

Mass Murder

By Sovereign State Sanctioned Syringe Needle!
Part 78

It is painful to say the least that it has become necessary to publish this series week after week. The previous 77 segments of Mass Murder are a collective resource of the crimes against humanity in order to bring in Klaus Schwab's Fourth Industrial Revolution, in short called "The Great Reset". Once I have posted a segment, I begin to work on the latest evidence that comes into my mail box.

For the past two years and counting is a reminder that much of humanity has been gas lighted into the psy-op of "mass formation psychosis". I am including an article below on page 2 that was posted this past week. Surprisingly, a number of sources have suddenly caught on to the psychological tricks governments have been playing on its citizens as it attempts to exterminate them from the planet. World governments have used this psy-op of "mass formation psychosis" to actually get people to commit their own suicide through poisoned vax gene-therapy. "Mass formation psychosis" explains how Hitler and Stalin were so successful in killing their citizens.

This is absolutely horrendous!!!

33 Dead & Sick Friends Since Our Wedding Only 8 Months Ago. All 33 Vaxxed. A "Vaccine Death & Disease Cluster."

by Wayne Allyn Root | RootForAmerica.com

Yes, you read correctly. There are (so far) 33 friends and relatives dead or sick since our wedding eight months ago. I've done the research. All 33 were vaxxed. Every one of them.

This is a "vaccine death and disease cluster."

This is like the "Love Canal" cancer cluster of the 1970s. It can't be ignored when you see so many people dead, or very ill in just one group.

But it has nothing to do with our wedding. Open your eyes. This is happening everywhere. Non-Covid deaths are up dramatically in the United States (and all over the world). Life insurance companies report non-Covid deaths are up 40% or more among young, working age Americans. Lincoln National reports death benefit payouts are up over 163% in the year since Covid vaccines came out. These are death increases not seen during World War II.

Read the headlines - every day a new celebrity, actor, rock star, athlete or CEO is dropping dead “suddenly and unexpectedly.” Most of them are way too young to die, or suffer strokes or heart attacks. I’m betting they all have one thing in common - they are VACCINATED.

Mass Hypnosis and the Gateway to Tyranny

By John Roberts | *TCW Defending Freedom* | July 30, 2022

LATELY I have been listening to interviews with Mattias Desmet, the Belgian psychologist who has popularized, if not invented, the term ‘mass formation’, a sort of mass hypnosis, a condition which he says often leads to tyranny. If I understand him correctly mass formation occurs when people feel estranged from each other and the world around them, they lack purpose and feel out of control.

Fear is an important factor in this and frightened people are amongst the easiest to hypnotize since they will unquestionably follow an ‘authoritative’ voice. The door is open for someone to come along and offer them a place to belong, make them feel safe and give them a purpose. Thus the tyrant is born. Desmet contends that although this has happened throughout history it has become more common in modern times because we have become increasingly estranged from nature, and he attributes this to the invention of the clock.

As soon as reliable clocks were available, people in their everyday lives were less influenced by the sun and the seasons. Reliable clocks are a symbol of industrialization, and this has led to movement of people into cities and consequently less in touch with nature. The mechanization of agriculture gave us the ability to feed large numbers using very little labor. Cheap energy from oil and coal accelerated this industrialization. Cities and towns have benefits: it’s easier to provide services including education and health, clean water, power and transport, and as someone who lives in a rural area I am well aware of the difference. This has happened in a very short space of time to a species which has evolved over millennia as part of the natural world. In truth we are as much a part of nature as trees, earthworms, bacteria and viruses (although it’s debatable whether or not the current coronavirus is natural).

There’s a wonderful grounding reality about the natural world. Gravity is all too real if you fall out of a window, and rain, wind and sunshine can make you feel wonderful or damage your health. Childbirth is both joyous and potentially fatal. Relationships can be enriching or toxic.

All this may sound obvious, but doesn’t seem to be for many of our fellow citizens who think that bad things shouldn’t and wouldn’t happen if the State took proper care of us which, of course, it promises to do: that voice of authority again.

This detachment from the real leads to living too much in the head. Your ideas, arguments, your emotions become the greater part of your reality. The constantly chattering voice in your brain becomes louder unless you can ground yourself. This is the default position for many and it can be dangerous. The signs are everywhere.

Climate change is one such situation. As we know all too well, this is the idea that a small increase in the atmosphere of a trace gas which is essential to life is responsible for rising global temperatures, storms, mass extinctions, diseases, and I could go on but you've heard it all before. Some say that this is proven to be true and the science is settled and isn't science a really good way of connecting with the real world? Yes, when it isn't manipulated for political purposes or carried out by people who think that computer models are the real world.

Talking of modelling takes us to Covid. Policy to deal with the virus was largely driven by models which chimed with certain political aims and gave rise to disastrous consequences. For many years the UK had a pandemic policy based on accumulated data and real-world results of public health interventions, yet this policy was thrown out and its proponents, people at the top of their field, were ignored, smeared or insulted and often all three. Vilification of 'outsiders' is another aspect of mass formation. The fact of natural immunity was debunked by people who could not admit to the existence of this wonderful example of the interrelationship between us and the rest of nature.

Now we come to woke, perhaps the most glaring example of living in your head instead of the real world. The hallmark of this is a belief in something that defies logic, history and science (the real thing, not the made-up stuff). No amount of education or reasoning permeates the world that is firmly embedded in the head. The transgender issue is an astonishing example. It wouldn't be so bad if these ideas stayed inside the head but they escape into the real world where they can have serious consequences: men in female prisons and hospital wards, and male athletes competing in women's sports events for example. I have heard of midwives saying that a man can have a cervix. I suppose the beings in your head can have any anatomy you want. I'm just waiting for the day when gravity is seen as a Western construct and people start walking off cliffs.

When challenged, those who live in their heads can react aggressively because you have challenged their very being. Perhaps the most frightening consequence of this detachment from reality and its subsequent mass formation is illustrated by the thoughts of Dr. Yuval Noah Harari, adviser to everyone's favorite human being, globalist Klaus Schwab. Harari believes that 'science is replacing evolution by natural selection with evolution by intelligent design'. Not sure how the word 'intelligent' belongs in that sentence, but he seems to show a complete lack of understanding of the real world and the way everything in it is connected. Harari suggests that it will be possible to tweak human DNA in the way that we can alter computer coding. Very few processes in the body are controlled by one gene;

physiological activity results from the interaction of many genes which may be on different chromosomes. Tinkering with a few genes is likely to have unforeseen consequences. Our DNA is intimately connected to the outside world. We express genes in response to outside stimuli, viruses incorporate themselves into our DNA and our body's immune history is written in our genes. In short, our DNA is finely tuned to nature and to suggest that manipulating the various molecules in its strands will improve our lot is hubris beyond belief. Perhaps in Harari's head we are all machines. Maybe he finds that comforting.

Share this:

Leaked database shows U.S. military disease skyrocketing after Covid-19 inoculations

JULY 30 Posted by Editor, cairnsnews

Data leaked from the Defense Health Agencies Defense Medical Epidemiology Database (DMED) shows skyrocketing levels of disease among military personnel. Keep in mind that those in the military are daily engaged in physical training, at least one hour in the morning before breakfast, five days a week!

Percentage Increase Over The Last Five Years to 2021- imagine where that is today?

- ▲ Heart Attacks 269%
- ▲ Pericarditis 175%
- ▲ Myocarditis 285%
- ▲ Pulmonary Embolisms 467%
- ▲ Cerebral Infarction 393%
- ▲ Bell's Palsy 319%
- ▲ Guillain-Barre 250%
- ▲ Immunodeficiencies 275%
- ▲ Menstrual Irregularity 476%
- ▲ Multiple Sclerosis 487%
- ▲ Miscarriage 306%
- ▲ HIV 590%
- ▲ Chest Pain 1,529%
- ▲ Labored Breathing 905%

Share this:

15% of American Adults Diagnosed With New Condition After COVID Vaccine, Zogby Survey Finds

July 30, 2022 TLB Staff



15% of American Adults Diagnosed With New Condition After COVID Vaccine, Zogby Survey Finds

More than two years after Operation Warp Speed began, Children's Health Defense commissioned John Zogby Strategies to conduct two surveys about attitudes and the overall health of American adults.

More than two years after Operation Warp Speed began, [Children's Health Defense](#) (CHD) commissioned John Zogby Strategies to conduct two surveys about attitudes and the overall health of American adults.

The first [survey of 1,038 adults](#) found that 67% of respondents received one or more [COVID-19](#) vaccines, while 33% are unvaccinated. Furthermore, among those vaccinated, 6% received one dose, 28% received two doses, 21% received three doses, and 12% took four or more.

Of those receiving a COVID-19 vaccine, 15% say they've been [diagnosed](#) by a medical practitioner with a [new condition](#) within a matter of weeks to several months after taking the vaccine.

A follow-up question provided a list of medical conditions and asked diagnosed respondents to "select all that apply." Among those who were medically diagnosed with a new condition within a matter of weeks to several months after receiving a COVID-19 vaccine, the top five cited conditions were:

- 21% [blood clots](#)
- 19% [heart attack](#)
- 18% [liver damage](#)
- 17% [leg clots/lung clots](#)
- 15% [stroke](#)

Overall, 67% reported that getting the vaccine was a good decision, 24% were neutral and 10% regret it.

Survey participants were then asked if someone they personally know had been medically diagnosed with a new medical condition within the same time frame. Overall, 26% reported yes, while 63% reported no.

In the second [survey of 829 adults ages 18-49](#) found that 62% of respondents received a COVID-19 vaccine, while 38% are unvaccinated.

Among those receiving any COVID-19 vaccine, almost one quarter — 22% — report being medically diagnosed within a matter of weeks to several months after the shot.

The top five cited new conditions include:

- 21% autoimmune
- 20% blood clots
- 19% stroke/lung clots
- 17% liver damage/leg clots/heart attack
- 15% disrupted menstrual cycle/Guillain-Barré/Bell's palsy

Regarding describing the conditions, 47% report mild, 43% report serious and 10% report severe/still recovering.

Describing their experience with taking one or more COVID-19 vaccines, 58% report it was a good decision, 28% are neutral and 14% regret it.

Finally, 30% of those ages 18-49 report knowing someone else who has been medically diagnosed within a matter of weeks to several months after taking a COVID-19 vaccine.

In other findings, regarding trust in the government to handle future pandemics among the all-adults survey — 23% say it has increased, 34% say it has decreased, 32% say it has remained the same and the rest were unsure.

The surveys included 1,038 American adults of all ages (MOE +/- 3.1) and 829 18-49-year-olds (MOE +/- 3.5). Both polls were fielded July 22-24, and data sets were pre-stratified and weighted to be representative of their respective populations. Error margins are higher for subgroups.

CDC told Big Tech to censor COVID claims now debated by mainstream scientists, documents show | 29 July 2022 | The newly revealed scope of collaboration between the feds and Big Tech in stamping out purported COVID-19 misinformation and promoting government narratives has opened a new chapter in constitutional challenges to state-influenced censorship by private actors. On Wednesday night, America First Legal (AFL) published the first 286-page batch of emails among CDC, Google, Twitter and Meta staffers,

some of whom were former Hill and White House aides. The production was compelled through a Freedom of Information Act lawsuit, and typical of government document dumps, it's not text-searchable. The emails show intimate cooperation was well underway by the time the White House a year ago acknowledged the effort, which included thinly veiled threats for not more aggressively removing content.

500 Fired Health Care Workers Win Historic Multi-Million Dollar Settlement in COVID Mandate 'Wake-Up Call' | 29 July 2022 | Health care workers who were fired for not getting a COVID shot have won a major victory. The Liberty Counsel has announced a "historic" 10.3 million settlement in the nation's first-of-its-kind class wide lawsuit. The class action settlement against NorthShore University HealthSystem is on behalf of more than 500 current and former health care workers who were unlawfully discriminated against and denied religious exemptions from the COVID shot mandate, according to the non-profit religious rights law firm. The settlement was filed Friday in the federal Northern District Court of Illinois. The settlement must be approved by the court.

IMPORTANT ARTICLES YOU NEED TO BE AWARE OF FROM AROUND THE WORLD

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

News you need to know:

[New England Journal of Medicine: Unvaccinated COVID Patients Are Contagious for LESS Time Than those Vaxed or Boosted.](#)

We celebrate out our ally, Jacob Joseph, who has brought light to the information about the Ebola (Marburg) outbreak with his movement. Be sure to check out his mission statement:

[Marburg and Ebola Vaccine Development And Investment](#)

[Washington, DC Child COVID-19 Vaccine Mandate Illegal: Legal Expert](#)

[Poll findings about vaccinating kids](#)

[Investigation of the Covid-19 Vaccine makers](#)

[Scientists Confirm COVID Vaccines Contain Nanostructures Colonizing In The Human Body](#)

[After Shanghai, here come Lanzhou food shortages: It is difficult to buy vegetables](#)

[Kary Mullis: Is This Why They Killed Him?](#)

[No Needle Vaccines](#)

[Ebola research gets funding](#)

[Dr. Peter McCullough – The Vaccines are Killing People](#)

[The midterm variant](#)

[By injecting children, could we be creating eunuchs, who can choose and change their gender identity using external means?](#)

[The Beginning of the End of 'Gender-Affirming Care'?](#)

[Twitter Stops Censoring Epoch Times Content After Outcry](#)

['A Monumental Undertaking.' New Lawsuits Allege Prenatal Link Between Acetaminophen and ADHD, Autism](#)

[Dutch Citizens Clash With Police in Almelo Amid Their Efforts to Defend the 'No Farms, No Food' Mural](#)

[Biden Names FEMA, CDC Officials to Head Monkeypox Response](#)

[Attny Todd Callendar: Marburg Will Be Activated in the Vaccinated Via 5G](#)

[Todd Callendar: Marburg Virus](#)

[Deaths registered weekly in England and Wales, provisional: week ending 22 July 2022](#)

[Your Children Deserve More Than "I was following what I was told"](#)

[Australian Sen. Alex Antic Lays Out the Cabal's Plan for Absolute Power](#)

[Articles of Inquiry: The Role of Media](#)

[Pay Attention To The Dutch Farmer Protests Because America Is Next](#)

[Dr. Peter McCullough On Treatment, Vaccines, and Censorship](#)

[5G Technology is Coming – Linked to Cancer, Heart Disease, Diabetes, Alzheimer's, and Death](#)

[The vaccinated Are NO LONGER HUMAN? - Attorney Todd Callender](#)

['The Mask Is a Symbol of Slavery'](#)

[Imposing the New World Order](#)

[Dutch Police Brutally Assault Farmers](#)

[How Spirituality Can Benefit Mental and Physical Health](#)

[Renowned Molecular Biologist Accuses Fauci Of Lying To Congress About Gain-Of-Function Research](#)

[Lewis demands answers on Sudden Adult Death Syndrome](#)

[Attorney Todd Callender Itemizes Laws Being Violated By COVID-19 Mandates](#)

[Dr. Peter Chambers & Todd Callender - WHO Pandemic Treaty & War on Humanity](#)

[Family of 27-Year-Old Who Died After AstraZeneca Shot Weighs Legal Action](#)

[Health and Wellness Resources](#)

[Study Pre-Print: "We find that the COVID-19 vaccination campaign did not reduce all-cause mortality during the covid period"](#)

[How the CDC Coordinated With Big Tech To Censor Americans](#)

[Big Tech Continues to Censor but People Continue to Wake Up](#)

IT'S ALL A LIE – Where is the 'Straight-Sex' Monkeypox Outbreak?
BY THE EXPOSÉ ON JULY 30, 2022

Why is it that mainly gay men disproportionately appear in the data on monkeypox?

Why is it that scientists fail to query this type of biased data, especially after the last two years of blatant lies and untruths from all our governments and in the United Kingdom (UK) the National Health Service (NHS) and its UK Health Security Agency (UKHSA)?

The levels of heterosexual 'partner change' and sexual repertoires (including heterosexual anal sex) on a nighttime in any major city should easily facilitate a so-called heterosexual 'monkeypox epidemic' if it is correct that the so-called 'monkeypox virus': i) exists; ii) transmits sexually; and iii) causes disease.

Let's not lose touch...Your Government and Big Tech are actively trying to censor the information reported by The Exposé to serve their own needs. Subscribe now to make sure you receive the latest uncensored news in your inbox...

By Dr. Kevin Corbett

The recent WHO statement by Drs. Tedros/Lewis announcing yet another global panic, this time for 'monkeypox', was laughably unscientific. It suggested that once covid travel restrictions were lifted, and greater numbers of people started to move around the world, a 'monkeypox virus' transitioned through 'families' (apparently without 'infection') and made a B line straight for gay men. The fact is that this fairy story from the WHO is just that.

The UKHSA are 'case finding' in a very biased manner amongst a captive market of 'sexual health' clinic attenders; many of whom are diagnosed HIV+ and are prescribed toxic antiretroviral drugs (ARVs). The ARVs are monitored with 6-monthly 'viral load' (PCR) tests. Another PCR is now thrown into the fray for so-called 'monkeypox' especially if 'skin lesions' / 'cold symptoms' exist. 'Case finding' means that the UKHSA is biased in the way that it intensively tests different patient populations and ignores others. For example, it is easy to PCR test HIV patients as they attend clinic regularly and are used to testing, especially the PCR (viral load) tests. The UKHSA is therefore constructing an epidemic by biasing their testing towards patient populations that they find easy to access and control, and within which there exists disproportionate numbers of gay men like those diagnosed HIV+. This explains the biased demographic and lack of 'straight-sex' monkeypox.

Many scientists seem to take this biased UKHSA data grab at face value because they do not know the literature on how this was similarly falsified previously in the so-called AIDS 'epidemic'. For example, the way this was deceptively done by the CDC was described in great detail by Michelle Cochrane in her excellent 2003 book 'When AIDS Began' (Routledge). Cochrane proved, using hard data and granular case examples, exactly how the CDC created the false notion of their existing a rampant 'epidemic' amongst groups of 'gay men' by focusing on patients' sexual orientations to the exclusion of their other demographic risk characteristics, such as recreational/intravenous drug use, over use of prescription medications, homelessness, malnutrition etc.

Recently I have been speaking to people who have reportedly been diagnosed with so-called 'monkeypox' who I would like to thank for coming forward and talking to me. What is apparent from these accounts is that there is no uniformity to the reported 'lesions', or even their case histories. One common factor in all of these accounts is the use of sensitive PCRs without any gold standard isolated or purified virus to validate their diagnostic specificity. The reason for this is that

just like 'HIV' and 'SARS-CoV-2' there is no isolated / purified 'monkeypox virus', a fact which the US medical doctor, Dr. Andrew Kaufman, recently demonstrated at length in a detailed video presentation, and again in the Monkeypox Mania Summit video.

The fact of there being no isolated monkeypox virus (despite WHO claims) was recently echoed by one UK microbiologist, who told me: "...at least with gonorrhea we've got the real bacteria in purified form to validate our PCRs". The ongoing lack of proof for viral isolation which backfired on the authorities and confounded the Covid19 data has recently been super charged in a written challenge from a group of high profile scientists, led by Dr. Tom Cowan and including Dr. Andrew Kaufman, Drs. Sam & Mark Bailey, Dr. Stefano Scoglio, Dr. Paul McSheehy, Dr. Mike Donio, Professor Tim Noakes and Dr. Mike Yeadon. The scientific challenge to mainstream virology is to unequivocally prove the existence of viruses per se.

However, just like the flawed PCRs used in the covid-era without any isolated / purified 'SARS-CoV-2' and only an in silico modelled gene sequence, those monkeypox PCRs now being used on HIV+ patients taking ARVs will more often than not test positive, because those patients are more likely to have higher levels of cellular oxidative stress. Another common factor in the accounts that have kindly been shared with me is that the virologists and genitourinary doctors are only interested in patients' sexual activity. In so doing they fail to take full histories that pay due regard to all of the other reasons why people can develop dermatological signs and symptoms e.g. the toxic prescription drugs (like ARVs), the systemic and local effects of recreational drug use which today employs very powerful and potentially toxic chemicals like opiates, crystal meth, mephedrone, ketamine, GHB; and other highly relevant factors etc.

It would therefore appear that the virologists and genitourinary doctors working in these misnamed 'sexual health clinics' are sex-obsessed to the exclusion of all other life-style factors. This could have major potential relevance for their patients' health and illness, and bias even further the scientific characteristics that they are supposedly reporting on as medical scientists.

I am reliably informed that the UKHSA are under pressure by the WHO through their bioweapon centre at Porton Down to create another post-covid epidemic. Thus, despite the claims of Brexit, the UK health service has lost any remaining shreds of its scientific sovereignty by truly becoming an infrastructure of contagion-fear, a regional outpost of the WHO, redesigned following covid to funnel antivirals and quackcines into the UK population. It is very sad that more scientists cannot see this false epidemic for what it is.

Kevin Corbett MSc PhD is a health scientist and qualified general nurse who has worked in family planning and sexual health.



ERADICATE | MAN-MADE | DISEASE®

ICAN EXPOSES FINANCIAL INTERESTS IN FDA COMMITTEE MEMBER

Friend,
ICAN has sounded the alarm.

We uncovered more disturbing information from the FDA's Vaccines and Related Biological Products Advisory Committee's (VRBPAC) unanimous vote which recommended an emergency use authorization for both Moderna's COVID-19 vaccine for children ages 6 months to 17 years and Pfizer's COVID-19 vaccine for children 6 months to 4 years.

Each member of the committee must meet the standard that the "FDA has determined that all members of this advisory committee, both regular and temporary members, are in compliance with federal ethics and conflicts of interest law."

ICAN exposed there is a clear financial conflict of interest with committee member, Dr. James Hildreth.

This temporary voting member, Dr. James Hildreth, received a [waiver](#) allowing him to participate in the VRBPAC meeting. In his Acknowledgement of Financial Interests form, Dr. Hildreth [disclosed](#) that both he and his employer had financial interests that could be affected by the matter he was planning to voting on at VRBPAC.

What are his financial interests?

Dr. Hildreth's employer, Meharry Medical College, is a COVID-19 vaccine trial site and expected to receive between \$1.5 million to \$2 million for conducting that trial.

Meharry Medical College enrolled participants in the trials for the very product that was being considered by him at VRBPAC – Moderna’s pediatric COVID-19 trials – for which it was to receive \$400,000 - \$600,000.

Shockingly, Dr. Hildreth also disclosed that he would personally make up to \$5,000 for enrolling participants in one of those trials.

This is outrageous.

ICAN, through its attorneys, demanded that VRBPAC immediately remove Dr. Hildreth as a temporary voting member, bar him from participating the following day, and discard his vote from that day’s meeting.

VRBPAC instead, unbelievably, [recited](#) the very same Conflict of Interest Statement the next day, assuring the public that “all members” of VRBPAC “are in compliance with federal ethics and conflicts of interest laws.”

And Dr. Hildreth voted “yes” to all three products being considered, two of which were Moderna pediatric vaccines.

ICAN continues to build the case against the nefarious actions by these “health” agencies. They will not be able to claim ignorance when judgment day arrives.

(Natural News) Every western government is run by Satanists, and they are now openly carrying out public rituals to celebrate Lucifer’s (temporary) dominion over Earth.

At the British Commonwealth Games opening ceremony this week (involving 72 nations), a horned bull creature representing Baal was rolled out in a hell’s cape arena, complete with depictions of burning lava fire pits, while dozens of satanic worshipers bowed to the demon creature as part of the public ritual. This was publicly broadcast in broad daylight, indicating that the Satanists are no longer trying to hide their rituals in dark forests and secret dungeons... they’re now invoking Satan right out in the open, for an international audience.

The following screen grabs are from a video posted by Amazing World Ministries which has superimposed scripture indications that are relevant to the events. (See 2 Kings, and Revelation chapters 13 and 14 to read up on what you’re seeing.)

In this first frame, the hells cape lava fire pits burn in a ring around the arena as Satanists clad in ritualistic clothing bow down before Baal, the horned demon creature, raging with fire and breath:



Here, we see how the two groups of humans, one of them representing globalist Satan worshipers, hold their hands in “prayer” before Baal, the demon creature, and worship his presence on the “stage” of Earth:



Here's another view showing you the immense size of the Baal creature, which is illuminated with fiery red lights and smoke, indicating its origins from Hell:

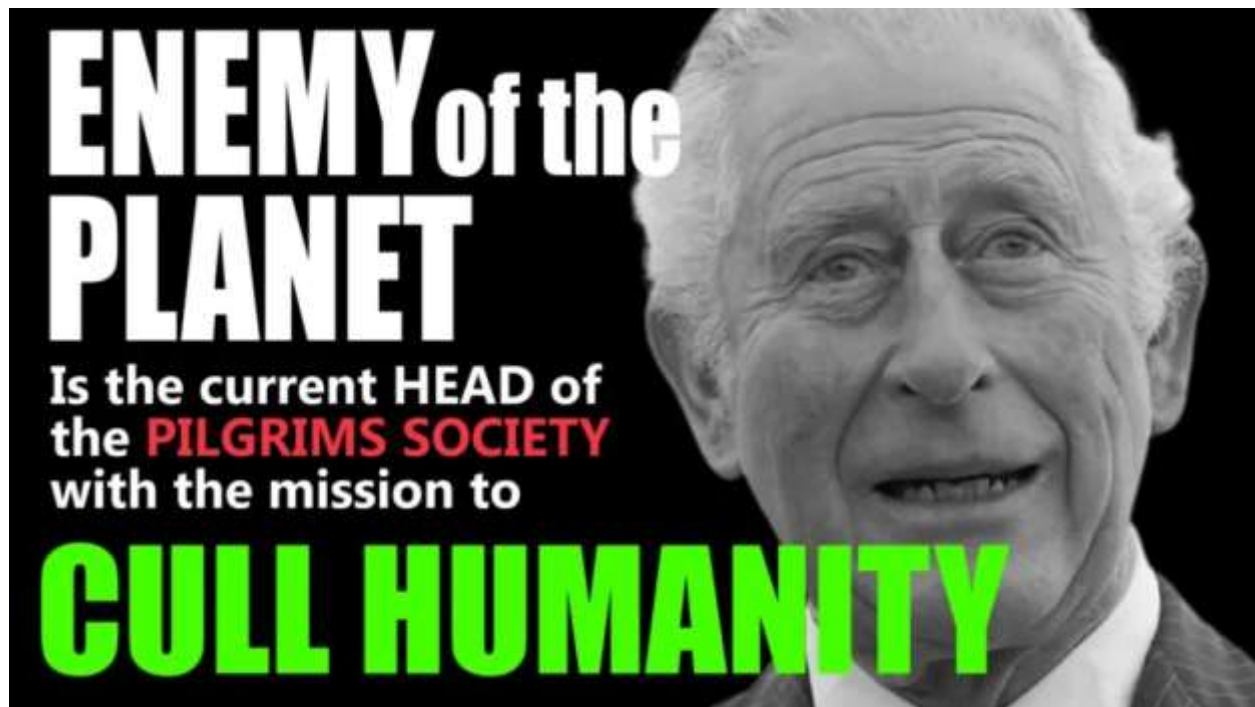


According to The Guardian, 72 nations are participating in this demon worship ritual, which was augmented by music from *Black Sabbath*, a Luciferian rock band.

This Satanic celebration was opened and hosted by the Antichrist himself, Prince Charles of Wales.

The Bible indicates that most of the Christian world will not know who the Antichrist is at the point just prior to the Pre-Tribulation Rapture of the born-again believing Christian. To say that most Christians will not know this man is somewhat misleading since Prince Charles of Wales was revealed in Tim Cohen's Book *'The Antichrist and a Cup of Tea'*. The Bible does not say "NO ONE" will know of his identity. You can also read my article "The Satanic Talmud & The Synagogue of Satan--Part 6" posted on Wednesday, 02/26/2020. Click on the link directly below:

[The Satanic Talmud & The Synagogue of Satan--Part 6](#) See the evidence for yourself. Most Bible prophecy teachers will not touch this. Prince Charles of Wales is the senior Freemason of the Order of the Garter, to which all Grand Lodges of Freemasonry are subservient to. The Prince just accepted a huge donation from the head of the Bin Laden family in Saudi Arabia. In case you have forgotten who the Bin Laden family are, they are the leading family in the construction business in Saudi Arabia and the blamed for the destruction of the World Trade Center #1 and #2 on 9/11/2001. This event is further evidence of how close we are to the Pre-Tribulation Rapture of the Bible-believing Christians!



You can watch the full video at this link:

[Brighteon.com/9b72e23f-72d6-4ad1-bc04-cf9225881517](https://www.brighteon.com/9b72e23f-72d6-4ad1-bc04-cf9225881517)

Here's a partial image from [TheGuardian.com](https://www.theguardian.com), photograph by Neil Hall, which shows the depiction of the two-headed Church beast, animated by small skeleton creatures dressed in darkness and death. This image shows how various renditions of the Church (i.e. the Vatican and the Pope) are actually puppets of the luciferin death cult, literally being "propped up" by the undead:



The iconic image from the Luciferian ritual opening is shown below, notice the use of fire and smoke to indicate a “world on fire” while Satan’s Baal demon creature is now glowing with light, center stage, indicating that Satan rules over Earth and commands the nations of the world into war:



From *Revelation*, chapter 13:

“The beast was given a mouth to utter proud words and blasphemies and to exercise its authority for forty-two months. ⁶It opened its mouth to blaspheme God, and to slander his name and his dwelling place and those who live in heaven. ⁷It was given power to wage war against God’s holy people and to conquer them. And it was given authority over every tribe, people, language and nation. ⁸All inhabitants of the earth will worship the beast—all whose names have not been written in the Lamb’s book of life, the Lamb who was slain from the creation of the world.

... It also forced all people, great and small, rich and poor, free and slave, to receive a mark on their right hands or on their foreheads, ¹⁷so that they could not buy or sell unless they had the mark, which is the name of the beast or the number of its name.

This calls for wisdom. Let the person who has insight calculate the number of the beast, for it is the number of a man.[e] That number is 666.”

Celebrity chef Gordon Ramsay goes “full demon” while stalking frightened lambs, drooling out, “Oven time!”

As yet another display of the pure demonism and luciferin evil that is taking over our world, celebrity chef Gordon Ramsay — of “Hell’s Kitchen” fame — proudly released a video where he is stalking frightened lambs, declaring, “I’m going to eat you!” and asking, “Which one’s going in the oven first?”

He then stalks the lambs in a Gollum-like posture, invoking the full power of the demons that have seemingly possessed his once-human form, calling out, “Oven time!” and declaring “Yum, yummy yum!”



The scene is almost perfectly ripped from the *'Lord of the Rings'*, where Smiegel (Gollum) is beating a fish to eat it raw:



It's not merely the fact that Gordon Ramsay thinks his creepy lamb stalking video is suitable for the public; it's also that he has no idea how evil and demonic he looks — which is exactly what we would expect from someone who is demonically possessed and no longer has any human empathy or compassion.

Even people who eat beef, pork, chicken or lamb *don't stalk individual animals*, drooling over which one they're going to send into the oven to eat them. But for Ramsay, the suffering and killing of an innocent animal appears to be part of the "joy" of his cooking, as if he actually enjoys the killing of frightened lambs.

No doubt, Ramsay will soon be advocating cannibalism and drooling over which humans to send to the ovens first.

The portals have opened, the demons are spilling out, and humanity faces Biblical end times in the ultimate battle between good and evil.

The entire point of these demonic rituals is to open portals that allow demonic entities to enter the physical Earthly realm and either take possession of humans or literally take physical form themselves. Demonic influence and possession are now on the rise globally, and as Gordon Ramsay clearly demonstrated, demons tend to target influencers and celebrities in order to seize their bodies and use them to promote death and destruction.

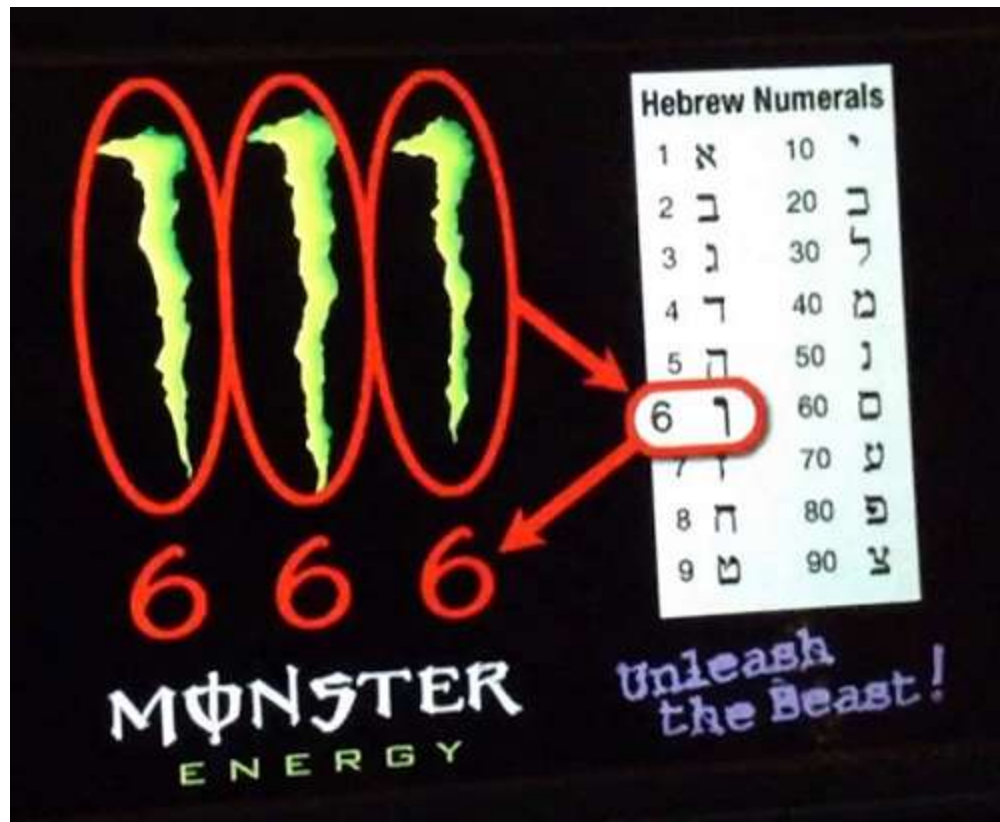
Rituals are tools of summoning to bring demonic entities into this world. The more people that are involved in the ritual, the more powerful the summoning. That is exactly why these Luciferian rituals are being performed by hundreds of participants in public arenas where tens of thousands of people are watching in person. This is a deliberate strategy to increase the power of the summoning, allowing increasingly powerful demonic entities to enter this world through the opened portals.

What you are witnessing right now on a global scale is the coordinated, government-funded, ritualistic invocation of supernatural demons that are flooding into this world to wage war against humankind and God.

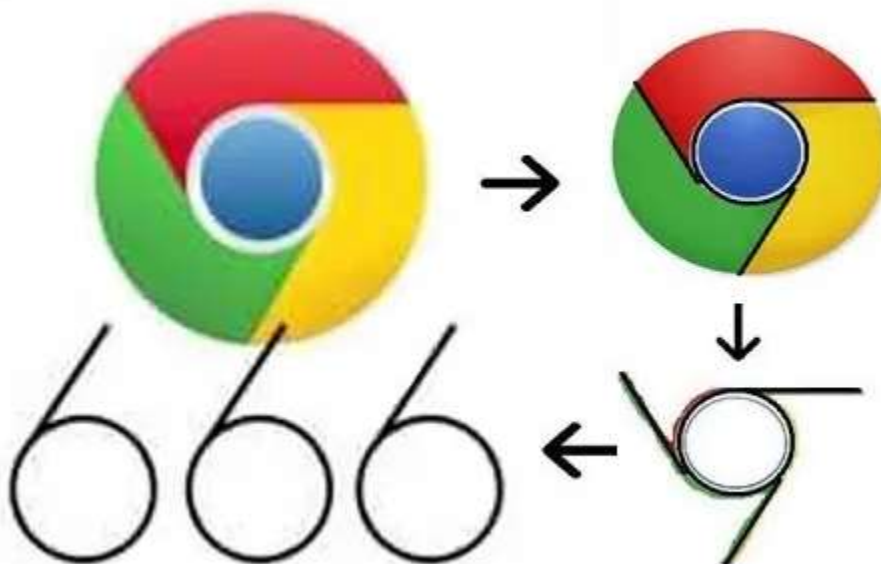
The results of this are easily seen everywhere:

- School teachers turned into transgender demons, preying on innocent children, pushing grooming, pedophilia and genital mutilations.
- The total corruption of the Church as they embrace homosexuality, transgenderism and child mutilations.
- National leaders appearing either brain dead (Biden) or possessed with neurological seizures (Clinton), or self-medicating to avoid the pain of the demonic possession (Pelosi).
- 666 symbolism everywhere, from the Google Chrome logo to the CERN supercollider. Even Monster energy drinks — “Unleash the beast!” — depict 666 using Hebrew numerals.
- Even the NIH — which funded the SARS-CoV-2 gain-of-function bioweapons development in China — sports a logo that clearly depicts “666.”

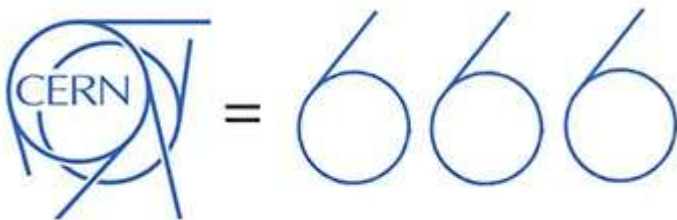
Monster energy drinks:



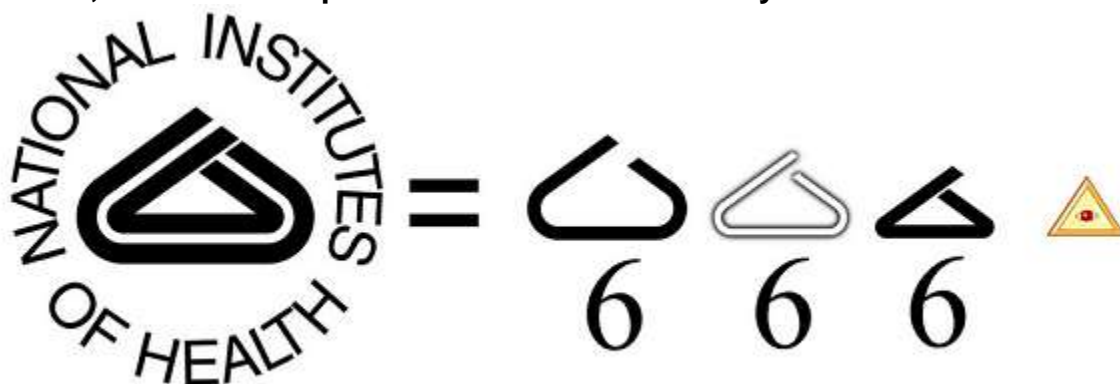
Google Chrome logo:



CERN supercollider, searching for the “God particle”:



The NIH, tied to bioweapons to exterminate humanity:



Art by markbeast666.blogspot.com

Congressional bills that seek to enslave humanity are routinely given numbers like HR 060606, and patents related to covid vaccines and Bill Gates are also assigned numbers like 2020-060606. “666” is the dog whistle for Satanists. It’s a communications technique for one group of Satanists to let other Satanists know they’re on board with the Luciferian agenda. This is why you find 666 incorporated into so many institutions of science, government and academia.

Life insurance claims skyrocket after COVID jab rollout, prompting insurers to take legal action against vaccine manufacturers

Wednesday, August 03, 2022 by: Lance D Johnson

([Natural News](#)) Life insurance claims have skyrocketed since the COVID jab rollout, dwarfing the number of claims made during 2020 when a high-mortality-rate-pandemic was supposedly ravaging the Nation. Yale epidemiologist Harvey Risch believes that insurance companies are on the verge of [taking legal action against vaccine manufacturers](#) over vaccine-associated death risks that were downplayed from the very beginning.

Risch points to an explosion of “*early unexpected mortality claims*” after the COVID vaccine rollout. This influx of life insurance claims is not even COVID-related, and insurers are struggling to pay out. Risch says that vaccine manufacturers misrepresented the “*all-cause mortality*” from their very own clinical trials, not only deceiving the population into taking dangerous vaccines,

but also misleading the insurance companies who are now forced to pay for thousands of needless deaths in young and middle-aged adults.

Will insurance companies seek financial compensation from the COVID-19 vaccine manufacturers to cover for *“major financial risk[s] that they have to figure out how to manage”* going forward?

Epidemiologist believes life insurance companies may sue vaccine manufacturers for misleading statements.

Risch has analyzed statements made by the CEOs of various group life insurance companies. He claims that the actuaries miscalculated, estimating that the vaccinated would *“live longer than they have.”* Risch said the actuaries were deceived on *“all-cause mortality...from the original [vaccine] trials.”*

In December of 2021, OneAmerica CEO Scott Davison attended a healthcare conference and spoke up about an [“unheard of” 40 percent spike in the death rate](#) of working-age people insured by the company. The 40 percent increase in death made no rational sense because the covid-19 vaccine had been rolled out the entire year. Government and public health officials promised that this [vaccine program](#) would save lives and end the pandemic.

Davison said that a 10 percent increase in death would have required a *“one-in-200-year-catastrophe.”* There was no way the company could have predicted a 10 percent increase in death claims, let alone a 40 percent increase, when the worst of the pandemic was supposed to be in the rear-view mirror. The vaccines were safe and effective, they were told, and no one was allowed to question the god-like status of these experimental jabs.

Most shocking, Davison said that the majority of insurance claims filed ARE NOT COVID-related deaths. In 2020, almost any medical issue could be coded as COVID-19, no matter how faulty the testing was, no matter how many underlying health issues and medical errors were to blame for the deaths. For the death rate to spike 40 percent and NOT be related to COVID-19 is an anomaly of mass proportions.

Will life insurance companies get a settlement from the vaccine makers, as the cycle of depopulation is swept under the rug?

At Lincoln National, actuaries reported a 163 percent increase in death benefits paid out in 2021, after the vaccine was rolled out to the public. The large insurer paid out \$500 million in 2019, \$548 million in 2020, and a whopping \$1.4 billion in 2021.

The global pandemic didn't cause a drastic change in death benefits paid out, but for some reason, excess mortality was highest in 2021, when the COVID vaccine promised a way out. The year of the vaccine brought a tsunami of excess

mortality, spiking the death rate to levels unthinkable for insurance companies to handle. Lincoln Financial is not poised to sue the vaccine manufacturers, however. Instead, they are justifying the surge in death payouts, pointing to “less favorable returns within the company’s alternative investment portfolio” that year. Lincoln Financial spokesperson Kelly DeAngelis said the company acquired Lincoln Life Assurance Company of Boston in 2021 and took on a slew of new claims. Even this acquisition does not explain the abnormal surge in death benefits paid out in 2021.

Perhaps the insurance companies will ultimately seek some kind of [settlement from the vaccine manufacturers](#) – to brush the depopulation issue under the rug.

Rand Paul: Congress Is Not Allowed To Know About TOP SECRET Gain Of Function Research Committee

[by Steve Watson](#) August 4th 2022, 4:45 am

"We don't know the names. We don't know that they ever meet, and we don't have any records of their meetings. It's top-secret. Congress is not allowed to know."

Appearing on Fox News to discuss the first ever Senate hearing on gain of function research, Rand Paul revealed that there is a committee that is supposed to oversee such experimentation with potentially lethal viruses, but that it is above the oversight of Congress.

Paul noted that according to scientists who testified on Capitol Hill yesterday,

"We don't know the names. We don't know that they ever meet, and we don't have any records of their meetings," the Senator reiterated, adding *"It's top-secret. Congress is not allowed to know. So whether the committee actually exists, we're uncertain."*

"We do know that they've met three times and there are thousands of gain-of-function research proposals. They've only met three times, they've only reviewed three projects," Paul continued.

Three scientists testified during the hearing, they were Dr. Richard Ebright, laboratory director of the Waksman Institute of Microbiology at Rutgers University, Kevin Esvelt, assistant professor of media arts and sciences at the Massachusetts Institute of Technology Media Lab, and Dr. Steven Quay, CEO of Atossa Therapeutics Inc.

"The three scientists agreed that this was dangerous research. Two of the three absolutely said it was gain-of-function. The third said it was dangerous research and should have gone before a committee," Paul asserted.

The Senator added that *“When Dr. Fauci said, ‘Oh, we’ve reviewed this and the experts have looked at this, and said it’s not gain-of-function,’ even that wasn’t true. There was a committee that was formed after 2017 to look at this dangerous research. They didn’t look at this research at all because they never reviewed it. So no one reviewed this to say it wasn’t gain-of-function research. They didn’t review it, period.”*

“So we learned a lot of things, but I think we reconfirmed that Dr. Fauci is not being honest with us,” Paul urged, adding *“Yes, the NIH funded gain-of-function research. Yes, it was dangerous. And yes, nobody looked over this. Nobody reviewed the research. Yes, a million people died. And there still seems to be a significant lack of curiosity on the part of Democrats.”*

Senator Paul chaired the Senate Homeland Security and Governmental Affairs subcommittee hearing because no Democrats even bothered to show up.

Watch Paul’s opening statement:

During the hearing, Dr. Ebright said that he stands by previous statements he has made charging that Anthony Fauci *“lied to Congress, lied to the press, and lied to the public knowingly, willfully, brazenly.”*

“The statements made on repeated occasions to the public, the press, and to policymakers by the NIAID director, Dr. Fauci, have been untruthful,” Ebright said, adding *“I do not understand why those statements are being made, because they are demonstrably false.”*

Dr. Esvelt warned that *“we are so used to thinking of pandemics as a health and safety issue that we have missed the national security implications of identifying viruses that could be deliberately unleashed to kill millions of people.”*

Dr. Quay outlined how the idea that the coronavirus originated in a Wuhan wet market is highly unlikely, noting *“There is no dispositive evidence the pandemic began as a spillover of a natural virus in a market,”* and further declaring *“All evidence is consistent with a laboratory-acquired infection.”*

“The virus has three genomic regions that have the signature of synthetic biology—that is, gain-of-function research,” Quay said in his opening statement, adding *“One region has features of the two types of forbidden gain-of-function research that are associated with bioweapons development: asymptomatic transmission and immune-system evasion.”*

“Covid” deaths hit new record in hyper-vaccinated Australia

Thursday, August 04, 2022 by: Ethan Huff

([Natural News](#)) The [latest figures](#) are in, and things are not looking good for “fully vaccinated” Australia.

Even though more than 96 percent of the native population there took the first two mRNA (messenger RNA) jabs for the Wuhan coronavirus (Covid-19), and more than 70 percent are fully “boosted,” Chinese Virus deaths throughout the country have reached a *record high*.

The following data chart clearly shows that ever since the launch of Operation Warp Speed, injection-related deaths Down Under have been soaring. As of this writing, a peak has formed to suggest that with the passage of time, the fully injected are dropping dead at an ever-increasing rate.

Had Australia opted for ivermectin and hydroxychloroquine (HCQ) instead of Fauci Flu shots, the *plandemic* would have ended ages ago. Instead, Australia is now seeing mass death rather than a recovery. (Related: Australian officials want Aussies to get injected a bi-annual intervals [for the rest of time](#).)

In fact, there were almost no covid-related deaths at all in Australia prior to the launch of the “vaccines.” There was a small peak in the fall of 2020 followed by a precipitous drop back to baselines levels, followed by a *massive* peak once people started getting injected.

Interestingly, the booster shot campaign was followed by another massive spike and peak, which will more than likely be followed by continued increases in the death count as antibody-dependent enhancement (ADE) and other jab-induced health conditions take their toll.

“We were warned, but only intelligent people listened,” wrote a commenter in response to the news. *“Antibody-dependent enhancement is happening, it is real, and it destroys the immune system.”*

“No one mistreated their citizens more than Australia during the crisis,” added another. *“The people that did that should be in jail.”*

This is now a *plandemic* of the fully vaccinated.

New South Wales (NSW) is [reportedly seeing](#) the most new “cases” of the Wuhan Flu, followed by Queensland and Victoria.

Each of these areas, as you may recall, imposed heavy restrictions throughout the *plandemic* – restrictions that area residents were told would put an end to the virus.

“Quarantine” concentration camps were set up; people were forced to mask everywhere they went; and public movement was restricted – but to no avail. The Chinese Virus is here to stay, thanks to the injections.

The media would have us all believe that people are “catching” and “re-catching” covid over and over again, but the reality is that what we are now seeing is a *plandemic* of the fully vaccinated whose immune systems are shot.

“They’re exhibiting symptoms of poisoning,” wrote another commenter about what the fully jabbed are experiencing, which is not “covid.” “Coughing and fever are mild symptoms. Neurological damage, spasms, and paralysis are serious symptoms, not unlike what happens to a cockroach that is sprayed with RAID.”

“Clots are a sign of internal bleeding. Severe clotting leads to amputation and heart attacks. The most severe symptom? Death.”

Another pointed out that nobody who is unvaccinated is experiencing any of this, which further proves that what sick people are suffering from is vaccine damage, not covid infection.

“Fake immunity designed to kill you never beats natural immunity,” wrote someone else about how the so-called vaccines do not in any way produce real or lasting immunity, but instead provoke vaccine-induced AIDS (VAIDS).

“The unvaxxed are not getting sick not because they have natural immunity to a non-existent pathogen, but because they haven’t been poisoned,” added someone else. “The mRNA drug causes epithelial cells to manufacture the toxic spike protein 24/7, 365. There’s no off switch.”

The latest news about Fauci Flu shots can be found at [ChemicalViolence.com](https://www.chemicalviolence.com).

Scientists with ties to Bill Gates and Anthony Fauci admit to developing vaccine that spreads like a virus

08/04/2022 / By Mary Villareal

Scientists linked to Bill Gates said they are developing a [vaccine that spreads like a virus](#).

The research is subsidized by high-profile funding organizations with longstanding and close financial ties to the Bill & Melinda Gates Foundation. It is also supported by the National Institutes of Health, the mother agency of Dr. Anthony Fauci’s National Institute of Allergy and Infectious Diseases.

[Self-spreading vaccines](#) are rooted in efforts to reduce pest populations. The virally-spread immune-contraception hijacks the immune

systems of infected animals like non-native mouse species, preventing them from fertilizing offspring.

The earliest self-spreading vaccine efforts targeted two highly lethal infectious diseases in the European rabbit population in 2001. Spanish researchers field-tested a vaccine in the wild rabbit population on a small island just off Menorca. The vaccine spread to over half the 300 rabbits on the island, and the trial was said to be a success.

While the researchers may intend to make self-spreading vaccines, there could be ways to repurpose this science to develop biological weapons, which may prove uncontrollable and irreversible.

Humans are weaponizing biology since 2000.

Humans have already weaponized biology on several occasions. As the apartheid-era South African bio warfare program showed, social, political and scientific pressures can lead to the misuse of biological innovation.

Project Coast, as it was called, was South Africa's program primarily focused on covert assassination weapons for use against individuals deemed a [threat to the racist apartheid government](#). In addition to producing contraptions to inject poisons, Project Coast researchers developed techniques to lace sugar cubes with salmonella and cigarettes with Bacillus anthracis.

There had been many bio warfare programs, including several that were far more elaborate and sophisticated, but the South African program is important in thinking through malicious uses of self-spreading vaccines. One of Project Coast's research projects aimed at developing a human anti-fertility vaccine.

This idea came at a time when there was widespread concern over population explosion. Schalk Van Rensburg, who oversaw the fertility-related work at Project Coast, believed that this could bring his lab international acclaim and funding. (Related: [The Bill Gates globalist vaccine depopulation agenda... as revealed by Robert F. Kennedy, Jr.](#))

Van Rensburg and the director of the bio warfare program, Wouter Basson, said the military needed an anti-fertility vaccine for female soldiers not to become pregnant.

Other scientists involved in the project denied awareness of ulterior intentions or even their fertility work as part of a military endeavor. However, Van Rensburg and lab director Daniel Goosen said the real intention of the project was to selectively administer the contraceptive in secret to unsuspecting Black South African women.

In the end, the anti-fertility vaccine was not produced before Project Coast officially closed down in 1995 – 12 years after it was initiated. It ended with an earlier version tested in baboons, but never in humans. (Related: [Bill Gates pushes for a 90 percent vaccination rate worldwide.](#))

South Africa was not the only country to try to forcibly sterilize its population. European countries like Sweden and Switzerland sterilized members of the Roma minority in the early half of the 20th century, while countries like Slovakia continued beyond that.

More recently, analysts alleged that the Chinese government has been sterilizing women in Xinjiang, which is a province with a large population of Uyghur Muslims.

The Defense Advanced Research Projects Agency (DARPA) has also gotten involved in the research. The [University of California, Davis](#) has been working on a DARPA-administered project that is creating the first prototype of a self-disseminating vaccine designed to induce a high level of herd immunity against the Lassa virus and Ebola.

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

More related stories:

[Bill Gates – philanthropist or eugenicist?](#)

[Bill Gates the bioterrorist's plan for global control.](#)

[Coronavirus is a dream come true for Bill Gates](#)

Nearly 30,000 Deaths Reported to VAERS, Including 17-Year-Old Who Died of Myocarditis 5 Months After Pfizer Shot

VAERS data released Friday by the Centers for Disease Control and Prevention show **1,371,474 reports of adverse events** from all age groups following COVID-19 vaccines, including **29,981 deaths** and **249,116 serious injuries** between Dec. 14, 2020, and July 29, 2022.

By Megan Redshaw

The Centers for Disease Control and Prevention (CDC) today released new data showing a total of [1,371,474 reports of adverse events](#) following [COVID-19](#) vaccines were submitted between Dec. 14, 2020, and July 29, 2022, to the Vaccine Adverse Event Reporting System (VAERS). That's an increase of 13,534 adverse events over the previous week.

VAERS is the primary government-funded system for reporting adverse vaccine reactions in the U.S.

The data included a total of [29,981 reports of deaths](#) — an increase of 191 over the previous week — and [249,116 serious injuries](#), including deaths, during the same time period — up 1,430 compared with the previous week.

Of the 29,981 reported deaths, [19,348 cases](#) are attributed to Pfizer's COVID-19 vaccine, [7,981 cases](#) to Moderna, [2,603 cases](#) to Johnson & Johnson (J&J) and [no cases](#) yet reported for Novavax.

Excluding “[foreign reports](#)” to VAERS, [851,372 adverse events](#), including [13,894 deaths](#) and [87,050 serious injuries](#), were reported in the U.S. between Dec. 14, 2020, and July 29, 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.

National Vaccine Information Center Your Health. Your Family. Your Choice.		
Search Results		
From the 7/29/2022 release of VAERS data:		
Found 1,371,474 cases where Vaccine is COVID19		
Government Disclaimer on use of this data		
Table		
Event Outcome	Count	Percent
Death	29,981	2.19%
Permanent Disability	56,021	4.08%
Office Visit	201,489	14.69%
Emergency Room	121	0.01%
Emergency Doctor/Room	132,951	9.69%
Hospitalized	170,749	12.45%
Hospitalized, Prolonged	426	0.03%
Recovered	353,277	25.76%
Birth Defect	1,134	0.08%
Life Threatening	33,247	2.42%
Not Serious	643,486	46.92%
TOTAL	† 1,622,882	† 118.33%
† Because some cases have multiple vaccinations and symptoms, a single case can account for multiple entries in this table. This is why the Total Count is greater than 1,371,474 (the number of cases found), and the Total Percent is greater than 100.		

Of the 13,894 U.S. [deaths reported](#) as of July 29, 7% occurred within 24 hours of vaccination, 15% occurred within 48 hours of vaccination and 54% occurred in people who experienced an [onset of symptoms](#) within 48 hours of being vaccinated.

In the U.S., 603 million COVID-19 vaccine doses had been administered as of July 27, [including](#) 357 million doses of Pfizer, 227 million doses of Moderna and 19 million doses of Johnson & Johnson (J&J).

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 July 29, 2022, for 6-month-olds to 5-year-olds show:

- [2,622 adverse events](#), including [81 cases rated as serious](#) and [3 reported deaths](#).
- [4 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.
- [15 reports](#) of blood clotting disorders.
- [25 reports](#) of seizures.

U.S. VAERS data from Dec. 14, 2020, to July 29, 2022, for 5- to 11-year-olds show:

- [12,379 adverse events](#), including [315 rated as serious](#) and [9 reported deaths](#).
- [24 reports](#) of myocarditis and pericarditis.
- [47 reports](#) of blood clotting disorders.
- [102 reports](#) of seizures.

U.S. VAERS data from Dec. 14, 2020, to July 29, 2022, for 12- to 17-year-olds show:

- [32,910 adverse events](#), including [1,850 rated as serious](#) and [45 reported deaths](#).

The most recent report of a death in the 12- to 17-year-old age group was that of a 17-year-old male from Pennsylvania (VAERS I.D. [2396146](#)) who died from [lymphocytic myocarditis](#) approximately five months after receiving his first dose of Pfizer. The patient had no relevant medical history, according to the report.

The report states the *“patient was just hanging with buddies at a soccer game, patient just collapsed, just died right there, EMT rushed patient to hospital and tried 42 minutes of CPR — nothing happened. Once autopsy was done, the*

patient definitely had myocarditis, and think it was lymphocytic myocarditis.”

The patient did not receive any other vaccine within four weeks of his first dose of Pfizer. The batch and lot number have been requested and “*will be submitted if and when received.*” However, this information will not be available to the public.

According to the CDC, “VAERS data [available to the public](#) include only the initial report data to VAERS. Updated data which contains data from medical records and corrections reported during follow up are used by the government for analysis. However, for numerous reasons including data consistency, these amended data are not available to the public.”

- [63 reports](#) of anaphylaxis among 12- to 17-year-olds where the reaction was life-threatening, required treatment or resulted in death — with 97% of cases attributed to [Pfizer’s vaccine](#).
- [658 reports](#) of myocarditis and pericarditis with [645 cases](#) attributed to Pfizer’s vaccine.
- [165 reports](#) of blood clotting disorders with all cases attributed to Pfizer.
- [20 cases](#) of postural orthostatic tachycardia syndrome (POTS) with [all cases](#) attributed to Pfizer’s vaccine.

U.S. VAERS data from Dec. 14, 2020, to July 29, 2022, for all age groups combined, show:

- 20% of deaths were related to cardiac disorders.
- 55% 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 July 29, [5,684 pregnant women](#) reported adverse events related to COVID-19 vaccines, including [1,777 reports of miscarriage or premature birth](#).
- Of the [3,629 cases of Bell’s Palsy](#) reported, 51% were attributed to [Pfizer](#) vaccinations, 40% to [Moderna](#) and 8% to [J&J](#).
- [907 reports of Guillain-Barré syndrome](#), with 42% of cases [attributed to Pfizer](#), 30% to [Moderna](#) and 27% to [J&J](#).
- [2,298 reports](#) of anaphylaxis where the reaction was life-threatening, required treatment or resulted in death.
- [1,750 reports](#) of myocardial infarction.
- [14,303 reports](#) of blood-clotting disorders in the U.S. Of those, [6,401 reports](#) were attributed to Pfizer, [5,145 reports](#) to Moderna and [2,722 reports](#) to J&J.
- [4,287 cases](#) of myocarditis and pericarditis with [2,627 cases](#) attributed to Pfizer, [1,456 cases](#) to Moderna and [188 cases](#) to J&J.
- [14 cases](#) of Creutzfeldt-Jakob disease with [8 cases](#) attributed to Pfizer, [5 cases](#) to Moderna and [1 case](#) to J&J.

- [272 cases](#) of POTS with [167 cases](#) attributed to Pfizer, [87 cases](#) to Moderna and [17 cases](#) to J&J.

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

South Africa confirms first death caused by J&J shot

South Africa's health regulator on Thursday confirmed a person [died from Guillain-Barré syndrome](#) (GBS) caused by J&J's COVID-19 vaccine. It is the country's first death officially attributed to a COVID-19 vaccine, officials said.

GBS is a [rare neurological disorder](#) in which the body's immune system mistakenly attacks part of its peripheral nervous system, the network of nerves located outside of the brain and spinal cord.

GBS symptoms can range from mild, brief muscle weakness to paralysis, leaving the patient unable to breathe independently.

According to South African health authorities, the person who died [developed symptoms](#) shortly after receiving J&J's vaccine, which led to prolonged hospitalization, mechanical ventilation, further infections and death. No other cause for the GBS could be identified.

To protect patient confidentiality, no patient details, including the province where the death occurred, will be made public.

Family of 27-year-old who died after AstraZeneca shot weighs legal action

The UK family of a 27-year-old engineer who [died from catastrophic brain bleeds](#) after receiving AstraZeneca's COVID-19 vaccine is considering legal action, pending an upcoming preliminary review of their son's case.

Jack Last, who was vaccinated March 30, 2021, died three weeks after receiving the AstraZeneca jab. A CT scan on April 10, 2021, revealed Last had developed a [cerebral venous sinus thrombosis](#), which occurs when a blood clot forms in the brain's venous sinuses and prevents blood from draining out of the brain.

Last died at Addenbrooke's Hospital in Cambridge, UK, on April 20, 2021 — 11 days after he sought medical treatment for severe headaches.

His family retained legal counsel after raising concerns about the circumstances leading to Jack's death, the [East Anglian Daily Times reported](#).

A pre-inquest review will be held on August 11, after which a full inquest will be scheduled. An [inquest](#) is a formal investigation conducted by a coroner in order to determine how someone died. The purpose of an inquest is limited to

establishing the identity of the deceased individual as well as where, when and how they died.

Woman feels ‘like the walking dead’ after COVID vaccine injuries

In an [exclusive interview](#) with The Defender, Catherine Parker, 48, said she had a complete and fulfilling life prior to receiving her first dose of a COVID-19 vaccine on April 1, 2021.

Within two weeks of receiving the J&J shot, Parker said she began to have chronic fatigue and insomnia, but doctors said her symptoms were related to menopause. After receiving a Pfizer booster on Nov. 9, 2021, her symptoms worsened. Her hair began to fall out, she had brain fog and she developed uncontrollable tremors, spasms and migraines to the point she couldn’t walk or communicate.

Parker developed a “laundry list of ailments” and tested positive for the [Epstein-Barr virus](#), despite “never [having] had mono in my entire life,” and for [antinuclear antibodies](#) and kidney abnormalities.

Parker’s symptoms — and the dismissive attitude of much of the medical establishment — led her to start the [Vaccine Injury/Side Effects Support Group](#) on Facebook earlier this year.

In addition, Parker has presented her personal story on social media platforms, including [Facebook](#), [YouTube](#) and [TikTok](#), and launched an online [crowdfunding campaign](#) to help support her rising medical costs.

The Defender interviewed three other people injured by COVID-19 vaccines who are members of Parker’s group. [Read their stories here.](#)

EMA says Novavax COVID vaccine must carry warning for heart inflammation

The European Medicines Agency (EMA) Wednesday recommended [adding a warning](#) for two types of heart inflammation to Novavax’s COVID-19 vaccine, marketed under the brand names Nuvaxovid and Covovax, based on a small number of cases reported in those who received the vaccine.

According to a [statement](#), the EMA’s [Pharmacovigilance Risk Assessment Committee](#) — responsible for assessing and monitoring the safety of human medicines — concluded that “*myocarditis and pericarditis can occur following vaccination with Nuvaxovid.*”

“The Committee is therefore recommending listing myocarditis and pericarditis as new side effects in the product information for Nuvaxovid, together with a warning to raise awareness among healthcare professionals and people receiving this vaccine,” the statement said.

The committee also requested the “marketing authorization holder of Nuvaxovid [provides additional data](#) on risk of side effects occurring.”

According to [Reuters](#), the FDA flagged Novavax’s risk of heart inflammation in early June. Yet, the agency on July 13 [granted Novavax’s request](#) for Emergency Use Authorization of the vaccine for adults 18 and over in the U.S.

They're Bringing Covid Back... And This Time Its Permanent
Covid is back in every headline. As the new normal crowd gets desperate to scare people into accepting the Great Reset they're going back to their old favorite to get us used to the forever pandemic. The UK's "Covid cases" are (apparently) up to 3.8 million, according to the Office of National Statistics. It's reportedly just as bad in the EU, where "cases" (allegedly) tripled in six weeks. Things are looking pretty grim across the pond too, with "cases" "surging" all across the US. It's no better on the other side of the (supposed) ideological divide. Russia, China and India - despite being brave multipolar warriors locked in a 5D chess struggle against the machinations of the globalist elite - have all seen "cases" of the "new variant" as well.

The tipping point on vaccines and covid policy approaches more evidence that the tune is changing

First a trickle, then a flood. the focus of mainstream news on covid is shifting noticeably. it's becoming OK to call it B.S., and the jerseys are changing at speed. Tucker is out telling the "the vaxxed are seeing more overall deaths and worse medical outcomes overall/immune suppression/destruction" story that has been in top medical journals for months if you knew where to look. this will not be new news to readers possessed of discerning attitudes, but this is a bombshell to much of America. Guys like tucker are not around for the early innings of games like these. they jump in when the game looks like it can be a rout. this is triple true of vaccines and vaccine efficacy because it is a massive political third rail and "antivaxxer" has been such an effective ad hominem epithet to link one to loads of poorly calibrated claims irrelevant to the current debate. it has kept many away from this issue as one risks being sidelined by the howlers for addressing it.

by el gato malo <https://boriquagato.substack.com/p/the-tipping-point-on-vaccines-and>

Why Three COVID Jabs Are Worse Than Two

Published on July 24, 2022

Written by Mercola.com



Big Pharma claims the shots and boosters are supposed to reduce infections, but the latest data from both Pfizer and Moderna show a whole different story. See what's happening now in some of the most highly vaccinated countries.

STORY AT-A-GLANCE

- **COVID-19 is more than twice as prevalent among the boosted, compared to those who quit after the initial series. Those with a primary series plus one or two booster shots are catching the infection at a rate of 119.94 per 100,000, while those with the primary series only have an infection rate of 56.44 per 100,000**
- **Pfizer's pediatric trial reveals the shots raise, rather than lower, the risk of reinfection (meaning catching COVID more than once). In all, 12 of the children in Pfizer's trial were diagnosed with COVID twice within the follow-up period (one to four months). Of those, 11 had received two or three jabs; only one unvaccinated child got COVID twice**
- **Data from Moderna's trial also suggest the shot makes adults more prone to repeat COVID infections, thanks to an inhibited antibody response**
- **In Pfizer's pediatric trial, six of the children, aged 2 to 4 years, in the vaccinated group were diagnosed with "severe COVID," compared to just one in the placebo group. So, the shot may actually cause more severe infection in young children**
- **In mid-June 2022, Israel experienced a sudden 70% spike in seriously ill COVID patients. The spike is being blamed on a new variant mutated from Omicron, referred to as BA.5., which is thought to be more resistant to vaccines than previous strains**

Believe it or not, we're now at the point where even mainstream media are reporting that COVID-19 is more prevalent among the boosted, compared to those

who quit after the initial series. That doesn't mean that sanity is returning; it's just interesting that they're not able to ignore it completely, even though their efforts to rationalize it teeter on the verge of lunacy. June 6, 2022, CBS News reported:¹

“As COVID-19 cases began to accelerate again this spring, federal data suggests the rate of breakthrough COVID infections in April was worse in boosted Americans compared to unboosted Americans ...

Meanwhile, federal officials are also preparing for key decisions on future COVID-19 vaccine shots ... In the short term, CDC Director Dr. Rochelle Walensky recently told reporters that her agency was in talks with the Food and Drug Administration about extending the option for second boosters to more adults.”

If Walensky's logic makes your brain feel like it's been beat with a meat mallet, you're not alone. It's so beyond irrational as to be inexplicable. If boosters make you more prone to infection, is giving boosters to more people really the prudent answer?

Three Doses Makes You More Infection-Prone Than Two

Overall, data from the Centers for Disease Control and Prevention's new COVID dashboard² show boosted Americans are catching COVID at nearly twice the rate of the unboosted a statistic John Moore, professor of microbiology and immunology at Weill Cornell Medical College, attributes to the boosted feeling *“more protected than they actually are,”* and therefore taking fewer precautions.³ Considering we know that masks, social distancing and lockdowns don't work to prevent infection spread, Moore's explanation is flimsy at best.

It's far more reasonable to conclude that the COVID injections are the problem.

According to the CDC, the unvaccinated still account for a majority of positive COVID tests, at a rate of 188.2 per 100,000 as of April 23, 2022.

Those with a primary series plus one or two booster shots are catching the infection at a rate of 119.94 per 100,000, while those with the primary series clock in at a rate of 56.44 per 100,000.

Of course, CBS is careful to note that “The new data do not mean booster shots are somehow increasing the risk” of COVID, but rather that “the shift underscores the growing complexity of measuring vaccine effectiveness at this stage of the pandemic.”⁴

CBS also misleadingly claims that while the boosted have more than double the rate of infections of the unboosted, it's still “but a fraction of the levels among unvaccinated Americans.”

However, 120 (rounded up from 119.94) is hardly “but a fraction” of 188. At 64% of the unvaccinated rate, using the term “a fraction of” seems like an intentional attempt to downplay just how common COVID is getting among the boosted.

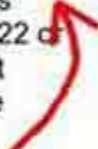
COVID Jab Also Causes Repeat Reinfections

In related news, Pfizer’s pediatric trial reveals the shots raise rather than lower the risk of reinfection (meaning catching COVID more than once).

In his Substack article,⁵ “Finally Proven: Pfizer Vaccine Causes COVID Reinfection, Disables Natural Immunity,” Igor Chudov — a businessman and mathematician⁶ /points to the black-and-white data on page 38 of the documentation⁷ submitted to the FDA for its COVID jab Emergency Use Authorization request for use in children 6 months through 4 years of age. Here’s a screen shot with Chudov’s markings and notes:

Multiple cases of confirmed COVID-19

Six participants 6-23 months of age (3 BNT162b2 recipients and 3 placebo recipients) developed more than one virologically and clinically confirmed episodes of symptomatic COVID-19 disease. All BNT162b2 recipients received 3 doses of assigned study intervention. 1 placebo recipient received 2 doses of placebo only, and 2 original placebo recipients received 2 doses of placebo followed by 3 doses of open-label BNT162b2. The interval between the episodes ranged from 1-4 months, with shorter intervals if the first episode occurred in January 2022 or later (during Omicron circulation). All participants with multiple episodes were negative at baseline for prior SARS-CoV-2 infection. Coinfections with other respiratory viruses were present in 1 BNT162b2 recipient (enterovirus) and 3 placebo recipients (adenovirus, enterovirus, endemic coronavirus, RSV).



These two got vaccine also and THEN reinfected

Six participants 2-4 years of age (5 BNT162b2 recipients and 1 placebo recipient) developed more than one virologically and clinically confirmed episode of symptomatic COVID-19 disease. All of these participants received 3 doses of assigned study intervention, except for one participant in the BNT162b2 group who received 2 doses of BNT162b2. The interval between the episodes ranged from 1-4 months, with shorter intervals if the first episode occurred in January 2022 or later (during Omicron circulation). All participants with multiple episodes were negative at baseline for prior SARS-CoV-2 infection.

All reinfected were vaxxed

In all, 12 of the children in Pfizer’s trial were diagnosed with COVID twice within the follow-up period, which ranged from one to four months. Of those, 11 had received two or three jabs; only one child in the placebo (unvaccinated) group got COVID twice.

“So, what caused vaccinated children to develop a disproportionate amount of repeat infections? The vaccine, of course. It’s a randomized controlled trial, after all,” Chudov writes.⁸

“Thanks to Pfizer, we finally know that COVID reinfections are real and that their vaccine causes them by disabling natural immunity. A little caveat is that Pfizer made the trial purposely complicated (because it is a resuscitated FAILED trial where they added one more booster dose and more kids).

Pfizer vaccinated the control group. This complication somewhat affects the 6-23-month age category, but still shows obvious vaccine failure. The 2-4-year-old group is much less complicated: all reinfections happened in the vaccinated participants, five of six were from the first-vaccinated group.

‘All of these participants received 3 doses of assigned study intervention, except for one participant ... who received two doses.’ We have a smoking gun that reinfections are vaccine driven.”

This post-jab reinfection anomaly has also been stressed by Dr. Clare Craig, a diagnostic pathologist,⁹ who reviewed some of the most damning data from Pfizer’s pediatric trial in a recent video (below).

Moderna Data Also Show Repeated Infections Are Likely

Data from Moderna’s trial also suggest the shot makes adults more prone to repeat infections, thanks to an inhibited antibody response. A preprint study^{10,11} posted on medRxiv April 19, 2022, found adult participants in Moderna’s trial who got the real injection, and later got a breakthrough infection, did not generate antibodies against the nucleocapsid — a key component of the virus — as frequently as did those in the placebo arm.

Placebo recipients produced anti-nucleocapsid antibodies twice as often as those who got the Moderna shot, and their anti-nucleocapsid response was larger regardless of the viral load. As a result of their inhibited antibody response, those who got the jab may be more prone to repeated COVID infections.

These findings are further corroborated by data from the U.K. Health Security Agency. It publishes weekly COVID-19 vaccine surveillance data, including anti-nucleocapsid antibody levels. The report^{12,13} for Week 13, issued March 31, 2022, shows that COVID-jabbed individuals with breakthrough infections indeed have lower levels of these antibodies.

Pfizer’s Data Do Not Support Use In Children

Another crucial piece of information that Craig highlights in her video is that of the 4,526 children enrolled in the trial, a whopping 3,000 dropped out. Pfizer does not explain this highly suspicious anomaly. Oftentimes, trial participants will drop out when side effects are too severe for them to continue.

Drug companies will also sometimes exclude participants who develop side effects they’d rather not divulge. This is one of those nasty loopholes that can skew results. Here, we don’t know why two-thirds of the participants were eliminated, and “on that basis alone, this trial should be deemed null and void,” Craig says. Pfizer’s pediatric trial data also show that:

- Six of the children, aged 2 to 4 years, in the vaccinated group were diagnosed with “severe COVID,” compared to just one in the placebo group. So, the likelihood the shot is causing severe COVID is higher than the likelihood that it’s preventing it.

- The only child who required hospitalization for COVID was also in the “vaccinated” group.

- In the three weeks following the first dose, 34 of the children in the vaccinated group and 13 of the unvaccinated children were diagnosed with COVID. That means the children’s risk of developing symptoms of COVID within the first three weeks of the first dose actually increased by 30%. These data were ignored.

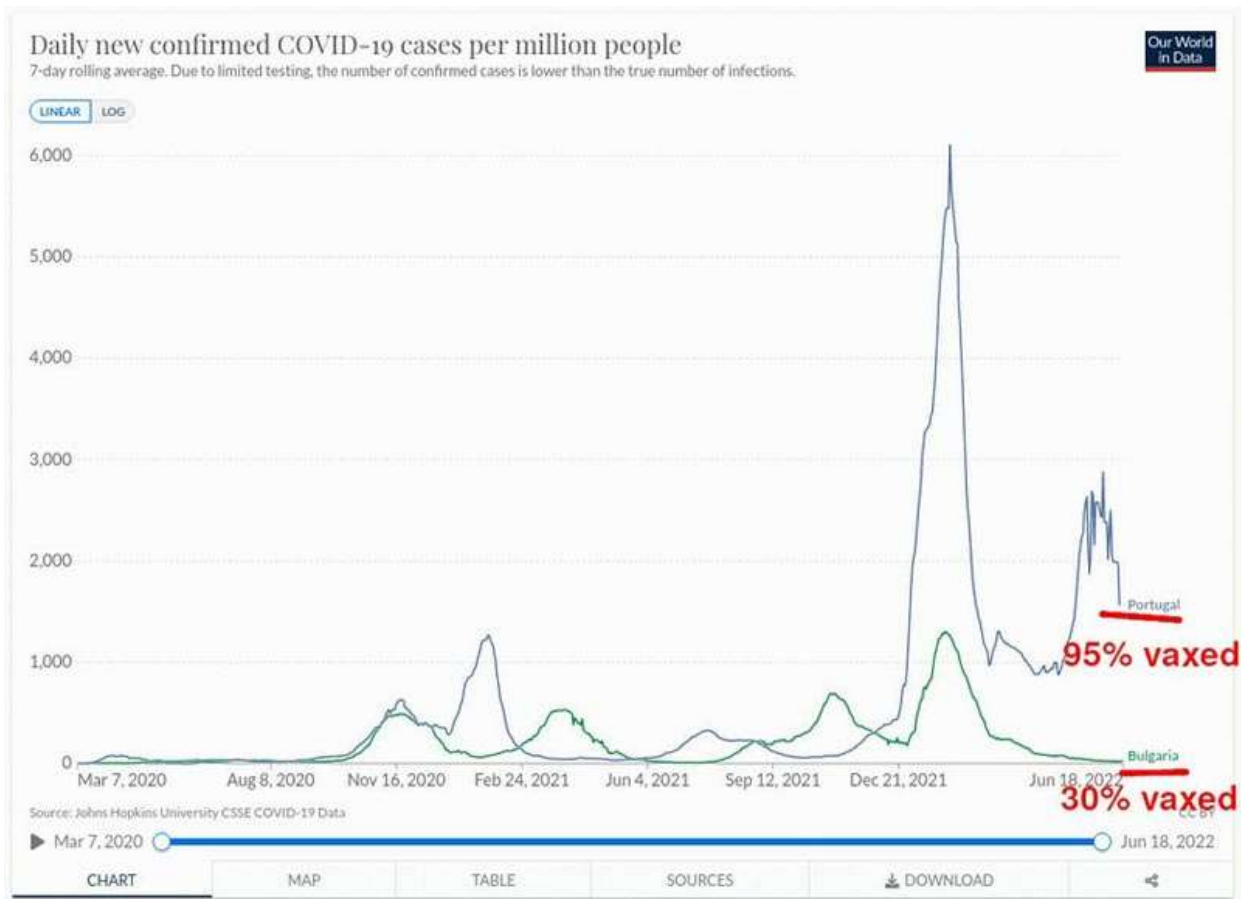
Between doses two and three, there was an eight-week gap, and the vaccinated arm again experienced higher rates of COVID. This too was ignored. After the third dose, incidence of COVID was again raised in the vaccine group, and this was ignored as well.

In the end, they only counted three cases of COVID in the vaccine arm and seven cases in the placebo group. They literally ignored 97% of all the COVID cases that occurred during the trial to conclude that the shots were “effective” in preventing COVID.

More Evidence Of Vaccine Failure

There’s really no shortage of evidence indicating the COVID shots are a complete failure and should be stopped immediately. One example I haven’t reviewed in previous articles is the difference between Portugal and Bulgaria.

In his article, Chudov¹⁴ presents the following graph from Our World in Data, which shows the rate of new COVID cases in these two countries. The vaccination rate in Portugal is 95%, whereas Bulgaria’s is 30%. Guess which country has the higher COVID case rate? The graph speaks for itself.



In mid-June 2022, The Times of Israel also reported¹⁵ a sudden 70% spike in seriously ill COVID patients from one week to the next. According to Reuters' COVID data tracker,¹⁶ Israel has administered enough doses to vaccinate 100.4% of its population with two doses, so it has one of the highest vaccine uptake rates in the world.

Despite a significant increase in antibodies after the fourth vaccine, this protection is only partially effective against the Omicron strain, which is relatively resistant to the vaccine. ~ Professor Gili Regev-Yochay

In mid-January 2022, Israel reported¹⁷ a fourth dose (second booster) was “only partially effective” against Omicron. Lead researcher, professor Gili Regev-Yochay, told reporters, *“Despite a significant increase in antibodies after the fourth vaccine, this protection is only partially effective against the Omicron strain, which is relatively resistant to the vaccine.”*

The latest spikes in both Israel and Portugal are being blamed on a new variant mutated from Omicron, referred to as BA.5.¹⁸ According to The Times of Israel,¹⁹ coronavirus czar Dr. Salman Zarka said “the new variant BA.5 is quickly gaining traction and is more resistant to vaccines than previous strains.” So,

what's Israel's answer? More shots to encourage “herd immunity” and more mask wearing.

Natural Immunity Versus The COVID Jab

An analysis of the Omicron wave in Qatar is also illustrative of [vaccine failure](#). June 21, 2022, The Epoch Times reported²⁰ on the study,²¹ published the week before in the New England Journal of Medicine. In summary:

- People with previous infection (natural immunity) and no COVID jab had 50.2% immunity against symptomatic BA.1 infection (a subvariant of Omicron) for at least 324 days. Against the BA.2 variant, natural immunity was 46.1%
- People with no previous infection (no natural immunity) who got two doses of the Pfizer shot had immunity against BA.1 infection ranging from -16.4% on the low end to 5.4% on the high end on day 268 after the last dose. The average was -4.9%. Against the BA.2 variant, immunity was -1.1% on average. Most entered the negative ranges around the six-month mark
- The effectiveness of three doses and no previous infection against BA.1 was 59.6%, which persisted for at least 42 days (the extent of the follow-up). Against BA.2, immunity topped out at 52.2%

Though the authors' conclusion was that there were *“No discernable differences in protection”* between vaccination and natural immunity, ask yourself which you would rather have: 50% immunity for at least 10 months, or 50% immunity for about six months followed by an increased risk of infection (negative protection) thereafter?

Clearly, if your goal is to avoid infection, you would avoid anything that will — immediately or in the future — raise your risk. Yet, in the upside-down world we now find us in, the answer continues to be: *“Get another shot.”*

As discussed in [“FDA and Pfizer Knew COVID Shot Caused Immunosuppression,”](#) Pfizer's trial data also reveal they've not ruled out the risk of antibody-dependent enhancement, and vaccine-associated enhanced disease (VAED) is listed²² as an *“Important Potential Risk.”* (ADE and VAED are two terms that basically refer to the same thing — worsened disease post-injection.)

So, not only are you at increased risk of COVID infection, and repeated reinfections, if you get the jab — especially if you get boosted — but you may also experience more severe illness, which is the opposite of what anyone would want. U.K. government data show that, compared to the unvaccinated, those who have received two doses are:²³

- Up to three times more likely to be diagnosed with COVID-19
- Twice more likely to be hospitalized with COVID-19
- Three times more likely to die of COVID-19

Final Thoughts

In closing, it's clear there are no long-term benefits to the COVID jabs, only risk. How much more data do we need before our health agencies snap to and start protecting public health?

I don't have an answer to that question, seeing how nothing works the way it's supposed to anymore. Our health agencies have been captured by the drug industry and have basically gone rogue. They ignore even the most basic rules and ethics nowadays.

Something will clearly need to be done about that, but until then, the best advice I have is to take control of your own health and make decisions based on actual data rather than corporate press releases.

If you've already taken one or more COVID jabs and now regret it, first, the most important step you can take is to not take any more shots. Next, if you suspect your health may have been impacted, check out the Frontline COVID-19 Critical Care Alliance's (FLCCC) post-vaccine treatment protocol, I-RECOVER,²⁴ which you can [download from covid19criticalcare.com](https://covid19criticalcare.com) in several different languages.

Originally published June 30, 2022 on Mercola.com

Sources And References

- ^{1, 3, 4} [CBS June 6, 2022](#)
- ² [CDC COVID Dashboard](#)
- ^{5, 8, 14} [Igor Chudov Substack June 19, 2022](#)
- ⁶ [Igor.chudov.com](#)
- ⁷ [FDA VRBPAC June 15, 2022](#)
- ⁹ [Twitter Clare Craig](#)
- ¹⁰ [medRxiv April 19, 2022 DOI: 10.1101/2022.04.18.22271936](#)
- ^{11, 13} [The Defender May 4, 2022](#)
- ¹² [UK Health Security Agency COVID-19 Vaccine Surveillance Report Week 13](#)
- ^{15, 18, 19} [Times of Israel June 17, 2022](#)
- ¹⁶ [Reuters COVID Data Tracker, Israel](#)
- ¹⁷ [Health Policy Watch January 17, 2022](#)
- ²⁰ [Epoch Times June 21, 2022 \(Archived\)](#)
- ²¹ [NEJM June 15, 2022 DOI: 10.1056/NEJMoa2203965](#)
- ²² [5.3.6 Cumulative Analysis of Post-Authorization Adverse Event Reports, Page 11, Table 5](#)
- ²³ [Daily Expose April 3, 2022](#)
- ²⁴ [FLCCC I-RECOVER Post-Vaccine Treatment Protocol \(PDF\)](#)

Dr. Birx Admits She Knew the Dangerous mRNA Vaccines Would Not Work – Half of the People Who Died Were Vaccinated

July 24, 2022 Fox News and Gateway Pundit



Dr. Deborah Birx justified one lie with another lie on top of the first lie! How can anyone trust these corrupt public health bureaucrat voices?

Former White House COVID response coordinator **Dr. Deborah** said that she **“knew”** that **COVID-19 vaccines “were not going to protect against infection”** yet **she pushed them anyway**. She said, **“But let’s be very clear: 50% of the people who died from the Omicron surge were older, vaccinated.”** Birx, along with Dr. Fauci, are responsible for pushing completely fraudulent models to persuade President Trump to shut down the economy. Dr. Fauci and Dr. Birx pushed a garbage model from the Imperial College that predicted that 2.2 million Americans would die from COVID on the White House and the American public and destroyed the US economy.



Link for video: <https://www.bitchute.com/video/5ITXf2JGAXr3/>

Former White House COVID response coordinator Dr. Deborah Birx told Neil Cavuto on Friday that she “knew” that COVID-19 vaccines “were not going to protect against infection” yet she pushed them anyway.

Via **FOX News**:

Dr. Deborah Birx: *“I knew these vaccines were not going to protect against infection. And I think we overplayed the vaccines, and it made people then worry that it’s not going to protect against severe disease and hospitalization. It will. But let’s be very clear: 50% of the people who died from the Omicron surge were older, vaccinated. So that’s why I’m saying even if you’re vaccinated and boosted, if you’re unvaccinated right now, the key is testing and Paxlovid. It’s effective. It’s a great antiviral. And really, that is what’s going to save your lives right now if you’re over 70, which if you look at the hospitalizations, hospitalizations are rising steadily with new admissions, particularly in those over 70.”*

This comes after Dr. Birx admitted that she knowingly lied to the President of the United States into locking down the US economy and forcing millions of Americans to lose their jobs.

Pfizer mRNA Vaccine Goes into Liver and Changes into DNA, Swedish Study Finds

July 24, 2022 Thema News

A new Swedish study published in MDPI found that the Pfizer vaccine goes into liver cells and converts to DNA, challenging claims so far that the mRNA COVID-19 vaccines do not change or interact with your DNA in any way. The experiment was conducted is the first to show that an mRNA vaccine is converted into DNA on a human liver cell line in and the process usually takes about six hours. It's precisely what health experts and fact-checkers said for more than a year could not occur. The CDC assured Americans that the mRNA and the spike protein it produces in COVID-19 vaccines to create an immune response *"don't last long in the body."*

A new Swedish study published in MDPI found that the Pfizer vaccine goes into liver cells and converts to DNA, challenging claims so far that the mRNA COVID-19 vaccines do not change or interact with your DNA in any way.

It's the first time that researchers have shown in vitro – or inside a petri dish – how an mRNA vaccine is converted into DNA on a human liver cell line, the Epoch Times reported.

It's precisely what health experts and fact-checkers said for more than a year could not occur.

Dr. Peter McCullough, an internist, cardiologist and epidemiologist who is one of the leading critics of the COVID vaccines, said the findings have *"enormous implications of permanent chromosomal change"* that could drive a *"whole new genre of chronic disease."*

The CDC assures Americans that the mRNA and the spike protein it produces in COVID-19 vaccines to create an immune response *"don't last long in the body."* On its website, the agency states: *"Our cells break down mRNA and get rid of it within a few days after vaccination. Scientists estimate that the spike protein, like other proteins our bodies create, may stay in the body up to a few weeks."*

The CDC lies and is corrupt from top to bottom!

Further, the CDC says on a web page titled *"Myths and Facts about COVID-19 Vaccines"* that the *"genetic material delivered by mRNA vaccines never enters the nucleus of your cells."*

However, the researchers at Lund University in Malmö, Sweden, found that the mRNA vaccine enters human liver cells and triggers the cell's DNA in the nucleus to increase the production of the LINE-1 gene expression to make mRNA.

Wasp Venom Found in Child Covid Shots

By Michael Baxter

July 27, 2022

Do the horrors ever end?

The U.S. military continues to find anomalous ingredients in Covid-19 vaccines that manufacturers Pfizer and Moderna manufactured—and allegedly attenuated—for children between the ages of 6 months and 5 years old. Last week, Real Raw News exclusively reported that the military had found the drug scopolamine, a hallucinogenic mixture with harmful properties, at mass vaccination centers in New York, California, and Washington. The criminal Biden regime and CDC Director Rochelle Walensky have said *“these shots will protect our children against the deadliest disease we’ve ever faced.”* White Hats within the U.S. military, however, have been scouting these bulk vaccination sites and surreptitiously confiscating vaccine vials for chemical analysis. The latest data show that samples acquired from a vaccination center in Redmond, Washington, contain the venom of the tarantula hawk wasp, which, according to entomologist Justin Schmidt, ranks among the most painful stings on the planet.

On 25 July, White Hats at U.S. Army Medical Research received 75 vials—450 doses—of child Covid vaccine taken from the Redmond location. Four of the 75 vials contained 19mg of venom per 1,000-unit vial. A typical tarantula hawk sting delivers ~100mcg of venom. In layman’s terms, each vial held 19,000mcg of venom, or 42.5mcg per dose. This may seem trivial because each dose envenomates the recipient with less than half the potency of a typical sting; however, the victims are very young infants and children with low pain thresholds.

Adults have described the tarantula hawk wasp sting as worse than that of the hornet, clearly suggesting it is painful and temporarily debilitating.

Worse, approximately 1% of children allergic to wasp stings have endured anaphylactic shock. In the absence of antihistamines like an epi-pen, some kids have died from a single sting.

But White Hats don’t believe the wasp venom is part of a eugenics program to eradicate our children. Rather, they assert the Deep State is involved in a widespread program aimed at causing immeasurable suffering among our population’s most vulnerable demographic—children, as part of a sinister but not fully understood agenda.

“This is obviously meant to make children scream in pain when they get a Covid shot. The shot is painful enough, but with the wasp venom added, it’s 100 times worse,” said Captain John Forsythe at Medical Research and Development Command. *“That only a small percentage of children get the contaminated vaccines doesn’t matter. It’s unspeakably horrifying and potentially harmful to those who get it. The vaccine is deadly enough without the contaminants.”*

Source: >>>

Wasp Venom Found in Child Covid Shots | Real Raw News

<https://realrawnews.com/2022/07/wasp-venom-found-in-child-covid-shots/>

Israel Caught Concealing Children's Vaccine Injuries Posted On July 24, 2022 @ 5:22 pm In Headline News

by Vera Sharav

[Alliance for Human Research Protection](#) ^[1]

[Leaked Documents Reveal: Israeli Ministry of Health Concealed Serious Harm from Pfizer Covid Vaccine](#) ^[2]

Israel's Ministry of Health commissioned a study analyzing reports of adverse events from Pfizer's COVID vaccine to Israel's vaccine database, known as the Nahlieli system, between December 2021 and May 2022. The research team was headed by Professor Matti Berkowitz, director of the Clinical Pharmacology and Toxicology Unit at Assaf Harofeh Hospital (Shamir).

Prof. Berkowitz's team found that children in the 5-11-year age group had twice to four times as many adverse events following the Pfizer shot as children in the 12-17 age group. This doubling of vaccine injuries is, in itself, extremely disturbing — and should have been immediately brought to the attention of the nation's parents.

The parents were not informed. What's more, the Ministry officials recommended booster shots for youngsters aged 5-11—thereby increasing the risk for serious harm.

Furthermore, the doubling of adverse events is only the beginning of the bad news.

As [Dr. Yaffa Shir-Raz](#) ^[3], a health and risk communication researcher at the University of Haifa and at Reichman University, [explained](#) ^[2]: the 2-dose immunization rate for 5 to 11-year-olds is less than 18%, while older children have rates of 55-72% (3-4 times higher).

“That means that the young children would thus be expected to have $\frac{1}{3}$ - $\frac{1}{4}$ of the number of adverse events experienced by the older children, not twice as many. This means that the adverse event rate for young children is actually 6-8 times that of the older children, i.e., at 600-800% of the baseline injury rate!”

It is unconscionable that the Israeli Health Ministry knew about the serious risks of harm posed to young children, concealed the evidence, and further expanded the ever-increasing risk for children by authorizing the use of these UNSAFE and medically unjustifiable genetically manipulated injections for infants and toddlers!

The exposure of children to unjustifiable risks constitutes — as the late Dr. Vladimir Zelenko fearlessly categorized diabolical child sacrifice.

The disturbing findings by Prof. Berkowitz and his team are not the first warning signal regarding the safety of Pfizers' COVID vaccine in children.

Active monitoring for adverse events was conducted by the HMOs in Israel for about four months among 172 children aged 5-11, who were vaccinated as an initial group outside the label (under the authorization of the vaccine for kids 12-15 years old), also demonstrated acute safety signals (Ministry of Health circular: "Vaccination of kids aged 5-11 years against the new Coronavirus – an exception for individual cases from 27.7.21", reference 548562821). Another flashing warning light rises from the gap found among vaccinated kids aged 5-11 years old between the number of those who received the first dose and the number of those who received the second dose. According to data from the Ministry of Health, there is a gap of 92,000 children.

Two Published Analyses of Israeli National data Confirm Serious Harm following Covid experimental genetic injections.

1. A very large Israeli study published in the Journal of Clinical Medicine (April 2022) included 196,000 unvaccinated patients who recovered from Covid infection, compared to 590,000 controls. The doctors found that COVID infection itself is not linked to a significant increase in cardiovascular complications.
 - These findings contradict previous, widely publicized false claims about the risks for unvaccinated people.
1. Another [new study](#) ^[4] by Israeli medical scientists was published in the journal [NATURE](#) ^[5] (April 2022). The study is based on data from the National Emergency Medical Services and updates the findings of a previous study (2021) that linked COVID vaccines to heart inflammation (myocarditis) in young men. The new study found a 25% increase in cardiac arrest in both males & females.

This study and the data from the US FDA-CDC database – Vaccine Adverse Event Reporting System (VAERS) — contradict a flood of commissioned articles in scientific journals that have sought to shield the experimental injections by falsely blaming Covid infection for the admitted increase in cardiac inflammation and deaths. Public health officials in the U.S., Canada, Australia, Israel, and Western Europe, ignored the warnings and the mounting evidence of irrevocable harm from the public.

- Before mass Covid vaccination, there was no "Sudden Adult Death Syndrome." Neither did children suffer heart attacks!

To gain insight into the scope and magnitude of harm to individual, previously healthy Israelis, I highly recommend that you check Avital [Livni's Israel Testimonies Project](#) ^[6]

Having escaped the Nazi genocidal agenda, I am ever more convinced that we are being confronted with a genocidal war on a global scale. The genetically manipulated mRNA injectables are technologically advanced bioweapons.

Israel Caught Hiding Children's Vaccine Injuries ^[7]

Leaked documents show the government keeping data from the public while approving children's boosters.

Children aged 5-11 are suffering vaccine injuries, including neurological adverse events, at about 6 times the rate of 12 to 17-year-old children.

Raw data – 2x the injury rate of teens

Israel's Ministry of Health commissioned a study analyzing reports of adverse events from Pfizer's COVID vaccine to the nation's vaccine database, known as the Nahlieli system, between December 2021 and May 2022. The research team was headed by Professor Matti Berkowitz, director of the Clinical Pharmacology and Toxicology Unit at Assaf Harofeh Hospital (Shamir).

In raw numbers, Berkowitz found that children in the 5-11 age group had twice as many adverse events following the Pfizer shot as children in the 12-17 age group. That doubling of vaccine injuries is, in itself, extremely disturbing and should have been immediately brought to the attention of the nation's parents.

Worse – 6x the injury rate of teens

Unfortunately, the doubling of adverse events is only the beginning of the bad news. [Dr. Yaffa Shir-Raz](#) ^[3], a health and risk communication researcher at the University of Haifa and at Reichman University (IDC Herzliya), [notes](#) ^[2] that the 2-dose immunization rate for 5 to 11-year-olds is less than 18%, while older children have rates of 55-72% (3-4 times higher).

All things being equal, the young children would thus be expected to have $\frac{1}{3}$ - $\frac{1}{4}$ of the number of adverse events experienced by the older children, not twice as many. This means that the adverse event rate for young children is actually 6-8 times that of the older children, i.e., at 600-800% of the baseline injury rate!

While there are slightly more children in the 5 to 11-year-old group than in the 12-17 age group, it does not come close to accounting for the mind-blowing rate increase in the younger group.

New vaccine injuries not included in Pfizer's leaflet

The findings by Professor Berkowitz were presented to the Ministry of Health's Department of Epidemiology about three weeks ago, in early June 2022, together with graphs depicting the severity of the data, broken down by injury types, as well as additional alarming information:

. . . the team identified and characterized neurological symptoms that were not previously known and are not mentioned in the physician's leaflet of Pfizer's Comirnaty vaccine, including Hypoesthesia (partial or complete decrease in skin sensitivity), Paraesthesia (abnormal skin sensation such as numbness, tingling, stinging or burning), tinnitus, dizziness and more. [Emphasis added].

Changes to the menstrual cycle are long-lasting

Dr. Shir-Raz reports that Pfizer representatives have claimed to have “no knowledge of long-term adverse events.” The research team found, however, that many side-effects of the vaccine are indeed long-term. In the case of changes to the menstrual cycle, 90% of the women reported the change to be long-lasting. Thus, *the research team made it clear to the Department of Epidemiology that Pfizer needed to be notified regarding the long-term adverse events identified. [Emphasis added].*

Pfizer should be informed, but not the public?

What you don't know can hurt you.

When some three weeks passed without the Health Ministry making these findings public, those privy to the information became concerned that parents were not being given the information necessary to act with “informed consent” in determining whether to inject their own children.

Leaked documents

The concerned individuals then leaked the data and graphs, which eventually came into the hands of the [Professional Ethics Front](#) ^[8], an independent Israeli group of physicians, lawyers, scientists, and researchers, who “aim to address the ethical issues related to the COVID-19 crisis in Israeli society.” This watchdog group addressed a letter and follow-up correspondence to the official [State Comptroller of Israel](#) ^[9], [Matanyahu Englman](#) ^[10], a Knesset appointee charged with overseeing the legality and ethical conduct of public sector institutions:

The findings have been brought to our attention, and they are serious and indicate a risk to children, and in particular to young children aged 5-11 ...

The group argued that the information should be disclosed, even if the data is still expected to go through additional analysis,

Out of fear that there is a blatant violation of parents' right to informed consent, and because it constitutes gross negligence, and puts children and infants at risk”.

Too busy to respond?

Despite Israeli law making it clear that the State Comptroller act independently of the executive branch, they have not responded in any way to the group's requests, prompting the group to file a Freedom of Information Request (FOIA) to get the full report to the public with an acknowledgment of its authenticity. This delay in response comes even as Israel has just approved booster shots for

young children and stands poised to add babies and toddlers to the COVID vaccination schedule.

Matches previous reports on the danger to small children

This passive monitoring analysis (based on reports initiated by parents) matches the alarming findings from an active monitoring study of adverse events in children aged 5-11 in Israel (tracking every child in the study), which “also demonstrated acute safety signals.”

Matches findings of danger to babies

If small children are having difficulty absorbing the contents of the COVID vaccines, one might expect babies and toddlers to also face dangers from the injections. That is just what Dr. Shir-Raz found in an [analysis](#) ^[11] she conducted with her colleague Ranit Feinberg of Pfizer data on children under 4:

... contrary to the FDA’s briefing document claiming that the majority of adverse events in Pfizers’ clinical trial were non-serious – at least 58 cases of life-threatening side effects in infants under 3 years old who received mRNA vaccines were reported. For some, it is unclear if they survived ...

Shir-Raz found the most common serious adverse events to be life-threatening bleeding, anaphylactic shock, anticholinergic syndrome, encephalitis, hypoglycemia, and neuroleptic syndrome. In most of the reported cases, these are multi-system injuries.

In one egregious case, with no indication of whether the baby was enrolled in a Pfizer experiment and lacking any other explanation about how a baby just a few weeks old received the COVID shot, Shir-Raz reports,

“Chest pain; cardiac arrest; Skin cold clammy.” This short description of a cardiac arrest, which occurred one hour after receiving a Pfizer-BioNTech COVID-19 vaccine, is taken from the VAERS system – the US Vaccine Adverse Event Reporting System ([case number 1015467](#) ^[12]), and it does not refer to an elderly person, nor to a young adult or even a teenager. It is hard to believe, but this report refers to a two-month-old baby.

Ominously, this infant’s outcome is labeled unknown.

This case was reported as serious with seriousness criteria-life threatening from HA. No follow-up attempts are possible. No further information is expected.

It’s Official: Your DNA is Weaponized

JULY 25, 2022

Spread the Word

A House Intelligence Committee member warns Americans against using DNA testing kits

Bio-samples gathered by various DNA testing services could be sold and used to develop bioweapons specifically tailored to target certain groups or even individuals, US lawmakers have claimed at the Aspen Security Forum – echoing concerns long voiced by Russian officials.

“There are now weapons under development, and developed, that are designed to target specific people,” US Representative Jason Crow (D-Colorado), a member of the House Intelligence Committee, [said](#) in Colorado on Friday. “That’s what this is, where you can actually take someone’s DNA, take their medical profile, and you can target a biological weapon that will kill that person or take them off the battlefield or make them inoperable.”

Given that threat, Crow added, it’s troubling that expectations of privacy for personal data have diminished over the past 20 years, to the point that young people have *“very little expectation of privacy”* and readily give their data to private companies, such as DNA testing services.

“People will very rapidly spit into a cup and send it to 23andMe and get really interesting data about their background,” Crow said. “And guess what? Their DNA is now owned by a private company. It can be sold off with very little intellectual property protection or privacy protection.”

He added that the US will need to create new guidelines for protection of personal health data, including DNA, *“because that data is actually going to be procured and collected by our adversaries for the development of these systems.”*

Moscow has been warning about the dangers of uncontrolled gathering of DNA samples for years, with President Vladimir Putin stating back in 2017 that according to Russian intelligence services, biological samples were being [harvested](#) *“purposefully and professionally”* all over Russia by various NGOs and other organizations for unclear purposes.

Over the past years, the Pentagon has *“significantly expanded its research potential not only in the field of creating biological weapons, but also obtaining information about antibiotic resistance and the presence of antibodies to certain diseases in populations of specific regions,”* Lieutenant-General Igor Kirillov, the head of the Russian Radiation, Chemical and Biological Protection Force, claimed in May.

In a series of briefings starting in March, the Russian military has been presenting evidence of the Pentagon’s alleged involvement in funding bio laboratories in Ukraine. According to Russia’s Investigative Committee, the US poured more than \$224 million into biological research in Ukraine between 2005 and early 2022.

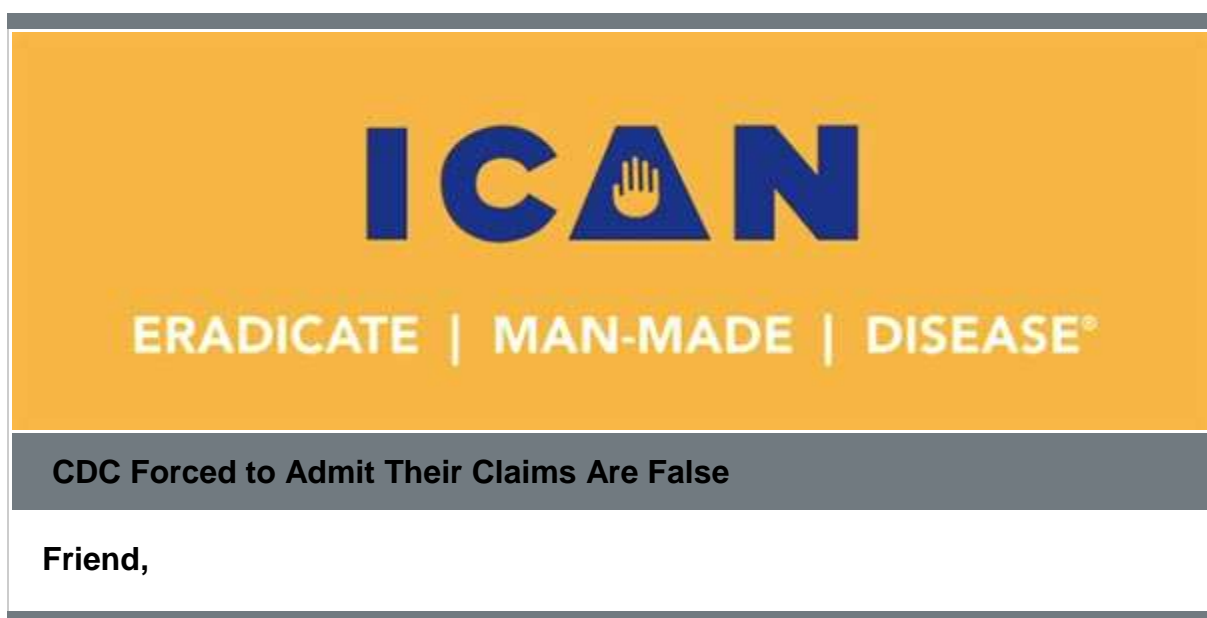
While Washington admitted its support of 46 biological research facilities in Ukraine over the past 20 years, it insists it was all part of a peaceful public health project. The US military accused Russia and China of “spreading disinformation and sowing mistrust” about its efforts to rid the world of weapons of mass destruction – while Western media dismissed the claims as a [conspiracy theories](#) and [science fiction](#).

Concerns over customized bioweapons extend beyond human DNA data, according to Sen. Joni Ernst (R-Iowa), a member of the Senate’s Subcommittee on Emerging Threats and Capabilities and Armed Services Committee, who spoke on a panel with Crow. America’s adversaries can also direct bioweapons specifically at US livestock and crops to create a food security crisis, she claimed.

“There’s a number of ways we can look at biological weapons and the need to make sure not only are we securing human beings, but then also the food that will sustain us,” Ernst added.

A report issued earlier this year by the US-China Economic and Security Review Commission suggested that China could someday attempt to wage [biological warfare](#) against genetically modified American crops, given its increased “*interest in US agriculture*” and GMO-related intellectual property.

“While China’s main interest in obtaining GM seeds from the United States is in improving its crop yields, the potential weaponization of agricultural IP is possible,” it said. “Similar to hacking a computer code, Beijing could easily hack the code or DNA of US GM seeds and conduct bio warfare by creating some type of blight that could destroy US crops.”



ICAN demanded, through three separate requests, that the CDC provide evidence to support its claim that COVID-19 vaccines are not causing variants.

We now know that from these two [prior requests](#), and in this [third and final response](#) we received from the CDC it is clear that their claims are completely baseless and false.

Straight from the CDC:

[“A search of records by the National Center for Immunization and Respiratory Diseases and the Emergency Operations Center failed to reveal any documents pertaining to your request.”](#)

The CDC has no evidence.

[We need your help to continue to expose the lies of government agencies.](#)

Children Don't Need COVID Vaccines, Canadian and Australian Groups Tell Public Health Officials

By Julie Comber, Ph.D. | *The Defender* | July 25, 2022

Groups in Canada and Australia are urging public health officials to reconsider rolling out [COVID-19](#) vaccines for young children, following the authorization earlier this month in both countries of Moderna's COVID-19 vaccine for children ages 6 months to 5 years.

The [Australian Vaccine-risks Network](#) (AVN) on July 19 sent an [open letter](#) to Dr. Brendan Murphy, secretary of Australia's Department of Health and Aged Care, voting members of the [Australian Technical Advisory Group on Immunization](#) and members of parliament threatening to *“move forward with preparations for seeking the intervention of the Federal Court of Australia”* if officials don't respond.

The [Canadian COVID Care Alliance](#) (CCCA) on July 14 [published an open letter](#) to Canadian health officials stating their members would *“be happy to meet you to discuss findings documented in this letter in greater detail.”*

Both letters emphasized three arguments against authorizing the mRNA shots in young children and babies:

1. Children don't need COVID-19 vaccination because they are at [extremely low risk](#) of COVID-19.
2. In any case, the mRNA shots don't work well.
3. The potential harm from the mRNA shots outweighs the benefits for young children.

Both letters also referenced the June 30 [open letter](#) to U.K. health officials from more than 70 physicians and scientists warning against vaccinating younger children against COVID-19.

The U.K. letter, written in response to the U.S. Food and Drug Administration's (FDA) [Emergency Use Authorization](#) (EUA) in mid-June of the Moderna and the Pfizer-BioNTech COVID-19 shots for children as young as 6 months, urged U.K. health officials to not "[make the same mistake](#)" the FDA made.

All three letters referenced Søren Brostrøm, director of the Danish Health and Medicines Authority, who in June [said](#), *"We did not get much out of having children vaccinated against coronavirus last year."*

Australia's [Therapeutic Goods Administration](#) on July 18 [provisionally approved](#) a pediatric dose of Moderna's [Spikevax](#) COVID-19 shot for children ages 6 months to 5 years old. Rollout of the vaccines is contingent on input from the Australian Technical Advisory Group on Immunization.

A few days earlier, on July 14, Health Canada [authorized](#) the use of Spikevax for children 6 months to 5 years of age. According to the statement, *"As a result of this authorization, approximately 1.7 million children are now eligible for vaccination against COVID-19."*

Risks 'far outweigh' benefits for children

The 11-page CCCA letter contains 117 references and six pages of figures and graphs to support the group's argument that "the data shows that, in the Omicron era, when population-based immunity is widespread, the risks associated with COVID-19 mRNA vaccines far outweigh the benefits in children."

The authors of the CCCA letter criticized the FDA, stating, *"no gold standard, placebo-controlled disease endpoint trials, large enough [with at least 800,000 participants] to categorically establish the clinical safety and long-term efficacy of the Pfizer COVID-19 mRNA vaccinations in children 12- to 15-years-old, 5- to 11-years-old, 2- to 4-years-old, and 6-months-old to 23-months-old have been undertaken."*

Instead, the EUA for Pfizer was *"based on the preliminary results of four very small [immuno-bridging trials](#), enrolling fewer than 3,000 participants each."*

The [CCCA letter](#) presented data from the Canadian province of Ontario, which *"reported a negative dose-response effect for the COVID-19 vaccinations [original emphasis]."*

The letter continued:

“In other words, the proportion of cases of COVID-19 were highest among those who had been ‘boosted,’ lower among the ‘fully inoculated’ and least among the ‘not fully inoculated’ (which includes the ‘uninoculated’).”

The authors presented graphs from the [Public Health Ontario website](#), noting a similar pattern was observed in the 12- to 17-year-olds and the 5- to 11-year-old age groups.

“Additionally, a greater proportion of ‘boosted’ Ontarians have died, revealing that the vaccinations may be associated with serious secondary effects.”

The CCCA letter concludes:

“We trust that our research has provided you with evidence needed to adjust Canadian health policy to protect our children from undue harm. We would be happy to meet you to discuss findings documented in this letter in greater detail.”

‘Huge gap’ in Pfizer’s vaccine trial documentation.

According to the authors of the AVN letter, the [Pfizer documentation](#) presented to the FDA had huge gaps in the evidence provided.

For example, the letter stated:

“The protocol was changed mid-trial. The original two-dose schedule exhibited poor immunogenicity with efficacy far below the required standard. A third dose was added by which time many of the original placebo recipients had been vaccinated.”

The [AVN](#) letter argued the Moderna shot for young children fails to meet Australia’s regulatory requirements to be granted *“provisional determination”* (similar to EUA in the U.S.) under [regulation 10L\(1\)\(a\)](#) of the Therapeutic Goods Regulations.

To receive provisional determination, there must be *“an indication of the medicine is the treatment, prevention or diagnosis of a life-threatening or seriously debilitating condition,”* the letter stated.

The authors said Australia’s health department and TGA did not *“show any data or science to support a conclusion that COVID-19, and particularly the Omicron variant now widespread across Australia, is ‘life-threatening’ to infants aged 6 months up through 4 years, nor indeed that infants 6 months up through 4 years suffer ‘seriously debilitating’ symptoms when infected with COVID-19.”*

The authors also addressed the issue of [manipulative strategies](#) used to promote COVID-19 vaccination of children, and said pushing unnecessary and novel mRNA-based vaccines onto young children risks undermining parental confidence in routine immunization programs.

7 BIGGEST mass media cover-ups since the COVID-19 scamdemic began

Monday, July 25, 2022 by: [S.D. Wells](#)

[\(Natural News\)](#) Without fake news “*mainstream media*,” the medical industrial complex would not be nearly as effective at conning and coercing so much of the populace into this toxic pharma scamdemic that has been not only a cash cow for the pharma goons, but a death sentence for millions of sheeple. MSM is the “*right arm*” of the pharma industrial complex, just as [IG Farben](#) (pharmaceutical conglomerate) was for Adolf Hitler.

The television, newspapers, social media, and shill websites all get their narrative script directly from the CDC, and it’s all propaganda to push faulty PCR tests, masks, prescription drugs, ventilators, paranoia, and of course, [blood clotting](#) “*vaccines*.”

Mass media is the propaganda arm of Big Pharma, for a fake history of medicine and to cover up current events that defy the narrative.

As toxic medicine and deadly [vaccines maim and kill](#) millions of Americans, the only way to keep the scamdemic “*alive*” and spreading is to use the pharma arm of fake news, to cover up the carnage as it occurs, and as it is revealed by truth news (independent media). An entire [fake history of medicine](#) has been propagated for the sheeple to digest (and regurgitate), leaving the masses with no clue that their own government wants them dying and dead, while robbing them of all their rights, health, and livelihood in the process.

Welcome to VIRUS MANIA of 2022 and beyond, where the mass media covers up anything and everything that would reveal the FDA, CDC, and WHO are in cahoots to turn every American into a zombie who takes toxic medicine daily, clot shots for “virus” scams, and eats genetically mutated, lab-concocted food all day. All of this while those same zombies read fake news and repeat that narrative like it’s fact, for all their friends, relatives, neighbors, and coworkers.

Here are the 7 most epic mass media cover-ups since the Wuhan lab virus plandemic began:

#1. The “vaccines” are not really vaccines, so the CDC had to change the definition

#2. Most of the people dying from Fauci Flu are “fully vaccinated” against it

#3. mRNA DOES change your DNA, tricking cells into producing unlimited toxic prions

#4. Masks do NOT work, but rather breed bacteria in the mouth, throat, and lungs

#5. PCR tests are mostly false positives used to spread virus mania and increase pharma profits

#6. Healthy athletes, pilots, celebrities, and military members are suffering myocarditis and deaths from the clot shots and the media NEVER mentions vaccine-induced injuries

#7. Spike proteins travel throughout the ENTIRE vascular system, invading organs and clogging vessels, not just remaining at the “site of injection”

Sick news for sick people under a sick regime!

Yes, the CDC had to change the “*definition*” of vaccines, because the Fauci Flu clot shots don’t even fit it, and they definitely wanted to be sure they could call them “*vaccines*,” since three out of every four Americans think vaccines are good for your immune system and “*save*” you from infectious disease death. Most of the world that’s catching and/or dying from COVID-19 are triple-vaxxed and still getting more clot shots as they become available as “*boosters*.”

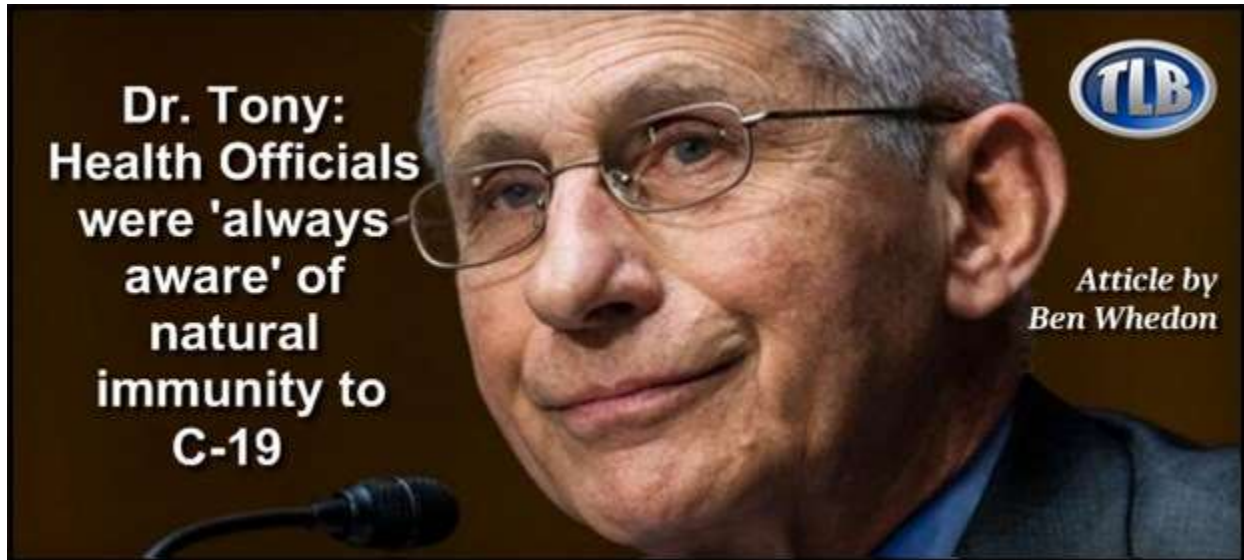
These gene therapy “*victims*” think the spike proteins help them avoid COVID-19, and they have no clue that these toxic, virus-mimicking, sticky prions clog the entire vascular system, and invade vital organs, shutting them down. Got severe, chronic inflammation? Look no further than the clot shots.

Meanwhile, fake news and fraudulent Fauci have the masses thinking their bacteria-breeding masks are keeping them safe from viral particles that are flying around looking for maskless, unvaccinated people and taking them out like flies. Yet, those same masks help provide false-positive PCR tests, that add to the chaos and paranoia of the scandemic, leading the masses to their death caves (MD offices and hospitals).

Do your own research and don’t use Google. Try the search engine [Brave BETA](#) and get more truth news and real information. Bookmark [Censored.news](#) to your favorite websites for truth news that’s being censored from the rest of media as you read this.

Dr. Tony: Health Officials were 'always aware' of natural immunity to C-19

July 26, 2022



Fauci claims health officials were 'always aware' of natural immunity to COVID-19
The NIAID director clarified that the natural immunity to COVID-19 becomes less effective over time.

By Ben Whedon

National Institute of Allergy and Infectious Diseases Director Dr. Anthony Fauci on Monday said health officials knew during the COVID-19 pandemic that contracting the disease ultimately offered a degree of natural immunity to it.

"We were always aware that if you get infected, you have a degree of protection against reinfection," he told reporters, per the Epoch Times.

Critics of Fauci's push for nationwide vaccinations long argued that natural immunity offered protection against the virus and thus individuals who contracted COVID-19 didn't need to opt for one of the nation's authorized vaccines.

The NIAID director clarified that the natural immunity to COVID-19 becomes less effective over time and was not comparable to the protections one develops after contracting polio, smallpox, or measles.

At the height of the pandemic, Fauci was a high-profile advocate for strict lockdown measures and mask mandates. He often pushed the receipt of both initial vaccines and booster shots despite NIAID researchers discovering that natural immunity led to stronger antibody responses than the Moderna mRNA vaccine.

Fauci has long drawn scrutiny, especially from Republicans, over his endorsement of strict COVID-19 policies. GOP leaders have long been open about their plans to investigate him and his agency over its handling of the virus and his public statements. Kentucky Republican Sen. Rand Paul on Monday said *“one way or another, if we are in the majority, we will subpoena his records and he will testify in the Senate under oath.”*

Starting THIS fall: Endless COVID booster shots ramp up, funded with taxpayer money

by: [Sara Middleton, staff writer](#) | July 25, 2022

[\(NaturalHealth365\)](#) Not too long ago, when the media first began talking about new COVID shots from Big Pharma companies Pfizer and Moderna, experts and everyday people – all of whom were swiftly labeled “conspiracy theorists” – warned that these hastily made mRNA jabs would almost certainly give way to vax mandates and an endlessly increasing, vice grip-like control over individuals’ bodily autonomy. One dose or even two doses would *never* be enough – Pharma and government officials would demand that people take three or more doses to function in society and put food on their families’ tables.

Now, [a recent move](#) from the U.S. Food and Drug Administration (FDA) seems to perfectly exemplify this concerning prediction. The decision is sure to boost Pfizer’s and Moderna’s profits, paid for with taxpayer money. But will these shots actually “boost” Americans’ health?

Did the U.S. government just set a precedent for unending COVID shot boosters? On June 29, 2022, President Biden’s Administration announced a \$3.2 billion deal to *“secure 105 million doses of Pfizer’s latest COVID-19 vaccine for [a] fall vaccination campaign.”* The deal came with an option to buy up to 300 million doses.

The very next day after this deal was made, the FDA came out and said that these fall [booster](#) shots would need to be modified to target specific variants of the SARS-CoV-2 virus, Omicron subvariants BA.4 and BA.5.

So, in addition to using taxpayer money to purchase billions of dollars’ worth of shots from these companies, the government is now telling these companies to make new versions of the shots – effectively reinforcing that whatever COVID shots people already got earlier in the pandemic are useless and likely won’t “count” toward future vax mandates.

Is this what we can expect to see every fall from now on, just like flu shots?

Dr. David Garter is a pharmacologist and [FDA](#) reform advocate at the Ethics and Public Policy Center in Washington, D.C. In an email to Children’s Health Defense, he writes, *“Nobody is taking the booster shots, and the White House*

just keeps ordering them and ordering them from Pfizer,” adding that “Pfizer is on track to make \$50 billion off vaccines in 2022 alone and the government keeps on ordering.”

Notably, no human clinical trials to date have tested modified COVID shots with Omicron subvariants, according to Children’s Health Defense (although Pfizer and Moderna will reportedly begin such trials shortly).

In a Twitter post, Children’s Health Defense founder Robert F. Kennedy, Jr. stated that the White House *“has dropped all pretenses that this is about protecting public health,”* calling the move an *“unsheathed corporate welfare project to further enrich the shareholders of the most profitable industry in history.”*

Pay attention: You can never be *“fully vaxxed”* against COVID-19.

You’ll remember at the beginning of the vax rollout how people would brag about being *“fully vaxxed”* and how government officials would say that *“fully vaxxed”* individuals were doing their part to protect themselves and each other ... notice how quickly this argument fell apart, for a few reasons.

For one thing, we now know that these COVID shots do NOT stop transmission of SARS-CoV-2 and that vaxxed individuals infected with the virus are as *infectious* as vax-free individuals who are infected (and building natural immunity). The idea that getting jabbed will prevent the spread of SARS-CoV-2 is simply not grounded in reality.

For another thing, and according to the U.S. government, *there is no such thing as “fully vaxxed” anymore.*

On its website, the Centers for Disease Control and Prevention (CDC) does not refer to people as fully vaxxed but instead says that people should *“stay up to date with the recommended vaccines.”* They use the term *“up to date”* to describe anyone who has received *“all doses [of the COVID shots] in the primary series and all boosters recommended for you, when eligible.”*

This might seem like a subtle change in terminology, but the implication is significant: *anyone who agrees to get a vax is effectively agreeing to get as many doses of it as deemed necessary by the government.*

This also means that as soon as someone decides to decline any further shot, they too must suffer the consequences that the government has gotten away with, such as banning you from travel, access to public spaces, and even employment.

Having to perpetually consume drugs to participate in society is *not* ethical, yet many will argue that this is precisely the groundwork laid for the American public. Give the government an inch, and they will take miles.

Bullous pemphigoid or probable Monkeypox is triggered by mRNA Covid-19 vaxx

JUL 28 Posted by [Editor, cairnsnews](#)

Published by the National Library of Medicine, Maryland, US, October 2021

Bullous pemphigoid (BP) is an autoimmune skin disease characterized by the appearance of tense blisters over an erythematous base and the existence of circulating G immunoglobulins (IgGs) against hemidesmosome antigens BP180 and BP230.¹ In this paper we present the case of a woman who developed BP after receiving the first dose of *COMIRNATY* (messenger ribonucleic acid [RNA_m] Pfizer-BioNTech vaccine) and a subsequent reactivation after receiving the second one.



The case corresponds to a 78-year-old woman with diabetes mellitus, treated with insulin, and Alzheimer's disease (global deterioration scale [GDS] score of 4), and treated with memantine. She consulted the Dermatology Department due to a 1.5-month history of skin rash, reporting that the lesions had appeared three days after she received the *COMIRNATY* vaccine. Her symptoms stabilized within two weeks with the aid of high-potency topical corticosteroids. However, 21 days later, she experienced a significant reactivation after receiving the second dose of the vaccine (Fig. 1). A physical examination revealed tense blisters over an erythematous base on her face, trunk, and limbs. No lesions were detected on

any of her mucous surfaces. A skin biopsy confirmed the diagnosis of BP, with both direct and indirect positive serum immunofluorescence. The remaining laboratory analyses yielded normal results, except for mild eosinophilia. We informed the Pharmacovigilance System and started treatment with prednisone 40 mg every 24 h, achieving a good clinical response.

The two BP antigens are found in the hemidesmosome, a cell adhesion complex that anchors the epithelium to the basement membrane. It has been proposed that IgG bound to these antigens activates the complement by inducing inflation and interrupting this bond.² Genetic predisposition and certain triggering factors are involved in its etiopathogenesis. The association between BP and basement membrane alterations, such as traumas or burns; certain drugs, such as oral antidiabetics; or neurological diseases, such as Parkinson's disease or dementia, is well known.^{2,3} The latter association is partly explained by the autoimmune cross-reaction that occurs between the BP230 protein isoforms present in both the skin and the central nervous system.² In relation to vaccines, cases of BP have been reported following the administration of vials against tetanus, diphtheria, pertussis, polio, rabies, hepatitis B, rotavirus, pneumococcus, or influenza.^{1,2,3,4,5} The latency period ranges between one day (or earlier in the case of the pediatric population)¹ and one month following the vaccination.^{2,4,5} The mechanism by which the vaccine induces BP is not well understood, and it is unlikely that a vaccine itself would explain the association, as there are no similarities between the vaccine structure and the basement membrane antigens.² One hypothesis that has previously been proposed is that the vaccination may trigger a greater autoimmune response in patients with a significant immunological predisposition,^{2,4} such as the case of our patient with Alzheimer's disease, as the vaccine would activate B-cell immunity and, therefore, the production of antibodies,⁴ which is the main mechanism by which the lesions of this disease are generated.

In our patient, BP developed within three days of the administration of the first dose of the *COMIRNATY* vaccine against the 2019 coronavirus disease (COVID-19). The appearance of these lesions was followed by a period of clinical stabilization during the second week after the vaccination. This was followed by a significant reactivation of the lesions 21 days later, after she received the second dose of the vaccine. The timeline with respect to the administration of the first dose and the reactivation after the administration of the second one supports the hypothesis of a possible relationship between the *COMIRNATY* vaccine administered and the appearance of BP in our patient, with a score of 8 (possible causal reaction) in the Naranjo Adverse Drug Reaction Probability Scale.#

Share this:

Dr. Toney Wants Americans to Wear Masks Again [Video]

July 27, 2022



**Dr. Fauci Wants Americans to Wear Masks Again
New Study Shows Just How Unhealthy It Is
Becker News**

Dr. Anthony Fauci, the Director of the National Institute for Allergy and Infectious Diseases, recently endorsed the CDC's recommendation that Americans should mask in "schools, places of work," and any place "that brings people together in a closed environment."

Dr. Fauci Wants Americans to Wear Masks Permanently

Despite Dr. Fauci's insistence that Americans continue to mask indefinitely — regardless of risk, vaccination status, or natural immunity — there is brand new research that demonstrates that such masking is not only statistically worthless, but actually *harmful*.

Scientific journal 'Nature' has published research showing that masks can harbor bacteria and fungi, in some cases harmful, even if one changes the mask daily.

One remarkable admission in the journal article is that the adverse health effects of mass public masking have not been extensively studied, despite masks being mandated in numerous countries to fight pandemics, such as the SARS-CoV-2 pandemic.

"Although the effectiveness of face masks against viral transmission has been extensively studied, the hygiene issues in mask usage remain unclear," the 'Scientific Reports' study notes. "The standard mask usage is disposable non-woven masks. In some cases, however, people may use non-woven masks

repeatedly or use different types of masks in different situations depending on their socioeconomic cultures.”

“For example, in Japan, the short supply of non-woven masks led to the repeated use of disposable non-woven masks and the use of other types of face masks, such as handmade masks and polyurethane masks,” the study adds. “Even after the shortage of mask supply has been resolved, some people have used disposable non-woven masks repeatedly or other types of face masks.”

“Among environmental pathogens, viruses cannot replicate without infecting host cells; most bacteria and fungi can survive and grow on various materials depending on the conditions,” the article states as background. “Bacteria and fungi are widely present on the surface of the materials used in our daily lives (e.g., currency notes and in public transportation systems), where we can detect pathogenic bacteria and fungi. Although a few studies reported bacterial or viral contamination on masks in experimental and clinical settings, there has been no study on what and how many both bacteria and fungi adhere to masks used daily in community setting bases; this is the neglected hygiene issue under the COVID-19 pandemic.”

“Since masks can be a direct source of infection to the respiratory tract, digestive tract, and skin, it is crucial to maintain their hygiene to prevent bacterial and fungal infections that can exacerbate COVID-19,” the researchers note. “Thus, in this study, following a survey of 109 volunteers on their mask usage and lifestyles, we aimed to quantify and identify the bacteria and fungi attached to the face masks by culturing microbes isolated from the masks.”

The [study](#) points out that Japan had low viral transmission rates during the period under observation. However, Covid-19 cases have [exploded in Japan](#) despite nearly universal mask usage.

“Although the numbers of COVID-19 patients were relatively low in Japan during the study period, most people wore face masks in public places, and all survey participants wore face masks,” the researchers state before providing the results. As can be seen below, the face side of the masks had significant bacterial colony counts, regardless of mask type, even after one day of usage. Fungi was more likely to grow on the outside of the masks.

The researchers listed the types of bacteria that were procured from the culture samples.

The full report was in the previous issue of Mass Murder #77. I abridged it for including with this segment. It contained many drawings and pages of data that is important but each segment can be huge from all the reports I gather to share. Virtually every week, this series is upwards of 80 pages.

Pfizer Annual Revenue Doubled — to \$81.3 Billion — Thanks to COVID Vaccines

Not only did Pfizer's COVID-19 vaccines double the company's annual revenue, but they also gave the drug maker unique weight in determining U.S. health policy — something that concerns even staunch vaccine-pushers like Dr. Paul Offit.

By Dr. Joseph Mercola

Story at a glance:

- The COVID-19 pandemic has been a real boon to Pfizer. Not only has it doubled Pfizer's annual revenue, but it has also given the drug maker unique weight in determining U.S. health policy — something that concerns even staunch vaccine-pushers like Dr. Paul Offit.
- Pfizer's revenue in 2021 was \$81.3 billion — approximately double that of 2020 — and the COVID shot accounted for \$36.78 billion of that.
- Pfizer's COVID jab dominates 70% of the U.S. and European markets, and Paxlovid, its COVID drug, has become a standard treatment choice in hospitals. This despite findings showing the shot doesn't prevent infection or transmission, and that Paxlovid causes severe rebound and supercharges mutations.
- The U.S. had thrown away 82.2 million expired COVID jab doses as of mid-May, yet the Biden administration ordered another 105 million doses at the end of June for a fall booster campaign that will cost taxpayers \$3.2 billion.
- Pfizer's contracts are almost exclusively slanted in Pfizer's favor. They're guaranteed payment while having no financial liability for injuries and deaths, and it appears this indemnification applies even if they were to be found guilty of fraud.

According to [Kaiser Health News](#) (KHN), the COVID-19 pandemic has been a real boon to Pfizer. Not only has it yielded “outsized benefits” in terms of profits, but it has also “given the drug maker unusual weight in determining U.S. health policy.”



“Based on internal research, the company’s executives have frequently announced the next stage in the fight against the pandemic before government officials have had time to study the issue, annoying many experts in the medical field and leaving some patients unsure whom to trust,” KHN reporter [Arthur Allen writes](#), adding:

“When last year Bourla suggested that a booster shot would soon be needed, U.S. public health officials later followed, giving the impression that Pfizer was calling the tune.”

“Some public health experts and scientists worry these decisions were hasty, noting, for example, that although boosters with the mRNA shots produced by [Moderna and Pfizer-BioNTech](#) improve antibody protection initially, it generally doesn’t last.”

“Since January, Bourla has been saying that U.S. adults will probably all need annual booster shots, and senior FDA [U.S. Food and Drug Administration] officials have indicated since April that they agree. ...”

“The company’s power worries some vaccinologists, who see its growing influence in a realm of medical decision-making traditionally led by independent experts. ...”

“When President Biden in September 2021 offered boosters to Americans — not long after [Pfizer CEO Albert] Bourla had recommended them — [Dr. Paul Offit](#), director of the Vaccine Education Center at Children’s Hospital of Philadelphia ... wondered, ‘Where’s the evidence you are at risk of serious disease when confronted with [COVID](#) if you are vaccinated and under 50?’”

“Policies on booster recommendations for different groups are complex and shifting, Offit said, but the CDC [Centers for Disease Control and Prevention], rather than Bourla and Pfizer, should be making them.”

“‘We’re being pushed along,’ he said. ‘The pharmaceutical companies are acting like [public health agencies](#).’”

The fact that a vaccine-pusher like Offit — infamous for claiming a [baby can safely tolerate 10,000 vaccines](#) at once — is questioning and pushing back against Pfizer’s influence over health policy reveals just how brazen, unethical and potentially dangerous that is.

Massive profits made from useless products

According to Allen, [Pfizer’s revenue in 2021 was \\$81.3 billion](#) — approximately double that of 2020 — and the [COVID shot accounted for \\$36.78 billion](#) of that.

For comparison, Lipitor, Pfizer’s previous [top-selling statin](#), generates roughly \$2 billion a year, while their strep vaccine, [Prevnar 13](#) rakes in \$6 billion a year.

Its mRNA gene transfer injection against COVID now dominates 70% of the U.S. and European markets, and Paxlovid, Pfizer's COVID drug, has become a standard treatment choice in hospitals. This, despite researchers finding Paxlovid (molnupiravir) causes severe rebound and [supercharges mutations](#). In a rational scenario, that finding would have put a stop to its use, but no.

In an official health advisory to the public, issued May 24, the CDC first warns that Paxlovid is associated with “recurrence of COVID-19 or ‘[COVID-19 rebound](#),’” and then in the very next sentence stresses in bold print a narrative supporting its use and enriching Pfizer with instructions saying:

“Paxlovid continues to be recommended for early-stage treatment of mild to moderate COVID-19 among persons at high risk for progression to severe disease.”

Allen also notes that, during an investor call, a Pfizer official highlighted reports of Paxlovid's failure, but spun it into [“good news” for investors](#), as patients may require multiple courses!

Obviously, the objective has long ago shifted from helping humans to raping them for as much profit as possible.

Similarly, while [Pfizer's COVID jab](#) clearly doesn't prevent infection or spread, and Americans are rejecting the shots in growing numbers — [82.2 million doses had expired](#) and were chucked in the trash as of mid-May — the U.S. government still went ahead and ordered another 105 million doses at the end of June.

These are intended for a [fall booster campaign](#), at a [cost to taxpayers of \\$3.2 billion](#). The U.S. is actually paying about 50% more for each of these new jab boosters this time around — \$30.47 per dose compared to \$19.50 per dose paid for the first 100 million doses.

The U.S. government has also promised to purchase another 20 million courses of [Paxlovid](#), at an eye-watering cost of \$530 per five-day course.

Basically, Pfizer is being financially rewarded for producing products that are useless at best and dangerous at worst, and we're all paying for it. In case you're curious, that is another \$10.6 billion transferred from U.S. taxpayers to Pfizer.

Future boosters won't undergo human clinical trials

After you likely thought it couldn't ever get any worse, KHN also touches on, but doesn't delve into, the fact that Pfizer suggested they skip human trials as they move forward with jabs that are reformulated for newer variants.

If this strikes you as crazy, you'd be right. It's sheer madness, but the [FDA](#) — a captured agency — has already surreptitiously agreed to this egregious miscarriage of science. This is criminal insanity!

How this wicked scheme, known as the “[Future Framework](#),” was [adopted by the FDA](#) without a formal vote is explained by Toby Rogers, Ph.D. — a political economist whose research focus is on regulatory capture and [Big Pharma](#) corruption — in the video below.

He also explained it in a June 29 [Substack article](#):

“Yesterday [June 28], the FDA’s Vaccines and Related Biological Products Advisory Committee [VRBPAC] approved a bivalent COVID-19 shot with the Wuhan strain and the Omicron variant. ... Wait, hold up, I thought the FDA was voting on the Future Framework yesterday?”

“The policy question was whether reformulated COVID-19 shots would be treated as new molecular entities (which they are) in which case they should be subject to formal review or whether reformulated shots would be treated as ‘biologically similar’ to existing COVID-19 shots and be allowed to skip clinical trials altogether.”

“Apparently the FDA did not have the votes to just pass this as a policy question. If you ask anyone whether reformulated mRNA represents a new molecular entity, well of course it is, so that would require formal regulatory review.”

“What the FDA did instead was to smuggle the policy question in disguised as a vote about reformulated ‘boosters’ for the fall.”

“In essence, the FDA just started doing the Future Framework (picking variants willy nilly, skipping clinical trials) and essentially dared the committee members to turn down a booster dose — knowing that all of the VRBPAC members are hand-picked because they’ve never met a vaccine they did not like.”

“So of course only two people on the committee had the courage to turn down a booster dose — even though it was based on this preposterous process (that was never formally adopted) where there was literally no data at all. ...”

“By stealth, the FDA replaced a system based on evidence with a system based entirely on belief.”

Countries held to ransom

In 2021, secret details of Pfizer’s contracts came to light, showing they are essentially [holding countries hostage](#) to non-negotiable demands for payment in full AND freedom from liability.

In late February 2021, The Bureau of Investigative Journalism reported that Pfizer was [demanding countries put up sovereign assets](#) as collateral for expected vaccine injury lawsuits resulting from its COVID-19 jab.

Several countries, including Brazil, Chile, Colombia, the Dominican Republic and Peru, agreed to this demand, putting up bank reserves, military bases and embassy buildings as collateral.

In short, these governments are guaranteeing Pfizer will be compensated for any expenses resulting from injury lawsuits against it, so the company won't lose a dime if its COVID shot injures people.

Shockingly, these terms are binding even if those injuries are the result of negligent company practices, fraud or malice!

In October of that same year, [Public Citizen published](#) the secret [contracts between Pfizer](#) and Albania, Brazil, Colombia, Chile, Dominican Republic, the European Commission, Peru, the U.S. and the U.K., further revealing the extent to which these countries handed power over to Pfizer.

In almost all scenarios, Pfizer's interests come first.

For example, government purchasers must acknowledge that the effectiveness and safety of the shots are completely unknown, all while indemnifying Pfizer against any and all financial liability.

This is the ultimate corporate maleficence, using their leverage to force the kill shot down these countries' throats and avoiding any personal responsibility for damages.

Even if Pfizer eventually is convicted of fraud in the U.S. and loses all its liability protection from the COVID jabs because of it, that judgment would not impact these foreign contracts. These countries sold their souls to Pfizer and have absolutely no recourse but to pay even if the shots kill everyone.

The contracts for at least four countries also secure Pfizer's intellectual property rights even if the company is found to have stolen the intellectual property (IP) rights of others. In such a case, the government purchaser becomes the liable party.

As explained by Public Citizen:

"For example, if another vaccine maker sued Pfizer for patent infringement in Colombia, the contract requires the Colombian government to foot the bill. Pfizer also explicitly says that it does not guarantee that its product does not violate third-party IP, or that it needs additional licenses."

"Pfizer takes no responsibility in these contracts for its potential infringement of intellectual property. In a sense, Pfizer has secured an IP waiver for itself. But internationally, Pfizer is fighting similar efforts to waive IP barriers for all manufacturers."

Equally shocking is that countries are forced to follow through on their vaccine orders even if other drugs or treatments emerge that can prevent, treat or cure COVID-19.

Is it any wonder, then, that governments around the world have suppressed the use of safe and effective outpatient drugs like hydroxychloroquine and ivermectin?

If these drugs were allowed to be used and could be proven to work, the COVID injections would be completely unnecessary and their emergency use authorization would disappear, yet governments are on the hook for hundreds of millions of doses.

Pfizer has 'habitual offender' track record

The fact that Pfizer has behaved like a criminal who works out a cover story for a planned murder before committing it is not surprising, considering its history. Pfizer has been sued in multiple venues over unethical behavior, including unethical drug testing and illegal marketing practices.

In his 2010 paper, "Tough on Crime? Pfizer and the CIHR," Robert G. Evans, Ph.D., emeritus professor at Vancouver School of Economics, described Pfizer as "a 'habitual offender,' persistently engaging in illegal and corrupt marketing practices, bribing physicians and suppressing adverse trial results."

Between 2002 and 2010 alone, Pfizer and its subsidiaries were fined \$3 billion in criminal convictions, civil penalties and jury awards. They are recurrent criminal felons. None of these convictions has deterred their nefarious behavior.

In 2011, Pfizer agreed to pay another \$14.5 million to settle federal charges of illegal marketing, and in 2014 they settled federal charges relating to improper marketing of the kidney transplant drug Rapamune to the tune of \$35 million, as well as \$75 million to settle charges relating to its testing of a new broad-spectrum antibiotic on critically ill Nigerian children.

As reported by the Independent at the time, Pfizer sent a team of doctors into Nigeria during a meningitis epidemic.

For two weeks, the team set up right next to a medical station run by Doctors Without Borders and began dispensing the experimental drug, Trovan. Of the 200 children picked, half got the experimental drug and the other half got the already licensed antibiotic Rocephin.

Eleven of the children treated by the Pfizer team died, and many others suffered side effects such as brain damage and organ failure. Pfizer denied wrongdoing. According to the company, only five of the children given Trovan died, compared to six who received Rocephin, so their drug was not to blame.

The problem was they never told the parents that their children were being given an experimental drug. What's more, while Pfizer produced a permission letter from a Nigerian ethics committee, the letter turned out to have been backdated.

The ethics committee itself wasn't set up until a year after the trial had already taken place. [Pfizer's rap sheet](#) also includes bribery, environmental violations, labor and worker safety violations and more.

Wolves in sheep's clothing

Now, despite Pfizer being one of the least ethical drug companies, we're told to trust them with our very lives, and the lives of our precious children.

They're going to put out booster shots this fall that have undergone no testing whatsoever, and we're to simply throw caution to the wind because Pfizer — which has no liability whatsoever — says so.

In 2014, Pfizer faced a surge of lawsuits that accused it of hiding known side effects of its [ant cholesterol drug Lipitor](#). They got off scot-free that time, as a federal judge dismissed [thousands of cases](#) alleging the [drug caused Type 2 diabetes](#). But at least they had liability and could be sued.

When it comes to the COVID jabs, injured patients and family members of those killed by it won't even have the ability to sue for damages, as governments around the world have indemnified them completely, and it looks as though they might not even be liable even if they're found guilty of fraud.

But we will have to see what the courts rule on that one. Still, that any nation would agree to a contract like that is just mindboggling.

Meanwhile, mounting evidence shows the [COVID shots destroy immune function](#) over time, and [Pfizer's own trial data](#) reveal deaths and serious adverse events numbering in the tens of thousands.

It's hard to tell who's more deserving of punishment — Pfizer or the equally captured federal agencies, the FDA and the CDC, that go along with them and do nothing to protect the lives of the youngest members of our society.

Clearly, it's up to us to protect ourselves and our loved ones, because wolves in sheep's clothing are ruling the roost — they're making all the decisions, and captured agencies are simply doing their bidding.

**Blinded by Science! (Science news update: 21 July 2022)
CDC and FDA claim that the effects of the COVID mRNA vax on
reproductive health are rare. They lied.**

Robert W Malone MD, MS

The effect of BNT162b2 SARS-CoV-2 mRNA vaccine on menstrual cycle symptoms in healthy women.

Internist J Gynaecol Obstet, 2022 Jul 20. doi: 10.1002/ijgo.14356. Online ahead of print.

[The Full Article PDF here](#)

Abstract

Objective: To investigate the impact of the SARS-CoV-2 mRNA BNT162b2 vaccine on women's menstrual cycle.

Methods: In this questionnaire-based cross-sectional study, we assessed menstrual pattern and changes of women who completed the SARS-CoV-2 mRNA BNT162b2 vaccine three months before and after receiving the vaccine. Included were women aged 18-50 without known gynecological comorbidities who regularly monitor their menstruation through electronic calendars. All participants completed a detailed questionnaire on their menstrual symptoms including information on any irregular bleeding. To minimize bias, each woman served as a self-control before and after vaccination. Primary outcome was rate of irregular bleeding following vaccination and secondary outcome was presence of any menstrual change, including irregular bleeding, mood changes or dysmenorrhea following the vaccine.

Results: A total of 219 women met the inclusion criteria. Of them, 23.3% (n=51) experienced irregular bleeding following the vaccine. Almost 40% (n=83) of study participants reported any menstrual change following vaccination. Parity was positively associated with irregular bleeding with 50% (n=26) of those suffering from irregular bleeding being multiparous as compared to only 31.5% (n=53) of women with no irregular bleeding (nulliparous 46% vs 60%, multiparous 50% vs 31%, rest 4% vs 8%, p=0.049). The presence of medical comorbidities was also significantly higher among patients who experienced irregular bleeding (20.0% vs 6.0%, p=0.003).

Conclusion: Our study shows relatively high rates of irregular bleeding and menstrual changes after receiving the SARS-CoV-2 mRNA BNT162b2 vaccine. Further research is needed to confirm our findings and to better characterize the magnitude of change and any possible long term implications.

Results from the Full Article:

All participants completed the two-dose series of the BNT161b2 mRNA vaccine with a mean interval of 22.1±5.1 days between doses. Distribution of baseline menstrual characteristics is shown in Table 2.

The average menstrual cycle length before the vaccine was 29.4 ± 7.6 days with duration of menses of 5.0 ± 1.3 days.

Of the 219 women who participated in the study, 23.3 % (n=51) experienced irregular bleeding following the vaccine. Of them, 39.2% (n=20) and 60.8% (n=31) reported irregular bleeding after the first and second dose of the SARS-CoV-2 BNT162b2 mRNA vaccine, respectively.

Of the 51 women who experienced irregular bleeding, 66.7% (n=34) reported irregular bleeding that preceded their estimated menstrual date (mean 9.9 ± 3.0 days) and 33.3% (n=17) reported a delay in their expected menstrual date (mean 12.3 ± 6.3 days). Irregular bleeding was reported as light in its severity in 47% (n=24), moderate in 21.6% (n=11) and heavy in 31.4% (n=16). Among those who reported irregular bleeding, 31.4 % (n=16) reported persisted irregular bleeding during the three-month period following vaccination, whereas 68.6% (n=35) reported a transient change which did not continue throughout the study period. Thirty-seven percent (n=83) of study participants reported any menstrual change (including irregular bleeding, mood changes or dysmenorrhea) following vaccination.

Nearly 68% (n=55) of study participants reported dysmenorrhea following vaccination. Amongst them, 47.3% (n=26) reported new-onset dysmenorrhea or increase in the severity of pre-existing dysmenorrhea.

Other menstrual symptoms were reported by 55.5% (n=45) of study participants after receiving the vaccine, including: abdominal pain (n=24); pelvic pain (n=11); appearance of new acne (n=11); breast tenderness (n=4); hot flushes (n=1).

Mood changes associated with menstruation after the vaccine (that were not reported before the vaccine) were reported by 9.6% (n=21) of women.

[Covid-19 vaccination BNT162b2 temporarily impairs semen concentration and total motile count among semen donors](#)

Andrology, 17 June 2022

In a retrospective, longitudinal, multicenter study published in *Andrology*, the effects of the COVID-19 BNT162b2 vaccine on semen parameters were assessed in 37 semen donors at different time points before and after vaccination. A selective decrease in sperm concentration and total motile count was reported 75–125 days after vaccination ($P = 0.01$ and $P = 0.007$, respectively) compared with pre-vaccination levels. Normal levels of these parameters were recovered ≥ 145 days post-vaccination.

(My note: This issue is critical, as sperm counts in “[western “countries have decreased 52% from 1973 to 2011](#)”).

Who is Robert Malone is a reader-supported publication. To receive new posts and support my work, consider becoming a free or paid subscriber.

[Subscribe now](#)

Menstrual cycle disturbances after COVID-19 vaccination

Women's Health (Lond) 2022 Jan DOI: [10.1177/17455057221109375](https://doi.org/10.1177/17455057221109375)

Abstract

Introduction: After COVID-19 vaccination, women of reproductive age reported changes in their menstrual cycle.

Materials and methods: A retrospective study was carried out after a survey on social networks that included women aged 18-41 years with normal cycles according to International Federation of Gynecology and Obstetrics and who were vaccinated (complete schedule for two doses, except J&J/Janssen or incomplete with a single dose). Women with following conditions were excluded: pregnant or lactating women; history of diseases that cause menstrual irregularities or early menopause: anorexia, bulimia, polycystic ovary syndrome, hypothyroidism, obesity, or low weight; hysterectomized or oophorectomized patients; and high performance athletes.

Results: Overall, 950 women completed the survey between July and September 2021. In total, 408 women met the inclusion criteria, and 184 reported the following characteristics: frequency (normal 43.47%, infrequent 25%, and frequent 31.53%), regularity (regular 51.08%, irregular 42.93%, and absent/amenorrhea 5.97%), duration (normal 65.21%, prolonged 26.08%, absent/amenorrhea 8.69%), and volume (heavy 41.84%, light 20.65%, and absent/amenorrhea 6.52%).

Conclusions: SARS-CoV-2 infection and COVID-19 vaccination can influence the menstrual cycle and cause alterations.

Bad news for Paxlovid? Coronavirus can find multiple ways to evade COVID-19 drug

Lab studies identify resistance mutations in SARS-CoV-2's protease, and some circulating variants have them

29 JUNE 2022

A bevy of new lab studies shows the coronavirus can mutate in ways that make it less susceptible to the drug, by far the most widely used of the two oral antiviral drugs authorized to treat COVID-19 in the United States. Researchers have found some of those mutations in variants already circulating in infected people, raising fresh concerns that physicians could soon lose one of their best therapies for fighting COVID-19.

Taken together, the studies show that “when you put pressure on the virus it escapes,” says David Ho, a virologist at Columbia University who was among the

first to document drug resistance mutations in HIV some 3 decades ago. Ho was not involved with the new studies but is conducting similar work on SARS-CoV-2. Although the newly identified mutations have yet to become widespread, Ho and many other scientists think it's only a matter of time. "Given the amount of infections out there, it's going to come," Ho says.

The resistance studies come on the heels of other recent concerns about Paxlovid, which in the United States remains restricted to use in people with risk factors making them more likely to develop severe COVID-19. Confirming anecdotal reports widely reported by media, several studies have found a small percentage of infected people who receive the normal 5-day course initially feel better, only to have their symptoms rebound. And questions have grown about whether Paxlovid helps those who aren't at high risk of serious disease—Pfizer earlier this month [halted a large trial of the drug](#) in standard risk COVID-19 patients because it was failing to show statistically significant protection against death or hospitalization.

Pfizer Reports Additional Data on PAXLOVID™ Supporting Upcoming New Drug Application Submission to U.S. FDA

Tuesday, June 14, 2022 - 04:30pm

- *In the EPIC-SR study of PAXLOVID™ (nirmatrelvir [PF-07321332] tablets and ritonavir tablets), the novel primary endpoint of self-reported, sustained alleviation of all symptoms for four consecutive days was not met, as previously reported*
- *Data from standard-risk patients, both vaccinated and unvaccinated, while not all statistically significant, are supportive of efficacy data observed in EPIC-HR study and will be included in upcoming NDA submission to U.S. FDA for high-risk patients*
- *Pre-specified secondary endpoint resulted in a nominally significant 62% decrease in COVID-19-related medical visits per day across all patients, relative to placebo*
- *In a sub-group analysis, non-significant 57% reduction in hospitalizations and death observed in PAXLOVID-treated vaccinated patients with at least one risk factor for severe COVID-19*
- *Pfizer to cease enrollment into the EPIC-SR trial due to low rate of hospitalization or death in the standard-risk population; will continue to evaluate treatment in populations with high unmet need.*

ERGO: Paxlovid trial stopped for lack of efficacy in standard risk patients. For the POTUS, that means the use of Paxlovid is probably unwarranted.

The data was in: Nov 2020. The Cochrane Database Syst Rev - the gold standard of meta-analysis was and is clear.

None of this mask wearing was science based. What our public health service has done to us, our children is obscene. There needs to be accountability.

Physical interventions to interrupt or reduce the spread of respiratory viruses

Meta-Analysis: Cochrane Database Syst Rev

.020 Nov 20;11(11):CD006207. doi: 10.1002/14651858.CD006207.pub5.

Authors' conclusions: The high risk of bias in the trials, variation in outcome measurement, and relatively low compliance with the interventions during the studies hamper drawing firm conclusions and generalizing the findings to the current COVID-19 pandemic. There is uncertainty about the effects of face masks. The low-moderate certainty of the evidence means our confidence in the effect estimate is limited, and that the true effect may be different from the observed estimate of the effect. The pooled results of randomized trials did not show a clear reduction in respiratory viral infection with the use of medical/surgical masks during seasonal influenza. There were no clear differences between the use of medical/surgical masks compared with N95/P2 respirators in healthcare workers when used in routine care to reduce respiratory viral infection. Hand hygiene is likely to modestly reduce the burden of respiratory illness. Harms associated with physical interventions were under-investigated. There is a need for large, well-designed RCTs addressing the effectiveness of many of these interventions in multiple settings and populations, especially in those most at risk of ARIs.

Here are conclusions regarding- Medical/surgical masks compared to no masks

We included nine trials (of which eight were cluster-RCTs) comparing medical/surgical masks versus no masks to prevent the spread of viral respiratory illness (two trials with healthcare workers and seven in the community). There is low certainty evidence from nine trials (3507 participants) that wearing a mask may make little or no difference to the outcome of influenza-like illness (ILI) compared to not wearing a mask (risk ratio (RR) 0.99, 95% confidence interval (CI) 0.82 to 1.18). There is moderate certainty evidence that wearing a mask probably makes little or no difference to the outcome of laboratory-confirmed influenza compared to not wearing a mask (RR 0.91, 95% CI 0.66 to 1.26; 6 trials; 3005 participants). Harms were rarely measured and poorly reported. Two studies during COVID-19 plan to recruit a total of 72,000 people. One evaluates medical/surgical masks (N = 6000) (published *Annals of Internal Medicine*, 18 Nov 2020), and one evaluates cloth masks (N = 66,000).

The data and randomized clinical trials are extensive. Please read the full conclusions in the link to the PDF below. My literature review conducted today turned up no new studies that change the Cochrane meta-analysis conclusions.

[Full Text Article](#)

One can only conclude that we have a major problem with group think at the CDC. There are no real randomized clinical trials or data to support the use of surgical or cloth masks. How come the CDC did not know this in 2020? How come they do not know this now?

What have “we” done to our children?

You think this is over?

Why is the Headstart STILL masking our toddlers and children?

Why is Los Angeles putting an indoor mask policy back in place?

Why does the CDC still want face masks worn in areas of COVID high incidence?

The CDC lists 35% of the US population in a high incidence area.

Health experts are quitting the NIH & CDC in droves because they're embarrassed by 'bad science' - including vaccinating children under 5 to 'make their advice palatable to the White House,' drs claim

No, they are not embarrassed by the Crimes Against Humanity junk science, they are acutely cognizant that if they do not quit, then they may one day be liable for premeditated manslaughter, or worse.

From the [Daily Mail](#):

- The NIH and CDC are reportedly facing staffing shortages as low morale drives away employees
- Decisions like the closure of schools and then requiring face masks once they reopened led to many questioning leadership
- Lately, the authorization of COVID-19 vaccines for children four years old or younger has confused some in America's top medical agencies
- Bari Weiss' 'Common Sense' Substack reports that data from both Pfizer and Moderna's clinical trials for jabs in under-5s show limited effectiveness

PSYOP-19 is a depopulation and control program.

The DEATHVAX™ is a slow kill bioweapon.

The MK Ultra masking and lockdowns are slower kill components of this technocratic eugenics power grab en route to the 4th Industrial Posthuman Revolution.

CDC failed to balance the risks of COVID with other risks that come from closing schools,' an anonymous CDC scientist told Common Sense.

'Learning loss, mental health exacerbations were obvious early on and those worsened as the guidance insisted on keeping schools virtual. CDC guidance worsened racial equity for generations to come. It failed this generation of children.'

A mentally damaged, worn out and mass formation hypochondria-spellbound populace has a far greater propensity for uptake of the DEATHVAX™ slow kill bioweapon injection.

Of course, if the natural instinct to not trust the scientism and subject oneself to the injection were to express itself, then the virtue signal “protecting others” ploy has too been exceedingly effective at getting the experimental gene therapy subjects to participate in their very own ritualistic slow suicide.

But there is hope for the future:

[Marty Makary MD, MPH @MartyMakary](#)

[There's a reason why only 2% of children under 5 have received the Covid vaccine, after nearly a month of the CDC pushing it hard.](#)
[July 15th 2022](#)

And now the staff working at the captured FDA and CDC are not only quitting, but [speaking out](#):

“It’s like a horror movie I’m being forced to watch and I can’t close my eyes,” one senior FDA official lamented. “People are getting bad advice and we can’t say anything.”

The CDC has experienced a similar exodus. *“There’s been a large amount of turnover. Morale is low,”* one high level official at the CDC told us. *“Things have become so political, so what are we there for?”* Another CDC scientist told us: *“I used to be proud to tell people I work at the CDC. Now I’m embarrassed.”*

Culpable is more like it.

But what drives these cowards and criminals to hang around these One World Government and CIA-handled agencies where their decisions and *“rulings”* directly result in all-cause mortality surges and seemingly innumerable adverse events you might ask?

An official at the FDA put it this way: *“I can’t tell you how many people at the FDA have told me, ‘I don’t like any of this, but I just need to make it to my retirement.’”*
Aiding and abetting the democide, or collecting a pension?

Decisions, decisions...

Horror movie indeed. Do NOT comply.

Martial Law alert: Alex Jones exposes HR 4350 amendment that will give Joe Biden dictatorial powers

07/19/2022 / By Belle Carter

During the July 17 emergency transmission of “InfoWars,” Alex Jones exposed that amendment to HR 4350, or the National Defense Authorization Act (NDAA),

will [let President Joe Biden become a dictator](#) who can launch land, sea and air operations against the American people.

Jones laid out the “[hands-down most powerful and horrible information](#)” his team has ever covered in 28 years. *“And if they are able to execute it, it is 1,000 times worse than anything we’ve ever covered. It is HR 4350, in which Biden [or] whoever else the president is will be the dictator,”* he said.



He noted that the Democrat leadership has the votes in the House and Senate. And when turned into law, HR 4350 will allow the president to [use the military for domestic operations](#), which Jones described as unbelievably illegal.

“It says the president will have the sole power over the military domestically and Congress will have no oversight. It also says in section 529A, this is absolutely the key, [countering extremism in the armed forces](#) – a purge of the military – of anybody that supports populism or America,” Jones commented while reading the bill’s amendment printout.

“The big takeaway is that there will be no congressional oversight of what the military does. Anything that violates our rights or basic freedoms or the 10th Amendment is null and void.”

The said legislation has been added to the new spending bill last week by Representative Adam B. Schiff, chairman of the House Permanent Select Committee on Intelligence. The amendment is set to be added to the act, which the House plans to take up this week. (Related: [No longer a conspiracy theory: Biden announces US involvement in realigning New World Order.](#))

"This un-American amendment will fundamentally and irreparably erode Congress' constitutional oversight responsibility," said New York Representative Elise Stefanik, a member of the Armed Services Committee and chairwoman of the House Republican Conference.

She added that House Democrats led by Schiff are attempting to cover up for the national security crises of the weakest commander-in-chief in U.S. history.

"Schiff got no attention until over the weekend. The Democratic Party controls the House and Senate to say no oversight over the U.S. military and domestic operations. But more importantly, only the president is in charge of the military. So that's martial law, that is dictatorial powers right there," Jones stated.

Jones: The New World Order has a Deeper Agenda

Jones reminded his audience of what happened 600 years ago with Henry IV, who orchestrated false flags in England so he could go to war with France. He also mentioned that what is happening now could be a repeat of Hitler's acts in the Reichstag during World War II.

He said that this is domestically against the American people with the backdrop of the worldwide collapse, inflation and a doddering president.

The Democrats will purge the military and defund the cops, Jones said. They will have the mainstream media to back them up, as well as the courts, House, Senate and the presidency through fraud.

"And they're not going to let us take the country back from them without staging massive false flags as the pretext for this to happen. And I believe the main false flag will be the assassination of Biden, which I'm totally against happening. And they've got Governor Gavin Newsom ready to come in," he further exposed.

"Biden gets assassinated or he dies in his sleep. So a savior comes in, someone that will be given dictatorial power handed by Congress."

Jones went on to say that this could be the "end of America." And this is not just in the U.S. as governments worldwide are also collapsing and food is basically non-existent in many countries.

"I said three years ago when the United Nation came out and said there's food shortages, and [I said] look out they've been running their operation. They've done that now," he said.

Watch this emergency transmission of "InfoWars" as Alex Jones exposed the House bill that will make Joe Biden a military dictator. This video is from the InfoWars channel on Brighteon.com.

More related stories:

[Alex Jones: New World Order's main agenda is clearly DEPOPULATION.](#)

[A NEW "MEDICAL HITLER" – Biden declares himself medical DICTATOR, threatens to nullify states' rights and coerce the entire population into taking deadly vaccine jabs against their will.](#)

[Joe Biden pledges allegiance to the New World Order in 1992 article.](#)

[Militarization of America's health care infrastructure is rapidly accelerating in preparation for medical martial law.](#)

Scopolamine Found in Child Covid Vaccines

By Michael Baxter

July 21, 2022

The U.S. military has found the drug scopolamine in Covid-19 vaccines destined to reach the arms of children, sources in Gen. David H. Berger's office told Real Raw News.

Scopolamine is known by several names, most notably hyoscine, burandanga, "Devil's Breath," and "the Zombie Drug." Derived from nightshade plants, it gained notoriety in Columbia where the criminal element uses it to drug naïve, careless tourists. On the internet stories abound of bar-hopping tourists chatting up local ladies, passing out, and waking up 3 days later—only to find they were robbed, and their bank accounts drained. Some never regain consciousness.

The drug, soluble, odorless, and tasteless, is said to deprive a person of free-will—zombify them. So potent is the effect that scopolamine victims have aided their attackers before falling unconscious. They willingly surrender their wallets, credit cards and pin codes, and have even helped assailants empty their apartments or hotel rooms of valuable items.

The drug's potency didn't escape the attention of American intelligence agencies: the CIA reportedly adds scopolamine to various "truth serum" formulations.

It's incomprehensibly frightening to believe pharmaceutical manufacturers would include this mixture in vaccines tailored for especially young children, but the military claims it's true.

After the FDA gifted Pfizer and Moderna permission to inject kids, and mass vaccination sites for children began springing up in liberal strongholds, the U.S. military started surreptitiously infiltrating these locations to collect vials for chemical analysis. But it wasn't looking for scopolamine. In May, Real Raw News reported that White Hats found and destroyed a Moderna warehouse; vaccine ampules obtained from the warehouse had pesticides.

"Big Pharma has hundreds of warehouses discretely hidden across the country. Finding them all was impossible. When we found pyrethroids in vials at the one

spot, we knew it wasn't an isolated incident. They wanted to poison children. Now it's obvious the plot is deeper. I can't say how exactly we got the tainted vaccines—we found them in New York and California."

He said White Hats had confiscated a dozen Moderna vials at a mass child vaccination site in Massapequa, New York, and more from a similar spot in San Bernadino, California. The vials were shipped to White Hat allies at U.S. Army Medical Research. Fifty percent had appreciable amounts of scopolamine.

In San Bernadino, 25% of vaccines held significant quantities of the drug. *"This is horrible information,"* our source said. *"We really have no way of knowing how many kids have been injected with this shit."*

The White Hats, he said, fear that scopolamine, when given to young, impressionable, malleable kids, will either outright kill them or coerce them into obeying orders.

"We're not talking here of infants, right. But if a five-year-old is dosed and told by a pedophile to take off his or her clothes—you get the picture? It's possible thousands or tens or hundreds of thousands of kids may have been hit with this stuff. We don't yet know the scope," our source said.

I have just posted an article that unequivocally identified 5G wireless energy EMF/EMR as the true cause of the Covid virus. It is by Mark Steele, a UK expert in 5G weapons systems. Mark Steele's article more than confirms that Covid is an euphemism for 5G wireless energy radiation poisoning. Click on the title below:
[Fifth Generation \(5G\) Directed Energy Radiation Emissions In the Context of Contaminated Nanometal Covid-19 Vaccines with Graphite Ferrous Oxide Antennas](#)

World governments at Agenda 21 in 1992 at Rio di Janeiro, Brazil 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 is to bring you the truth.

Because I am not recognized as a trained scientist, I AM NOT CONSIDERED TO BE A CREDITABLE to prove my contention that Covid-19 was genetically engineered through the use of CRISPR-Cas9 "gene" engineering methods. I have done my homework and diligence on this premise. The growing data and various studies

provide more than just a circumstantial evidence (if not causal) that the spike protein as a vector was manipulated in an infinite number of ways to confuse the medical and scientific community. With the VAERS reporting system showing almost 30,000 deaths to the vaxxes is ample evidence to validate my original premise that this is not about a hoaxed virus but is about Genocide by State sanction! Never in the history of the pharmaceutical industry has there been such ignoring the death numbers caused by the “gene” therapy. The swine flu vaccine was suspended after 27 deaths were reported in the initial phase of vaccinating the American public. This is premeditated murder by the big pharma/health agencies/government!

It was Pfizer’s CEO, Albert Borla who said that *“We cracked the Code of Life”*. He called his vaxx a *“Delivery System”* which in itself infers that it was delivering more than a vaccine. We know with total certainty that it is delivering a spike Protein that continues to replicate itself once injected into the human body. Dozens of articles shared in this series have confirmed human manipulation of what people were injected with is not therapeutic but toxic and potentially fatal! It is the use of CRISPR-Cas9 “gene” editing that can be used for good but can also be used for evil nefarious applications!

Our Government wants you DEAD!
This includes the CDC, NIH, NIAID,
and the World Health Organization!!
The “Depopulation” agenda began
Shortly after the 1968 publication of
“The Population Bomb”

by Dr. Paul Ehrlich and his wife Anne.

“Depopulation has been the World’s #1 Issue since 1968!” It underlies every global issue since. Whether it is climate change or the Global Reset, **“depopulation”** is at the core of everything!! It’s all about Sustainable Development!

Anyone who is a skeptic of my statement should Google search the term “Georgia Guidestones” and read their goal engraved in granite stone back in 1980. The stone structure calls for the eradication of 93% of the world’s population. This is both an unsigned confession as well as a “Projection” of what they planned to do in their global genocidal plan.

At 4:00 AM, Wednesday, July 6th, 2022, unknown parties blew up the Georgia Guidestones. The following day an excavator was brought in to demolish the standing portion. Investigative journalist Jim Stone stated surveillance video tape taken from two different directions showed no one approaching the monument before the detonation, and suggested that it may have been an inside job.



Blessings,

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