ago. That temporary bill has never been repealed. We have no rights whatsoever if they decide we don't. This is the main reason we emigrated.

Here's the best practical reason *not* to sign such a treaty, aside from its anti-democratic central problem:

Imagine there's a new pathogen spreading across the world. Nobody, anywhere, knows what the best response should be. By definition it's not known.

History teaches us that we alight most rapidly upon probable best courses of action, not from modeling, but from empirical evidence. Running a large number of experiments, based on the smartest public health, medical & scientific brains, will quickly tell us what kinds of responses are helpful & which are not. Maintaining very good communication makes sure lessons learned are shared quickly.

The worst conceivable response would be to place the decision making power in the hands of a single body. They'll likely run one experiment. We'll never learn the counterfactual.

On this basis, I don't even understand why anyone would fall for the idiotic notion that letting WHO have the controls would be a great idea. Even if they were honest & competent.

Please let me know if I can help in any way.

Best wishes
Mike

Here's the amazing substack article that describes what is going on. You won't find this anywhere in the mainstream media. It's a long article, but really well done.

James Roguski

[WAKE UP and Smell the Burning of Our Constitution](#)

This is the fourth article in this series. Pandemic Treaty The People's Treaty Speaking Truth To Power WAKE UP and Smell the Burning of Our Constitution Abolish the WHO Pandemic Mitigation Project...

[Read more](#) (Click on to the left)!

This is very alarming. Our government has sold the American public out to the World Health Organization.

The very enzyme that is associated with increased covid-19 mortality is blocked by an ANTI-VENOM compound

04/13/2022 / By Lance D Johnson



The *American Society for Clinical Investigation* published research investigating the biochemical properties of plasma taken from deceased covid-19 patients. The team of researchers wanted to “identify the cellular and molecular mechanisms responsible for severe COVID-19 that led to death.” Patients with severe covid-19 showed mitochondrial dysfunction and elevated metabolites associated with secreted phospholipase A2 (sPLA2) activity. This is the same enzyme that is elevated after a venomous snake bite. Could this increase in sPLA2 be the body's natural reaction to infection, or could it be an indicator that the body is infected/poisoned by something more nefarious — perhaps venomous particles?

“Deceased COVID-19 patients had higher levels of circulating, catalytically active sPLA2 group IIA (sPLA2-IIA), with a median value that was 9.6-fold higher than that for patients with mild disease and 5.0-fold higher than the median value for survivors of severe COVID-19,” the study authors wrote.

Anti-venom compound being studied to help patients with severe covid-19 disease

According to years of biochemical research, a broad-spectrum ANTI-VENOM compound inhibits the very enzyme that is associated with severe covid-19 disease and covid-19 mortality. It turns out that this enzyme (sPLA2) is [inhibited by an anti-venom compound called varespladib](#). Clinical trials show that varespladib is a potent inhibitor of secretory phospholipase A2 (sPLA2). Varespladib has demonstrated improvements in cardiovascular risks, including a reduction in inflammatory C-reactive proteins and a near complete suppression of the target enzyme, sPLA2.

[A Medscape article from November 2020](#) concurred that the lung inflammation caused by covid-19 produces the sPLA2 enzyme. The article also said a more deadly version of the same enzyme is produced by SNAKE VENOM. Researchers are using varespladib as a broad-spectrum, anti-venom drug because it targets this same sPLA2 enzyme. Researchers also want to deploy the [anti-venom compound against severe covid-19 cases](#).

This brings up the question: Could the clinical manifestation of “covid-19” actually be the ill effects of a bioweapon that contains properties from snake venom? This may explain why severe covid patients and those vaccinated with the spike protein mRNA may suffer from dizziness, paralysis, coagulated blood and inflamed lungs. These are all [similar symptoms from a venomous snake bite](#) [Figure 6]. If severe covid-19 involves an enzyme that can be suppressed by anti-venom, does the actual SARS-CoV-2 contain genetic code from snake venom? Furthermore, are the serious cardiovascular effects from the mRNA vaccines related to this same venomous component?

Medical systems profited from covid-19 diagnoses, but understood very little about the pathology behind the actual disease

For two years, hospital systems used a long list of non-specific symptoms to code for “covid-19.” A term called “covid-19” was slapped on patients if “it” was merely “suspected or cannot be ruled out.” Moreover, hospitals relied on [fraudulent PCR tests](#) that were never intended to diagnose a specific infectious disease.

The word “covid-19” has been advertised at a mind-numbing level, without any understanding of the pathology behind the disease label or how hospital protocols exacerbated suffering and death. While the [PCR tests were being used to falsely diagnose](#) common respiratory viruses as “covid-19,” the real bioweapon could have easily evaded detection and caused unexplained inflammation of the lungs and cardiovascular system of older patients and people with comorbidities.

What we've come to know as "covid-19" could actually be a binary weapon based off of snake venom (and other components), which can drive severe inflammation in the lungs and the cardiovascular system. Since the covid-19 vaccines are intended to replicate similar genetic sequences of the spike protein, all these cardiovascular problems and sudden vaccine deaths could be the effects of the same snake venom properties.

Over the past two years, scientists were focused on augmenting an immune response with spike protein mRNA and the public was coerced to go along with the idea that these were life-saving *vaccines*; but the entire scientific and medical infrastructure could have missed the point entirely. We're facing a long war of biowarfare, masquerading as science. The vaccinated could have been poisoned by venomous genetic instructions that poison the lungs, the cardiovascular system and the nervous system.

Maybe this is the reason why the vaccine didn't work after the first dose; this never-ending assault is replicating venomous, poisonous components (that have nothing to do with immunity), and they are sickening the population in a more direct and deliberate manner than the original bioweapon ever could. Maybe this is the reason [why the vaccinated](#) are manifesting severe covid now, [at rates greater than the unvaccinated](#). They are literally being forcefully poisoned to death, dose after dose.



FDA, CDC Guilty Of Clinical Malpractice And Scientific Fraud

Published on April 1, 2022

Written by Dr. David Gortler

Today, unquestionably serious cardiovascular, thrombotic and [neurologic](#) adverse events related to the Covid 'vaccines' have occurred around the world.

The FDA's own vaccine adverse event tracking system (the Vaccine Adverse Event Reporting System or VAERS) shows [substantial and serious risks](#) from the vaccine, even though the FDA only collects an estimated 10 percent of all adverse events.

Still, federal agencies and manufacturers aren't officially warning the American public about these risks, despite having been privy to this information [for almost a whole year](#). Why? Because it would counter the narrative that taking endless vaccines and boosters is your patriotic duty.

It's pretty clear today there are both safety and efficacy problems with vaccines and boosters. Because all of the FDA's 18,000-plus employees had access to the same [drug safety](#) data we have, one must ask:

- Where is the updated Covid-19 labeling reflecting the latest safety and efficacy findings in VAERS?
- Where are the [FDA "Dear Doctor" letters](#) giving updated safety guidance?
- Where are the "Dear Pharmacist" letters to pharmacists who are still daily administering thousands of boosters to kids and other young healthy people?
- Why isn't the FDA recommending follow-up symptom tracking to avoid further inflammatory neurologic/thrombotic/cardiovascular tragedies instead of its proposal to [extend the dosing interval](#) and cross fingers that it would mitigate risk (as there is no concrete clinical evidence that it will do anything)?
- Why is the FDA ignoring internal drug safety epidemiologists who have stated during official FDA presentations that it only takes a [single, well-documented adverse event to justify a safety signal](#) investigation and warning to the American public of the risk?
- Why isn't the FDA demanding studies addressing [genotoxicity](#), [teratogenicity](#), oncogenicity, the potential for [reduced fertility](#) in men and women, the clinical effects of [spike proteins in donated blood](#), and the bioaccumulation of vaccine in women's [ovaries](#)? Why isn't the agency convening and dedicating a [Data Safety Monitoring Board](#) to surveil all these post-marketing effects and others?

Are Americans expected to believe that the \$6.5 billion-per-year taxpayer-funded FDA lacks adequate funding to address all these public health issues?

Not Fully Disclosing Safety Risks To Patients Violates Ethics And States' Licensing Standards

In order for a physician, pharmacist, and nurse, or anyone else with a clinical professional license to work at the FDA or CDC or any other public health agency, that person must have a ["current, active, full, and unrestricted license or registration from any state in the US."](#)

Not *fully warning* patients about the potential dangers from any drug before administering useless and potentially dangerous vaccines and boosters places these professionals' licenses at risk, regardless of what the CDC, FDA, or White House says.

Physicians, pharmacists, and nurses have always been held to a higher standard. They are expected to think for themselves rather than simply take orders.

As the truth is elucidated about vaccine efficacy and safety, these federal employees and mRNA vaccine manufacturers who colluded to withhold information from the public will be held accountable, and the whole “I was just following orders” excuse will not cut it.

Just keeping your head down and cruising through your job, handing out vaccines is not an option when it comes to the lives of your fellow Americans when licensures are held to a higher standard.

Once you see a rash of “early retirements” of federal public health employees (with full federal benefits of course), expect the other shoe will drop and starker evidence of clear malfeasance will come to light. When that happens, the licensed practitioners and scientists responsible for withholding vital health information from the public should be thoroughly investigated by their academic boards and licensing authorities.

Taxpayer-Funded Agency Missions Are Being Ignored

Separate from that, not speaking out appears to directly violate the [Federal Public Health Vision, Mission and Values](#) regarding its very specific obligations and, specifically, relating to sections labeled “public health” and “accountability” and “communication.”

Their silence also contradicts the FDA motto, which is to assure that: “*All food is safe; all medical products are safe and effective; and the public health is advanced and protected.*” The CDC motto pledges to “[Base all public health decisions on the highest quality scientific data that is derived openly and objectively.](#)”

And you know our federal government has jumped the shark on dishonesty when even the unmistakably liberal [New York Times expresses outrage](#) at the CDC’s deliberate omission about mRNA efficacy and safety data.

FDA And CDC Still Pushing The Original, Ineffective COVID-19 Vaccine

In fact, the FDA and CDC officials are still pushing a potentially unsafe and seemingly [ineffective COVID-19 vaccine](#) by purposely hiding facts from the public. The original strain of COVID-19 has been replaced by mutations. Continuing to promote the original vaccine for the mutated strain of COVID-19 is akin to promoting last year’s flu vaccine for this year’s flu strain. The original, Wuhan, China version of COVID -19 doesn’t exist today.

But that hasn’t stopped the FDA or the CDC: Just look at an archived image of [today’s screenshot of the FDA website](#) still pushing boosters onto the American public and even showing images of kids and young adults with bandages from their latest vaccination

and/or boosters, despite the latest CDC data saying that there is essentially no benefit in those younger groups.

The same nonsense can be seen on an archived image of the [CDC's vaccines.gov website](https://www.cdc.gov/vaccines.gov) from today:



Future CDC And FDA Accountability

No scientific accountability will ever take place under the existing leadership. It will likely take a combination of courageous whistleblowers, a strong President who actually believe in “following the science,” and an assertive new Congress to call the necessary hearings and issue the necessary subpoenas to uncover the many [CDC and FDA civil and executive service malefactors](#) who, along with Anthony Fauci, have taken the American people for [fools](#).

These outrageously political, manipulative, science-ignoring federal officials must be held accountable. Of course, nothing will happen to them while the Biden-Harris administration controls the White House and its pliant allies control Congress.

Even worse: If the republicans somehow gain control again, will anyone other than [Sen. Ron Johnson](#) do anything to hold CDC and FDA officials accountable?

Or will they just again “*reach across the aisle*” and try to “*find a middle ground*” and play the whole “*go along to get along*” game and conform to general expectations so as not to disrupt or endanger their elected offices, university club memberships, and general belonging as they have done historically?

It's hard to stay optimistic about the odds.

See more here: americanthinker.com

About the author: [Dr. David Gortler](#) is a pharmacologist, pharmacist, and an FDA and healthcare policy oversight fellow at the [Ethics and Public Policy Center](#) in Washington DC. He was a professor of pharmacology and biotechnology at the Yale University School of Medicine, where he also served at Yale's Bioethics Center, and was an FDA medical officer who was later appointed by the White House as [senior advisor to the FDA commissioner](#) for drug safety, FDA science policy, and FDA regulatory affairs. He is a columnist at [Forbes](#), where he writes on drug safety, health care and FDA policy.

Pfizer, Moderna mRNA vaccines trigger AIDS-like syndrome

04/13/2022 / By Ethan Huff



Autoimmune disease is [spiking in the fully vaccinated](#), and many are now calling the collection of ailments associated with it AIDS-like syndrome.

An eight-year-old boy from Bongará, Peru, as one example, was recently diagnosed with Stevens-Johnson Syndrome (SJS) just days after receiving his second “dose” of Pfizer’s Wuhan coronavirus (COVID-19) “vaccine.” SJS is said to be extremely rare, but the boy, named Richard Jefferson Bustamante Bautista, developed it after getting his second injection of Pfizer’s experimental mRNA drug.

“Stevens-Johnson syndrome (SJS) is a rare, serious disorder of the skin and mucous membranes,” the Mayo Clinic reported. *“It’s usually a reaction to medication that starts with flu-like symptoms, followed by a painful rash that spreads and blisters.”*

Excess deaths overall are also up big time among young people ever since the jabs were introduced. Edward Dowd, formerly of BlackRock, [warned that](#) what is currently transpiring can be compared to the Vietnam War for today's Millennial generation.

Young people between the ages of 25 and 40 saw an 84 percent increase in excess mortality last fall, which Dowd said is the *"worst-ever excess mortality, I think, in history."*

Excess deaths among Millennials were higher than any other age group last year, and a whopping seven times higher than the Silent Generation, which includes people over the age of 85.

Not surprising is the fact that this increase directly coincided with the jab mandates and subsequent approval of "booster" shots for the Fauci Flu.

"Basically, Millennials experienced a Vietnam War in the second half of 2021," Dowd said during a recent interview, noting that 58,000 people died in the conflict.

Are the fully vaccinated all quietly developing AIDS?

While the world has been distracted with the conflict between Russia and Ukraine, the government of the United Kingdom quietly published data showing that people who are triple vaccinated are now just weeks away from developing acquired immune deficiency syndrome (AIDS), if they have not developed it already.

The reason for this is explained [in the Stanford study](#), which explains that the spike protein in COVID-19 injections is lentivirus, which contains a combination of HIV types 1-3, SRV/1 (AIDS), MERS and SARS.

The best-known lentivirus is the human immune deficiency pathogen, which causes AIDS, which explains why we are now seeing autoimmune disease and neurodegenerative decline occur following COVID injection.

The mRNA from the lentivirus cocktail, which is found in the "vaccine," is being inserted into the DNA of human cells through an invasive procedure (injection), *permanently* changing the genome of cells. This devastating condition is also known as prion disease.

Then there is aphasia, a post-injection condition that recently caused 67-year-old Hollywood actor Bruce Willis to retire, ending his career. Aphasia is a common side effect caused by COVID injections, and is associated with brain fog and failure to concentrate.

"Aphasia leaves a person unable to communicate effectively with others," [explained Johns Hopkins Medicine about the language disorder, which affects specific areas of the brain associated with language expression and comprehension.](#)

“Many people have aphasia as a result of stroke,” the resource added.

Stroke, by the way, along with myocarditis and other forms of cardiovascular illness, is another common adverse effect associated with COVID injections. It is occurring in many otherwise healthy young people following the injections.

“It’s five minutes past midnight,” wrote someone at Infowars. *“Wake up: they are murdering us via untested, warp speed COVID-19 vaccines.”*

“Instead of coming out with an actual AIDS vaccine, Fauci came up with a vaccine to give you AIDS,” wrote another.

Snake venom company Venomtech announces partnership with Charles River Laboratories, which ran Fauci’s “secret island” of medical experiments on monkeys and beagles

Thursday, April 14, 2022 by: [Ethan Huff](#)



([Natural News](#)) In order to broaden the scope of its snake venom-derived products which are licensed to pharmaceutical companies for drug development, Venomtech is [partnering with Charles River Laboratories, International Inc.](#), the same company that Tony Fauci [sent hundreds of thousands of dollars to for the creation of transgender monkeys.](#)

In an announcement dated April 12, Venomtech revealed that snake venom-derived peptides are, in fact, real, and are being used to develop novel pharmaceutical therapeutic drugs.

“Millions of years of evolution have made venom-derived peptides highly specific, even for many of the hardest-to-hit drug targets,” the company wrote.

“Venomtech’s Targeted-Venom Discovery Array™ (T-VDA™) libraries provide researchers with a straightforward solution to rapidly screen thousands of individual venom fragments, with each array specifically designed to maximize hits for a specific target.”

Based in the United Kingdom, Venomtech maintains the world’s largest library of naturally sourced venom-derived compounds. Many of these compounds come from snakes, while others come from different species, including both vertebrates and invertebrates.

“Use of our platform increases the likelihood of finding unique and high-value candidates for even the most hard-to-hit drug and pesticide targets, or novel active ingredients for cosmetic applications,” the company says about its products.

Bioweapons containing venom are unleashed, and drugs containing anti-venom are released as a “cure”

If you were able to catch it recently, Dr. Bryan Ardis spoke with Mike Adams, the Health Ranger, about how the Wuhan coronavirus (COVID-19) may also contain components of snake venom.

In the [first part](#) of the three-part series – all three parts are available at [the Health Ranger Report Brighteon channel](#) – Dr. Ardis explained how before the establishment was blaming bats for covid, it was blaming snakes.

So, in addition to drug companies using venom to develop drug treatments, there is evidence being uncovered to suggest that snake venom-like peptides may also be present in bioweapons as well.

It would appear to be the case that the system is playing both sides of every disease outbreak, epidemic, or pandemic. First, someone creates a disease in a lab using snake venom; then they develop a “cure” for it using more snake venom peptides.

A more accurate way to say this is that the bioweapons are the venom, and the drug “cures” are the *anti-venom*. Right now, we are learning a whole lot about both the anti-venom drugs, which few people knew existed, and the venom bioweapons they supposedly target.

Both are unleashed by the same people, presumably, as part of an elaborate, profit-generating scam. Using the Fauci Flu *plandemic* as an example, it appears as though some form of venom peptides were introduced through gain-of-function engineering of the covid bioweapon, followed by anti-venom remedies such as monoclonal antibodies.

Whether or not the “vaccines” also qualify as an anti-venom is still unknown. If “fully vaccinated” people are getting sick and dying from things like heart attacks, then perhaps the jabs are the decoy “cure?”

More is sure to unravel in the coming days, so stay tuned. This bombshell is not going away any time soon, and will probably get even bigger as more details continue to get revealed.

“Well, of course, it’s snake venom: Satan – serpent,” wrote someone at Brighteon. *“It’s all a perfect fit! All explained in the Bible.”*

“This is a crazy thought: they’re injecting everyone with snake venom,” wrote another. *“Of all the creatures possible, it’s SNAKE VENOM.”*

“I can’t help thinking about David Ickes’ rants since the early 90s about the shapeshifting reptiles behind the scenes of the New World Order. Are the ‘snake people’ literally injecting their toxic venom into the human race to begin a feeding frenzy? What does snake venom do? It begins to break down tissues for pre-digestion before the snake swallows the victim whole.”

More Than 1 Million COVID Vaccine Injuries, Nearly 27,000 Deaths Reported to VAERS, CDC Data Show

VAERS data released Friday by the Centers for Disease Control and Prevention included a total of **1,226,314 reports of adverse events** from all age groups following COVID vaccines, including **26,976 deaths** and **219,865 serious injuries** between Dec. 14, 2020, and April 8, 2022.

By Megan Redshaw

The Centers for Disease Control and Prevention (CDC) today released new data showing a total of **1,226,314 reports of adverse events** following COVID vaccines were submitted between Dec. 14, 2020, and April 8, 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 **26,976 reports of deaths** — an increase of 277 over the previous week — and **219,865 serious injuries**, including deaths, during the same time period — up 2,564 compared with the previous week.

Excluding “[foreign reports](#)” to VAERS, [805,921 adverse events](#), including [12,471 deaths](#) and [79,811 serious injuries](#), were reported in the U.S. between Dec. 14, 2020, and April 8, 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 12,471 U.S. [deaths reported](#) as of April 8, 17% occurred within 24 hours of vaccination, 21% occurred within 48 hours of vaccination and 59% occurred in people who experienced an [onset of symptoms](#) within 48 hours of being vaccinated.

In the U.S., 564 million COVID vaccine doses had been administered as of April 8, [including](#) 334 million doses of Pfizer, 212 million doses of Moderna and 19 million doses of Johnson & Johnson (J&J).



Search Results

From the 4/8/2022 release of VAERS data:

Found 1,226,314 cases where Vaccine is COVID19

Government Disclaimer on use of this data

Table

↓ Event Outcome	Count	↑ ↓ Percent
Death	26,976	2.2%
Permanent Disability	50,100	4.09%
Office Visit	187,892	15.32%
Emergency Room	120	0.01%
Emergency Doctor/Room	127,373	10.39%
Hospitalized	149,160	12.16%
Hospitalized, Prolonged	367	0.03%
Recovered	335,081	27.32%
Birth Defect	1,037	0.08%
Life Threatening	30,292	2.47%
Not Serious	548,944	44.76%
TOTAL	† 1,457,342	† 118.84%

† Because some cases have multiple vaccinations and symptoms, a single case can account for multiple entries in this table. This is the reason why the Total Count is greater than 1226314 (the number of cases found), and the Total Percentage is greater than 100.

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 April 8, 2022, for 5- to 11-year-olds show:

- [10,216 adverse events](#), including [242 rated as serious](#) and [5 reported deaths](#).
- [18 reports](#) of myocarditis and pericarditis (heart inflammation). The CDC uses a [narrowed case definition](#) of “myocarditis,” which [excludes cases](#) of cardiac arrest, [ischemic strokes](#) and deaths due to heart problems that occur before one has the chance to go to the emergency department.
- [39 reports](#) of blood clotting disorders.

U.S. VAERS data from Dec. 14, 2020, to April 8, 2022, for 12- to 17-year-olds show:

- [31,048 adverse events](#), including [1,792 rated as serious](#) and [44 reported deaths](#).
- [67 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](#).
- [651 reports](#) of myocarditis and pericarditis, with [639 cases](#) attributed to Pfizer’s vaccine.
- [166 reports](#) of blood clotting disorders, with all cases attributed to Pfizer.

U.S. VAERS data from Dec. 14, 2020, to April 8, 2022, for all age groups combined, show:

- 20% 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 **73**.
- As of April 8, [5,404 pregnant women](#) reported adverse events related to COVID vaccines, including 1,6936 reports of [miscarriage or premature birth](#).
- Of the [3,647 cases of Bell’s Palsy](#) reported, 51% were attributed to [Pfizer](#) vaccinations, 40% to [Moderna](#) and 8% to [J&J](#).
- 860 reports of [Guillain-Barré syndrome](#), with 42% of cases [attributed to Pfizer](#), 30% to [Moderna](#) and 28% to [J&J](#).
- [2,373 reports](#) of anaphylaxis where the reaction was life-threatening, required treatment or resulted in death.
- [1,671 reports](#) of myocardial infarction.
- [13,755 reports](#) of blood-clotting disorders in the U.S. Of those, [6,169 reports](#) were attributed to Pfizer, [4,911 reports](#) to Moderna and [2,654 reports](#) to J&J.
- [4,124 cases](#) of myocarditis and pericarditis with [2,531 cases](#) attributed to Pfizer, [1,402 cases](#) to Moderna and [181 cases](#) to J&J’s COVID vaccine.

Woman develops fatal brain disease after second Moderna dose

Carol Beauchine [died](#) from sporadic [Creutzfeldt-Jakob Disease](#) (CJD), a rapidly evolving, fatal [degenerative brain disorder](#) she developed after her second dose of Moderna's COVID vaccine.

In an exclusive interview with [The Defender](#), Carol's son, Jeffrey Beauchine, said it was excruciating to watch his 70-year-old mother — who was healthy until she got the vaccine — die from a disease he believes the vaccine caused.

Beauchine said Carol received her first dose of Moderna on Feb. 16, 2021, and didn't report any complaints. After getting the second dose on March 17, Carol immediately said she "felt different." She developed numbness that spread throughout the entire left side of her body, blindness and hearing loss. She lost the ability to walk and communicate, and her brain degenerated until she passed away on Aug. 2, 2021 — just five months after receiving her second dose of Moderna.

The family submitted a report to VAERS, but the CDC has not followed up on Carol's death. [The Defender](#) has received numerous reports of people who died from sporadic CJD after receiving a COVID vaccine — all women who were between the ages of 60 and 70, including [Cheryl Cohen](#) and [Jennifer Deason Sprague](#).

Biden administration extends COVID public health emergency needed to keep vaccines under EUA

The Biden administration on Wednesday [extended](#) the COVID public health emergency, now two years old, for an additional 90 days — allowing vaccines and other drugs to remain under Emergency Use Authorization (EUA). Keeping COVID vaccines and other countermeasures under EUA [shields pharmaceutical companies](#) from liability for the harms caused by their products.

According to [Reuters](#), a public health emergency was initially announced in January 2020, when the COVID pandemic began. It has been renewed each quarter since and was due to expire on April 16.

The Department of Health and Human Services (HHS) said in a statement it was extending the public health emergency and will give states 60 days' notice prior to termination or expiration. This may be the last time HHS Secretary Xavier Becerra extends it, according to policy experts.

Pfizer to seek authorization from FDA for COVID booster shot for kids 5 to 11 years old
Pfizer and BioNTech Thursday said they [plan to apply](#) for EUA of a COVID booster dose for healthy 5- to 11-year-olds based on the results of a small study that has not been published or analyzed by independent experts.

Pfizer said in a [press release](#) the third dose of its vaccine produced significant protection against the Omicron variant in children 5 to 11 in a small Phase 2/3 clinical trial. The study was [based on data](#) from only 140 children 5 through 11 years old who

received a booster dose six months after the second dose of Pfizer-BioNTech's COVID vaccine as part of the primary series.

Pfizer claimed a closer look at 30 children showed a 36-fold increase in virus-fighting antibodies — levels high enough to fight the Omicron variant, and that a third dose was “well tolerated with no new safety signals observed.”

Although Pfizer said more than 10,000 children under the age of 12 have participated in clinical trials investigating Pfizer's COVID vaccine, only 140 were selected for the study forming the basis for the company's EUA request.

[It's Time to Follow the Science. Join our Campaign!](#)

CDC launches internal review over failed COVID response

The CDC announced Monday it was launching a month-long comprehensive agency-wide review following widespread criticism of the agency's response to the COVID pandemic.

The agency plans to evaluate its structure, systems and processes, CDC Director Dr. Rochelle Walensky told staff in an email obtained by [The Washington Post](#). Walensky said the goal of the review is to “modernize” the agency and “to position CDC, and the public health community, for greatest success in the future.”

The review will be conducted by Jim Mcrae, associate administrator for primary healthcare at the Health Resources and Services Administration (HRSA). The HRSA and the CDC are part of the Department of Health and Human Services.

Last month, the CDC's decision to [remove from its data tracker website](#) tens of thousands of deaths linked to COVID — including nearly a quarter of the deaths the agency said had occurred among children — eroded public trust in the CDC's handling of case counts.

[Children's Health Defense](#) asks anyone who has experienced an adverse reaction, to any vaccine, to file a report following [these three steps](#).



FDA Perpetuates Failed Strategy in Latest VRBPAC Meeting on Flu Shots

You've heard the saying: Insanity is repeating the same failed actions in the expectation of different results. Once again, the FDA is exemplifying this pattern of human folly with its latest round of flu shots. Once again, we are fighting back through our attorneys with a recent [letter](#) to VRBPAC and the FDA.

Last year, on March 5, 2021, the FDA convened its Vaccines and Related Biological Products Advisory Committee (VRBPAC) to discuss the formulation of influenza vaccines for the 2021/2022 season. And, true to form, it rubber-stamped the one-size-fits-all recommendations of the World Health Organization.

But, according to the FDA's own recent findings, this concoction proved, according to its own data, to be only 8% effective against influenza A and 14% effective against influenza A/H3N2. The analysis even included the possibility of negative efficacy against both of these strains! Meaning it is possible it made those that got the shot more likely to have the flu. The FDA also looked at an influenza outbreak at a large university campus in the fall of 2021, where the vaccine's effectiveness proved to be zero!

So, did the FDA learn from its mistakes, go back to the drawing board, and revise its methodology? Not one bit! When the committee met again for four hours on March 3, 2022 to prepare for the 2022/2023 influenza season, it replicated the same broken process all over again!

And the insanity walked hand in hand with its close cousin, ignorance. At VRBPAC's most recent meeting, committee member Dr. David Wentworth stated, "There is no such thing as negative VE [vaccine efficacy]." But a large body of literature shows that some vaccines do indeed lead to more cases of the ailment they are supposed to mitigate and to worse outcomes than not vaccinating at all. This happens in part through "antibody-dependent enhancement."

Perhaps unsurprisingly, there was no discussion of adverse events in the latest meeting. This prompted ICAN, through its attorneys, to send a [letter](#) to VRBPAC and the FDA. In it, we note that the flu shots contain squalene oil which is *“linked with a wide range of adverse effects including autoimmunity.”* Taking all this into account, the committee’s recommendations *“will likely leave patients worse off, which is a violation of your duty of care.”*

Though we have learned to laugh at the absurdities enthroned in government, these particular absurdities do not fold away with the theater in which they’re played because, as we [told](#) the FDA, *“many institutions convert your recommendations into rights-crushing and informed-consent-eliminating mandates.”* The letter concludes: *“The American people deserve better”* and notes that the FDA has *“a duty of care to remove approval and recommendation for this product.”*

One wonders what cognitive dissonance is at work when the vaccine committee meets, what elephants in the room are being ignored, what financial incentives are in play. The FDA has already inflicted irreparable damage to public trust in recent years, yet it seems as determined as ever to squander what little credibility it has left. As we have seen, viruses are agile and mutable. The FDA is neither.

To share this legal update, please use this

link: https://www.icandecide.org/ican_press/fda-perpetuates-failed-strategy-in-latest-vrbpac-meeting-on-flu-shots/

Watch for a Special Edition Update on the Dr. Bryan Ardis’ revelation exposé on Snake Venom and the Covid-19! This is pure evil straight from the pit of Hell but it is True!

**Your Government wants you DEAD!
This includes the CDC, NIH, NIAID,
and the World Health Organization!!**



Blessings,

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