

Covid-19 Vaccinations – “A Malicious Act of Bioterrorism” – Dr. Zev Zelenko



Transcription of video below

Dr. Valdimir (Zev) Zelenko: I would take the words of Bill Gates seriously. Not because he's a prophet, but because he's a criminal. Because he's a bio-terrorist. Because he's a eugenicist. Because he's a sociopath. And he has a proven track record of being right. Well, that's not surprising if you're actually orchestrating it. So it's not a coincidence that an eradicated virus that only exists in the most secure neurology labs appears in an insecure Merc laboratory in Philadelphia. Four or five days after the sociopath Gates tells us we should expect a smallpox outbreak.

Sean, the SGT Report Host: Oh, my goodness, friends, that was Dr. Zev Zelenko. And this interview could literally save lives. Now, you may know people who have taken the vaccine, and it's too late to help them. But maybe those people have children. And maybe, just maybe if you get this information to those people, you might at least save the lives of their kids.

(Keto advertisement skipped.)

It's Sean from SgtReport.com and SgtReport.tv. I'm also very pleased to have back on the show the one the only Dr. Zev Zelenko. He is the inventor of the Z Stack. And guess what? They now have Z Stack gummies for kids. What does that mean? Well, it means you don't have to get sick when the "flu season" returns or COVID season. Well, we know what it really is. Dr. Zev Zelenko joins me now. How are you sir?

Dr. Zev Zenlenko: I'm doing great. Thank you. Thanks for having me.

Sean: Glad to have you back. I'll leave the link to Z Stack below if people want to check that out. It is quercetin which is the delivery system for zinc, vitamin C, and vitamin D the stuff you need to stay healthy. Dr. Z, I am now fully convinced that what we are up against as it pertains to this experiment rolled out by Pfizer, Moderna, FDA, CDC, NIH, this experiment people are taking part in willingly is really an IQ test. So if I may, we'll kick this off with a soundbite from a woman who, look, my heart goes out to

this person. I don't know who she is. I'm not making fun of her. But this really is an IQ test and people ought to know what they're participating in before they willingly participate in and run out and get the jab.

Sickly looking woman: So I got my third dose of the Pfizer booster vaccine on Sunday. And on Monday, by about 10:30 in the morning, I was having body aches and pains and chills and stuff. Pretty bad. I went home. Then that night, I could not stay awake. I was having fevers, still chills, still the body aches. Yesterday, body aches and pains. But by the afternoon I thought I was doing pretty good. Woke up this morning. I have sores all inside my mouth. The fever is back. I still have the body aches, massive migraine. As much as I love my shots. Side effects.

Sean: I'm coming back to you Dr. Zelenko. Boy, I don't think she has any idea that she's probably experiencing blood clotting. Her immune system is crashing. A lot of these people have no idea what they're participating in Dr. Z. Is it an IQ test? What do you make of what she just said?

Dr. Zev Zenlenko: I think it's more accurately an EQ test, an emotional intelligence test. And what I mean by that is the problem of the psychological warfare that has been waged on humanity, which is basically the use of prolonged fear together with isolation from other human beings and the people you love. What that does, is psychologically decompensates a person. They live in such an emotional horror, that they're they become prime targets to be manipulated by any false promise. So if I'm creating anxiety, and then I come to you and I said, dangle a vaccine in front of you and say, Well, this is going to help you. Most people take that vaccine, not for intellectual reasons at all. Their minds have completely shut down. They're acting purely on emotion. And they're gravitating towards taking that vaccine because it reduces their anxiety in the short term. So and that's why if you challenge them, they get belligerent even the most – I've had debates with incredibly intelligent people, but I see their minds are have shut down, and they become belligerent because my words are bringing them back into a state of anxiety that they definitely don't want to be in. So it's the shutdown of the intellect and the irrational behavior that's being fueled by their emotions. And that's really what's going on here. I think it's not really IQ raw, intellectual talent because I know plenty of people with a higher IQ who are fallen victim to this psychological warfare.

Sean: I think that's very fair. That's a very good point. And let me ask you this. Do we make a mistake by calling this thing, a vaccine? I just listened to a powerful interview, a roundtable between Dr. David E. Martin, Robert F. Kennedy, Jr. I believe Judy Mikovits was part of that and one other person. And David E. Martin said we have to stop calling this a vaccine, or we've already lost the battle. It is not a vaccine. It is an mRNA weapons delivery system. Is he right?

Dr. Zev Zenlenko: Yeah, I mean, listen, language is very important. You could call it a vaccine if you call it a vaccine that kills people. You see, the problem is we grew up thinking the word vaccine is associated with health, with goodness with preservation of life. So most of humanity associates the word vaccine with something good. And that's the marketing ploy here. There's

also a legal ploy where something's called a vaccine, pharmaceutical company that's making it cannot be sued, or it's difficult to sue them and they're indemnified. So **there's a legal benefit to being called a vaccine**. But for my purposes, if you want to say there are vaccines that save life, and there are vaccines that are weapons of eugenics and kill people, that's fine. I personally call it a *Poison Deathtrap*.

Sean: As do I, and here's what I want to do for that poor woman. Look, she's already taken the booster. So she's three shots in, there's nothing we can do to help her. But for those who are listening, and I do have a friend I reached out to several months ago, probably close to six, eight months ago at this point, warning this person to at least watch an educational video I sent her it was 14 minutes long saying please watch this before you take the VAX. They're very dangerous. I know she didn't watch the video and her reply to me via email was we're going to have to agree to disagree on this issue. Okay, So I want people like her and those who might be considering jabbing their own kids to understand what we know. Got a lot of sound bites I want to play here and Dr. Zelenko is an expert so he'll weigh in on the sound bites but here's what we know. And Dr. Z you tell me if I'm forgetting anything.

Number one, this Vax is experimental. It is mRNA technology the first-ever of its kind used on human beings. Pfizer, Moderna, J&J have indemnity from lawsuits. If you participate in this experiment and get injured or die, you cannot sue them, there will be no financial recovery for you. And finally, here, **the FDA wants until 2076 to fully release the Pfizer Vax data**. I don't know if you saw that line item. I can put it up on the screen here. What am I missing? That's what we know. And I have additional sound bites I want to play to demonstrate for people what this Vax is doing to the blood of those who take it Have I missed anything so far?

Dr. Zev Zenlenko: Yes, I don't know if the word "experimental" conveys the malignancy here the malfeasance of what actually is going on. So in October of 2020, the FDA made an internal presentation to its own scientists. And that presentation was not meant to be leaked, but it was, and we have it. And on slide 16, which I'll provide for you so you can include this in the video, on slide 16 of this presentation, the FDA lists all the side effects of these vaccines. Now, this is two months prior to the rollout. Yes, that's two months before this vaccine, these vaccines were released onto the public, the FDA presented this slide to its own scientists. Now, if you jump ahead to today, if you look through and go to the VAERS database, and just look what are the categories or side effects that actual human beings have experienced, that have taken the time to file a report, or the doctor has taken the time to file a report, **there's a 100% correlation between what actual human beings have experienced clinically, and what the FDA told his own scientists two months prior to the release of this bio-weapon**. So whenever you have 100% correlation, what that means is a term for that. **It's called premeditated, first degree, capital murder, crimes against humanity, and genocide!** This is *not* an experiment. This is **a malicious act of bioterrorism** and the complicity of our own government and agencies that are have been charged and put into power by us to protect us **who have whored themselves out to special interests** and stakeholders. They serve everyone except the American people.

Sean: Thank you for that you're 100% right. I soft-pedal it when I call this an experiment. It's so much more than an experiment. It is a plot to depopulate! And I think that segues nicely into this next soundbite. I want to play this. This is Karen Kingston on the Stew Peters show. Now Karen Kingston is a biotech analyst and an auditor of drug trials data. Very, very bright woman, she knows what she's doing. She knows how to analyze all the paperwork, mountains and mountains of documents that come out of these trials. And here's what she has to say about Pfizer and this particular product, that they're masquerading as a vaccine, listen to this.

Karen Kingston: The CEO is not oblivious as to what's going on with the phase three trials. They're very much aware of it. And this evidence shows that they conspired to commit aggravated assault and murder of children with a bioweapon. And maybe your audience or naysayers are saying you have no evidence this is a bioweapon. Yes, I do. Take a look at the biological license application that was submitted actually submitted in May of this year. And what it says under the product description verbatim is the mRNA Kornati (?) is a single-stranded mRNA encoding the full-length SARS code two spike glycoprotein derived from the Wuhan-HU1-11slip that was uploaded to Gendai by China. It is the bioweapon! That's what it is. And it's literally called the Wuhan-HU1-Spike protein. We know that's a bioweapon. If you still don't believe me take a look at the patent that was issued on January 10 of 2017. And it was issued to actually MIT and Harvard. But this all rolls up into the master cotton. (?) And who funded this? It says under state government support the invention was made with a government support order by the NIH. But if you go to section nine, what does it say, Stew? It says that this nanotechnology vaccine will deliver a molecule. In some embodiments, the small molecule is a toxin. In some embodiments, the toxin is from a chemical weapon or an agent of biowarfare. **The NIH patented a vaccine to deliver a bioweapon.**

Sean: Alright, sir, I'm coming back to you. I don't know if your blood is boiling like mine is but my understanding is within the last week, the NIH Director has called for the arrest of those spreading what he calls disinformation about this product.

Dr. Zelenko: The NIH, CDC and FDA are **the enemies of the people**. They should be held accountable. I'm a person who believes in the rule of law. Once they're convicted for crimes against humanity, whoever the leadership is, which is a whole list of people that should be targeted, they should be brought to trial by military tribunal, and if they're convicted of crimes against humanity, genocide, and mass murder, they should be executed. And that should be sent a message to future despots that we have a rule of law here, you will be held accountable. And we society, humanity will not tolerate the terror, the terrorizing of innocents, and a war against God-consciousness and an attempt to enslave masses of people. We will come after you.

Transcribed up to 15 minutes 21 seconds. I hope this inspires you to hear the entire discussion.

Australian Aboriginals Hunted by MILITARY, Children Vaccinated by FORCE Against Parental Wishes!



Stew Peters: Alright, so I just saw this video, which shook me to the core. I'm about to show it to you. And this is what I'm going to say right now before I show you this video. All of you Hollywood actors, musicians, so-called celebrities, NBA, NFL football players, all of you people of influence with big platforms, put down the Courvoisier (brand of cognac) for a second, okay?, take off the Prada shades, get out of the Ferrari, and take a look at this video. All of you lawmakers, politicians, so-called elected representatives. Take a look at this video.

I told you we're tracking what's going on in Australia right now. There are all kinds of reports all over the internet of Aboriginal people being chased down hunted like wild animals by their own government by their military. Kids are being chased by the military personnel, tackled to the ground, pinned down and forced jabbed with syringes, needles, with syringes filled with this bio-weapon that you people are calling a vaccine.

Okay, we're not having the vaccine debate here, whether or not this is a vaccine or a bio-weapon. But there is under no circumstances should it be tolerated by the United States of America, the only superpower left on the planet that this is happening to somebody in their country, an allied country, a Western country with a democracy that up until recently has been formed, very similar to our system here in the United States. Watch this video.

Covid Vaccine Causes Myocarditis



This article is from a paper by Drs. Peter McCullough, M.D., an American cardiologist, and Jessica Rose, Ph.D., a specialist in Orthopedics and Sports Medicine at Stanford Children's Health Specialty Services. It was published by Elsevier which is a Netherlands-based publishing company specializing in scientific, technical, and medical content. After the preliminary draft of their report was peer-reviewed and approved for publication, it was posted by the publisher on its website. **Shortly thereafter, the publisher, Elsevier, without giving a reason, suddenly withdrew the publication.** (Partial text from Dr. John G. Hartnett's web article on

<https://biblescienceforum.com/2021/11/08/follow-the-silence-paper-proving-covid-19-vaccines-cause-myocarditis-is-removed-from-publication-without-explanation/>)

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url="https://www.jamesjpn.net/wp-content/uploads/2021/11/COVID-Vaccine-Causes-Myocarditis.pdf"]

Click the down pointing arrow to read the next page. Or you can [download the PDF file](#) and print it out.

COVID-19 'Vaccine': A Bioweapon



Dr. Jane Ruby is a prominent health economist and new right political pundit. She currently works as a president at Ruby Health Consulting since 2018. It actually provides innovative solutions for Health Economics and outcomes research (HEOR). She calls Covid vaccines a bioweapon. I sure wouldn't bet my life that she's wrong.

For further references please see:

<https://principia-scientific.com/covid-19-vaccine-a-slow-motion-genocidal-bio-weapon/>

Dr. Anne McCloskey Exposes the ‘Great Reset’ Agenda Behind COVID Hoax



This is a powerful talk from Anne McCloskey, a medical doctor in Northern Ireland. I think her word is much more valuable and trustworthy than what some salaried “fact-checker” or politician has to say, don’t you? I hope you will read at least the text if you don’t have time to listen to the video.

The transcript is below the video.

Transcription

Across this island and across the world, there are millions of people who are awakened into the understanding that this current health crisis, this so-called pandemic, is a Trojan horse which has been used to introduce a new era for humanity. The “Great Reset”, the “Fourth Industrial Revolution”, “building back better” whatever catchy, chirpy name the bankers and billionaires are calling it, it’s not good for you and me, for the ordinary people. Relationships between individuals, families, communities, governments, and nations will change fundamentally. They’re coming for you, your family, your job, your savings, your home, your pension, your culture, your traditions, your freedom, your very way of life unless we unite to resist! We do not consent.

This is not a conspiracy theory, but the outworking of a scheme written by people who hate the human race. Agenda 21 has been implemented now and will come to pass unless we unite to resist! We do not consent!

Last year, a seasonal respiratory virus of high infectivity, but low pathogenicity passed across the world and sadly took with it people who were

very old, who were already very sick, and most of them were in the last months and years of their lives. There were younger people who died. May God have mercy on their souls and comfort their families and friends. But in terms of the overall cause for mortality, there was nothing to see. Seasonal viruses do this every year. They have done since time began and they will continue to do so no matter what humans do.

In 2020, in no country, in no country was there a significant increase in overall mortality compared to the past. Ireland in this pandemic actually increased her population by a couple of percent. If we take away the track and trace system calling for the first time in medical history a case someone who's perfectly well who has no symptoms, and which is going to cost the UK Government 37 billion pounds over two years – I don't even know what 37 billion pounds looks like what it would what it would buy, would it be two hospitals, would it be five hospitals would it be 1000 nurses job, I have no idea. But these PCR tests measure nothing. They are an illusion to create a crisis.

If we take away the fact that the WHO changed the rules changed the way in which we measure disease impact by saying that any death within 28 days of a positive PCR test was due to COVID, and even without a positive test if you had symptoms of shortness of breath, fever, the things that people die from every day, that was COVID too. If we take away the daily, no hourly, incessant misery porn on the legacy media dolefully recounting the figures and scrutinizing the anguish last hours of those who were taken, and the poor-faced politicians with crocodile tears pretend to care. If we take away the psychological abuse of populations across this planet, using applied behavioral psychology designed to get them in terror. If we take away the signage, the arrows, the one way systems, walk/don't walk, the yellow notices on every flat surface, the sanitization, the masks, all the paraphernalia of this neuro-linguistic program and mental abuse which tells us that we are the bio-hazards, we are a danger to our families and friends. If we take all this away, there is nothing to see. The emperor has no clothes.

But of course, there was something to see, wasn't there? Viruses don't make laws, governments do. But what we did see, what we saw was the removal of our most basic and inalienable rights, to work, to earn, to move, to associate, to kiss, to hug, to go to church, to bury our dead with dignity, to live our lives as we see fit. We saw the removal of a right to speak, to protest, to object to this tyranny. We saw censorship, character assassination, and banishment of scientists and professors who dared to offer an alternative narrative. We saw our children and young people locked up denied their education, the right to play outside, to live their precious young lives, however they and their parents saw fit. We've seen millions of the poorest and most marginalized people on the planet, pushed to starvation and death because of the economic fallout because poverty kills.

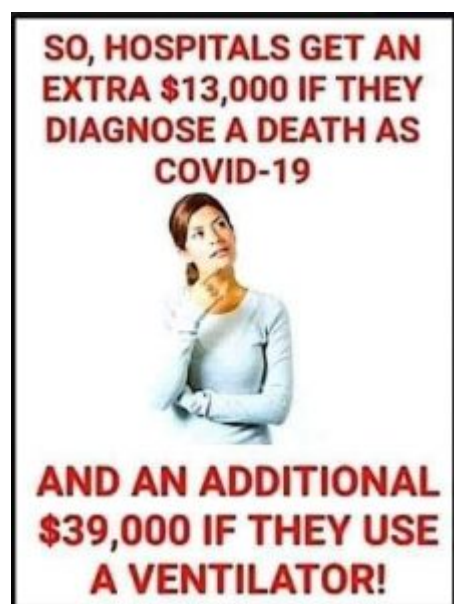
I've worked as a GP (General Practitioner) throughout this past year, and I've not seen people gasping for breath from COVID, but people utterly abandoned by their health system. People in despair from loneliness, from isolation, fear, people who haven't seen their families and loved ones for months, and whose lives are infinitely poorer as a result. I've seen delayed

cancer diagnoses, people having treatments canceled, willy nilly people dying waiting for elective procedures, people in pain who can't get help. Estimates vary, but it's now assumed that between 200,000 and 500,000 extra deaths will occur in the area covered by the NHS. And that's assuming that this lunacy of lockdowns stop, and a similar figure obviously adjusted for the population in the south of Ireland.

The cure is much, much worse than the disease. It's time to move on. This was not about health. It never was about health. It's smoke and mirrors. There are around 30 published papers internationally, showing that right across the globe lockdowns don't work. And if they do, why are we still locked up a year later? The health and economic fallout from this will cost millions of lives, and it will end the way that we live now, forever.

It's over. The line has been exposed. We must stand together. We do not consent.

The Sparticus Document: An Overview of the Covid Plandemic and the Sinister Motivation Behind It



This article is reposted from <https://biblescienceforum.com/2021/10/01/the-sparticus-document-a-summary-of-the-whole-plandemic/> It's an anonymously posted document by someone who calls themselves Spartacus. It is an excellent overview and summary of the Covid plandemic by people who seem to know what they are talking about. I normally don't post articles written by people whose credentials I cannot verify, but because Dr. John Gideon Hartnett vouches for it by posting it on his website, and because Dr. Hartnett is a respected academic and someone I know

personally, I think it's something of value that the public should know. I don't understand all the medical jargon in this article, but it's not necessary to understand it all to get the point of what the main message is.

Hello,

My name is Spartacus, and I've had enough.

We have been forced to watch America and the Free World spin into inexorable decline due to a biowarfare attack. We, along with countless others, have been victimized and gaslit by propaganda and psychological warfare operations being conducted by an unelected, unaccountable Elite against the American people and our allies.

Our mental and physical health have suffered immensely over the course of the past year and a half. We have felt the sting of isolation, lockdown, masking, quarantines, and other completely nonsensical acts of healthcare theater that have done absolutely nothing to protect the health or wellbeing of the public from the ongoing COVID-19 pandemic.

Now, we are watching the medical establishment inject literal poison into millions of our fellow Americans without so much as a fight.

We have been told that we will be fired and denied our livelihoods if we refuse to vaccinate. This was the last straw.

We have spent thousands of hours analyzing leaked footage from Wuhan, scientific papers from primary sources, as well as the paper trails left by the medical establishment.

What we have discovered would shock anyone to their core.

First, we will summarize our findings, and then, we will explain them in detail. References will be placed at the end.

Summary:

- COVID-19 is a blood and blood vessel disease. SARS-CoV-2 infects the lining of human blood vessels, causing them to leak into the lungs.
- Current treatment protocols (e.g. invasive ventilation) are actively harmful to patients, accelerating oxidative stress and causing severe VILI (ventilator-induced lung injuries). The continued use of ventilators in the absence of any proven medical benefit constitutes mass murder.
- Existing countermeasures are inadequate to slow the spread of what is an aerosolized and potentially wastewater-borne virus, and constitute a form of medical theater.
- Various non-vaccine interventions have been suppressed by both the media and the medical establishment in favor of vaccines and expensive patented drugs.
- The authorities have denied the usefulness of natural immunity against COVID-19, despite the fact that natural immunity confers protection

against all of the virus's proteins, and not just one.

- Vaccines will do more harm than good. The antigen that these vaccines are based on, SARS-CoV-2 Spike, is a toxic protein. SARS-CoV-2 may have ADE, or antibody-dependent enhancement; current antibodies may not neutralize future strains, but instead help them infect immune cells. Also, vaccinating during a pandemic with a leaky vaccine removes the evolutionary pressure for a virus to become less lethal.
- There is a vast and appalling criminal conspiracy that directly links both Anthony Fauci and Moderna to the Wuhan Institute of Virology.
- COVID-19 vaccine researchers are directly linked to scientists involved in brain-computer interface ("neural lace") tech, one of whom was indicted for taking grant money from China.
- Independent researchers have discovered mysterious nanoparticles inside the vaccines that are not supposed to be present.
- The entire pandemic is being used as an excuse for a vast political and economic transformation of Western society that will enrich the already rich and turn the rest of us into serfs and untouchables.

COVID-19 Pathophysiology and Treatments:

COVID-19 is not a viral pneumonia. It is a viral vascular endotheliitis and attacks the lining of blood vessels, particularly the small pulmonary alveolar capillaries, leading to endothelial cell activation and sloughing, coagulopathy, sepsis, pulmonary edema, and ARDS-like symptoms. This is a disease of the blood and blood vessels. The circulatory system. Any pneumonia that it causes is secondary to that.

In severe cases, this leads to sepsis, blood clots, and multiple organ failure, including hypoxic and inflammatory damage to various vital organs, such as the brain, heart, liver, pancreas, kidneys, and intestines.

Some of the most common laboratory findings in COVID-19 are elevated D-dimer, elevated prothrombin time, elevated C-reactive protein, neutrophilia, lymphopenia, hypocalcemia, and hyperferritinemia, essentially matching a profile of coagulopathy and immune system hyperactivation/immune cell exhaustion.

COVID-19 can present as almost anything, due to the wide tropism of SARS-CoV-2 for various tissues in the body's vital organs. While its most common initial presentation is respiratory illness and flu-like symptoms, it can present as brain inflammation, gastrointestinal disease, or even heart attack or pulmonary embolism.

COVID-19 is more severe in those with specific comorbidities, such as obesity, diabetes, and hypertension. This is because these conditions involve endothelial dysfunction, which renders the circulatory system more susceptible to infection and injury by this particular virus.

The vast majority of COVID-19 cases are mild and do not cause significant disease. In known cases, there is something known as the 80/20 rule, where 80% of cases are mild and 20% are severe or critical. However, this ratio is only correct for known cases, not all infections. The number of actual

infections is much, much higher. Consequently, the mortality and morbidity rate is lower. However, COVID-19 spreads very quickly, meaning that there are a significant number of severely-ill and critically-ill patients appearing in a short time frame.

In those who have critical COVID-19-induced sepsis, hypoxia, coagulopathy, and ARDS, the most common treatments are intubation, injected corticosteroids, and blood thinners. This is not the correct treatment for COVID-19. In severe hypoxia, cellular metabolic shifts cause ATP to break down into hypoxanthine, which, upon the reintroduction of oxygen, causes xanthine oxidase to produce tons of highly damaging radicals that attack tissue. This is called ischemia-reperfusion injury, and it's why the majority of people who go on a ventilator are dying. In the mitochondria, succinate buildup due to sepsis does the same exact thing; when oxygen is reintroduced, it makes superoxide radicals. Make no mistake, intubation will kill people who have COVID-19.

The end-stage of COVID-19 is severe lipid peroxidation, where fats in the body start to "rust" due to damage by oxidative stress. This drives autoimmunity. Oxidized lipids appear as foreign objects to the immune system, which recognizes and forms antibodies against OSEs, or oxidation-specific epitopes. Also, oxidized lipids feed directly into pattern recognition receptors, triggering even more inflammation and summoning even more cells of the innate immune system that release even more destructive enzymes. This is similar to the pathophysiology of Lupus.

COVID-19's pathology is dominated by extreme oxidative stress and neutrophil respiratory burst, to the point where hemoglobin becomes incapable of carrying oxygen due to heme iron being stripped out of heme by hypochlorous acid. No amount of supplemental oxygen can oxygenate blood that chemically refuses to bind O₂.

The breakdown of the pathology is as follows:

SARS-CoV-2 Spike binds to ACE2. Angiotensin Converting Enzyme 2 is an enzyme that is part of the renin-angiotensin-aldosterone system, or RAAS. The RAAS is a hormone control system that moderates fluid volume in the body and in the bloodstream (i.e. osmolarity) by controlling salt retention and excretion. This protein, ACE2, is ubiquitous in every part of the body that interfaces with the circulatory system, particularly in vascular endothelial cells and pericytes, brain astrocytes, renal tubules and podocytes, pancreatic islet cells, bile duct and intestinal epithelial cells, and the seminiferous ducts of the testis, all of which SARS-CoV-2 can infect, not just the lungs.

SARS-CoV-2 infects a cell as follows: SARS-CoV-2 Spike undergoes a conformational change where the S1 trimers flip up and extend, locking onto ACE2 bound to the surface of a cell. TMPRSS2, or transmembrane protease serine 2, comes along and cuts off the heads of the Spike, exposing the S2 stalk-shaped subunit inside. The remainder of the Spike undergoes a conformational change that causes it to unfold like an extension ladder, embedding itself in the cell membrane. Then, it folds back upon itself,

pulling the viral membrane and the cell membrane together. The two membranes fuse, with the virus's proteins migrating out onto the surface of the cell. The SARS-CoV-2 nucleocapsid enters the cell, disgorging its genetic material and beginning the viral replication process, hijacking the cell's own structures to produce more virus.

SARS-CoV-2 Spike proteins embedded in a cell can actually cause human cells to fuse together, forming syncytia/MGCs (multinuclear giant cells). They also have other pathogenic, harmful effects. SARS-CoV-2's viroporins, such as its Envelope protein, act as calcium ion channels, introducing calcium into infected cells. The virus suppresses the natural interferon response, resulting in delayed inflammation. SARS-CoV-2 N protein can also directly activate the NLRP3 inflammasome. Also, it suppresses the Nrf2 antioxidant pathway. The suppression of ACE2 by binding with Spike causes a buildup of bradykinin that would otherwise be broken down by ACE2.

This constant calcium influx into the cells results in (or is accompanied by) noticeable hypocalcemia, or low blood calcium, especially in people with Vitamin D deficiencies and pre-existing endothelial dysfunction. Bradykinin upregulates cAMP, cGMP, COX, and Phospholipase C activity. This results in prostaglandin release and vastly increased intracellular calcium signaling, which promotes highly aggressive ROS release and ATP depletion. NADPH oxidase releases superoxide into the extracellular space. Superoxide radicals react with nitric oxide to form peroxynitrite. Peroxynitrite reacts with the tetrahydrobiopterin cofactor needed by endothelial nitric oxide synthase, destroying it and "uncoupling" the enzymes, causing nitric oxide synthase to synthesize more superoxide instead. This proceeds in a positive feedback loop until nitric oxide bioavailability in the circulatory system is depleted.

Dissolved nitric oxide gas produced constantly by eNOS serves many important functions, but it is also antiviral against SARS-like coronaviruses, preventing the palmitoylation of the viral Spike protein and making it harder for it to bind to host receptors. The loss of NO allows the virus to begin replicating with impunity in the body. Those with endothelial dysfunction (i.e. hypertension, diabetes, obesity, old age, African-American race) have redox equilibrium issues to begin with, giving the virus an advantage.

Due to the extreme cytokine release triggered by these processes, the body summons a great deal of neutrophils and monocyte-derived alveolar macrophages to the lungs. Cells of the innate immune system are the first-line defenders against pathogens. They work by engulfing invaders and trying to attack them with enzymes that produce powerful oxidants, like SOD and MPO. Superoxide dismutase takes superoxide and makes hydrogen peroxide, and myeloperoxidase takes hydrogen peroxide and chlorine ions and makes hypochlorous acid, which is many, many times more reactive than sodium hypochlorite bleach.

Neutrophils have a nasty trick. They can also eject these enzymes into the extracellular space, where they will continuously spit out peroxide and bleach into the bloodstream. This is called neutrophil extracellular trap formation, or, when it becomes pathogenic and counterproductive, NETosis. In severe and critical COVID-19, there is actually rather severe NETosis.

Hypochlorous acid building up in the bloodstream begins to bleach the iron out of heme and compete for O₂ binding sites. Red blood cells lose the ability to transport oxygen, causing the sufferer to turn blue in the face. Unliganded iron, hydrogen peroxide, and superoxide in the bloodstream undergo the Haber- Weiss and Fenton reactions, producing extremely reactive hydroxyl radicals that violently strip electrons from surrounding fats and DNA, oxidizing them severely.

This condition is not unknown to medical science. The actual name for all of this is acute sepsis.

We know this is happening in COVID-19 because people who have died of the disease have noticeable ferroptosis signatures in their tissues, as well as various other oxidative stress markers such as nitrotyrosine, 4-HNE, and malondialdehyde.

When you intubate someone with this condition, you are setting off a free radical bomb by supplying the cells with O₂. It's a catch-22, because we need oxygen to make Adenosine Triphosphate (that is, to live), but O₂ is also the precursor of all these damaging radicals that lead to lipid peroxidation.

The correct treatment for severe COVID-19 related sepsis is non-invasive ventilation, steroids, and antioxidant infusions. Most of the drugs repurposed for COVID-19 that show any benefit whatsoever in rescuing critically-ill COVID-19 patients are antioxidants. N-acetylcysteine, melatonin, fluvoxamine, budesonide, famotidine, cimetidine, and ranitidine are all antioxidants. Indomethacin prevents iron- driven oxidation of arachidonic acid to isoprostanes. There are powerful antioxidants such as apocynin that have not even been tested on COVID-19 patients yet which could defang neutrophils, prevent lipid peroxidation, restore endothelial health, and restore oxygenation to the tissues.

Scientists who know anything about pulmonary neutrophilia, ARDS, and redox biology have known or surmised much of this since March 2020. In April 2020, Swiss scientists confirmed that COVID-19 was a vascular endotheliitis. By late 2020, experts had already concluded that COVID-19 causes a form of viral sepsis. They also know that sepsis can be effectively treated with antioxidants. None of this information is particularly new, and yet, for the most part, it has not been acted upon. Doctors continue to use damaging intubation techniques with high PEEP settings despite high lung compliance and poor oxygenation, killing an untold number of critically ill patients with medical malpractice.

Because of the way they are constructed, Randomized Control Trials will never show any benefit for any antiviral against COVID-19. Not Remdesivir, not Kaletra, not HCQ, and not Ivermectin. The reason for this is simple; for the patients that they have recruited for these studies, such as Oxford's ludicrous RECOVERY study, the intervention is too late to have any positive effect.

The clinical course of COVID-19 is such that by the time most people seek medical attention for hypoxia, their viral load has already tapered off to

almost nothing. If someone is about 10 days post-exposure and has already been symptomatic for five days, there is hardly any virus left in their bodies, only cellular damage and derangement that has initiated a hyperinflammatory response. It is from this group that the clinical trials for antivirals have recruited, pretty much exclusively.

In these trials, they give antivirals to severely ill patients who have no virus in their bodies, only a delayed hyperinflammatory response, and then absurdly claim that antivirals have no utility in treating or preventing COVID-19. These clinical trials do not recruit people who are pre-symptomatic. They do not test pre-exposure or post-exposure prophylaxis.

This is like using a defibrillator to shock only flatline, and then absurdly claiming that defibrillators have no medical utility whatsoever when the patients refuse to rise from the dead. The intervention is too late. These trials for antivirals show systematic, egregious selection bias. They are providing a treatment that is futile to the specific cohort they are enrolling.

India went against the instructions of the WHO and mandated the prophylactic usage of Ivermectin. They have almost completely eradicated COVID-19. The Indian Bar Association of Mumbai has brought criminal charges against WHO Chief Scientist Dr. Soumya Swaminathan for recommending against the use of Ivermectin.

Ivermectin is not "horse dewormer". Yes, it is sold in veterinary paste form as a dewormer for animals. It has also been available in pill form for humans for decades, as an antiparasitic drug.

The media have disingenuously claimed that because Ivermectin is an antiparasitic drug, it has no utility as an antiviral. This is incorrect. Ivermectin has utility as an antiviral. It blocks importin, preventing nuclear import, effectively inhibiting viral access to cell nuclei. Many drugs currently on the market have multiple modes of action. Ivermectin is one such drug. It is both antiparasitic and antiviral.

In Bangladesh, Ivermectin costs \$1.80 for an entire 5-day course. Remdesivir, which is toxic to the liver, costs \$3,120 for a 5-day course of the drug. Billions of dollars of utterly useless Remdesivir were sold to our governments on the taxpayer's dime, and it ended up being totally useless for treating hyperinflammatory COVID-19. The media has hardly even covered this at all.

The opposition to the use of generic Ivermectin is not based in science. It is purely financially and politically-motivated. An effective non-vaccine intervention would jeopardize the rushed FDA approval of patented vaccines and medicines for which the pharmaceutical industry stands to rake in billions upon billions of dollars in sales on an ongoing basis.

The majority of the public are scientifically illiterate and cannot grasp what any of this even means, thanks to a pathetic educational system that has miseducated them. You would be lucky to find 1 in 100 people who have even

the faintest clue what any of this actually means.

COVID-19 Transmission:

COVID-19 is airborne. The WHO carried water for China by claiming that the virus was only droplet-borne. Our own CDC absurdly claimed that it was mostly transmitted by fomite-to-face contact, which, given its rapid spread from Wuhan to the rest of the world, would have been physically impossible.

The ridiculous belief in fomite-to-face being a primary mode of transmission led to the use of surface disinfection protocols that wasted time, energy, productivity, and disinfectant.

The 6-foot guidelines are absolutely useless. The minimum safe distance to protect oneself from an aerosolized virus is to be 15+ feet away from an infected person, no closer. Realistically, no public transit is safe.

Surgical masks do not protect you from aerosols. The virus is too small and the filter media has too large of gaps to filter it out. They may catch respiratory droplets and keep the virus from being expelled by someone who is sick, but they do not filter a cloud of infectious aerosols if someone were to walk into said cloud.

The minimum level of protection against this virus is quite literally a P100 respirator, a PAPR/CAPR, or a 40mm NATO CBRN respirator, ideally paired with a full-body tyvek or tychem suit, gloves, and booties, with all the holes and gaps taped.

Live SARS-CoV-2 may potentially be detected in sewage outflows, and there may be oral-fecal transmission. During the SARS outbreak in 2003, in the Amoy Gardens incident, hundreds of people were infected by aerosolized fecal matter rising from floor drains in their apartments.

COVID-19 Vaccine Dangers:

The vaccines for COVID-19 are not sterilizing and do not prevent infection or transmission. They are “leaky” vaccines. This means they remove the evolutionary pressure on the virus to become less lethal. It also means that the vaccinated are perfect carriers. In other words, those who are vaccinated are a threat to the unvaccinated, not the other way around.

All of the COVID-19 vaccines currently in use have undergone minimal testing, with highly accelerated clinical trials. Though they appear to limit severe illness, the long-term safety profile of these vaccines remains unknown.

Some of these so-called “vaccines” utilize an untested new technology that has never been used in vaccines before. Traditional vaccines use weakened or killed virus to stimulate an immune response. The Moderna and Pfizer-BioNTech vaccines do not. They are purported to consist of an intramuscular shot containing a suspension of lipid nanoparticles filled with messenger RNA. The way they generate an immune response is by fusing with cells in a vaccine recipient’s shoulder, undergoing endocytosis, releasing their mRNA cargo into

those cells, and then utilizing the ribosomes in those cells to synthesize modified SARS-CoV-2 Spike proteins in-situ.

These modified Spike proteins then migrate to the surface of the cell, where they are anchored in place by a transmembrane domain. The adaptive immune system detects the non-human viral protein being expressed by these cells, and then forms antibodies against that protein. This is purported to confer protection against the virus, by training the adaptive immune system to recognize and produce antibodies against the Spike on the actual virus. The J&J and AstraZeneca vaccines do something similar, but use an adenovirus vector for genetic material delivery instead of a lipid nanoparticle. These vaccines were produced or validated with the aid of fetal cell lines HEK-293 and PER.C6, which people with certain religious convictions may object strongly to.

SARS-CoV-2 Spike is a highly pathogenic protein on its own. It is impossible to overstate the danger presented by introducing this protein into the human body.

It is claimed by vaccine manufacturers that the vaccine remains in cells in the shoulder, and that SARS-CoV-2 Spike produced and expressed by these cells from the vaccine's genetic material is harmless and inert, thanks to the insertion of prolines in the Spike sequence to stabilize it in the prefusion conformation, preventing the Spike from becoming active and fusing with other cells. However, a pharmacokinetic study from Japan showed that the lipid nanoparticles and mRNA from the Pfizer vaccine did not stay in the shoulder, and in fact bioaccumulated in many different organs, including the reproductive organs and adrenal glands, meaning that modified Spike is being expressed quite literally all over the place. These lipid nanoparticles may trigger anaphylaxis in an unlucky few, but far more concerning is the unregulated expression of Spike in various somatic cell lines far from the injection site and the unknown consequences of that.

Messenger RNA is normally consumed right after it is produced in the body, being translated into a protein by a ribosome. COVID-19 vaccine mRNA is produced outside the body, long before a ribosome translates it. In the meantime, it could accumulate damage if inadequately preserved. When a ribosome attempts to translate a damaged strand of mRNA, it can become stalled. When this happens, the ribosome becomes useless for translating proteins because it now has a piece of mRNA stuck in it, like a lace card in an old punch card reader. The whole thing has to be cleaned up and new ribosomes synthesized to replace it. In cells with low ribosome turnover, like nerve cells, this can lead to reduced protein synthesis, cytopathic effects, and neuropathies.

Certain proteins, including SARS-CoV-2 Spike, have proteolytic cleavage sites that are basically like little dotted lines that say "cut here", which attract a living organism's own proteases (essentially, molecular scissors) to cut them. There is a possibility that S1 may be proteolytically cleaved from S2, causing active S1 to float away into the bloodstream while leaving the S2 "stalk" embedded in the membrane of the cell that expressed the protein.

SARS-CoV-2 Spike has a Superantigenic region (SAg), which may promote extreme inflammation.

Anti-Spike antibodies were found in one study to function as autoantibodies and attack the body's own cells. Those who have been immunized with COVID-19 vaccines have developed blood clots, myocarditis, Guillain-Barre Syndrome, Bell's Palsy, and multiple sclerosis flares, indicating that the vaccine promotes autoimmune reactions against healthy tissue.

SARS-CoV-2 Spike does not only bind to ACE2. It was suspected to have regions that bind to basigin, integrins, neuropilin-1, and bacterial lipopolysaccharides as well. SARS-CoV-2 Spike, on its own, can potentially bind any of these things and act as a ligand for them, triggering unspecified and likely highly inflammatory cellular activity.

SARS-CoV-2 Spike contains an unusual PRRA insert that forms a furin cleavage site. Furin is a ubiquitous human protease, making this an ideal property for the Spike to have, giving it a high degree of cell tropism. No wild-type SARS-like coronaviruses related to SARS-CoV-2 possess this feature, making it highly suspicious, and perhaps a sign of human tampering.

SARS-CoV-2 Spike has a prion-like domain that enhances its infectiousness.

The Spike S1 RBD may bind to heparin-binding proteins and promote amyloid aggregation. In humans, this could lead to Parkinson's, Lewy Body Dementia, premature Alzheimer's, or various other neurodegenerative diseases. This is very concerning because SARS-CoV-2 S1 is capable of injuring and penetrating the blood-brain barrier and entering the brain. It is also capable of increasing the permeability of the blood-brain barrier to other molecules.

SARS-CoV-2, like other betacoronaviruses, may have Dengue-like ADE, or antibody-dependent enhancement of disease. For those who aren't aware, some viruses, including betacoronaviruses, have a feature called ADE. There is also something called Original Antigenic Sin, which is the observation that the body prefers to produce antibodies based on previously-encountered strains of a virus over newly-encountered ones.

In ADE, antibodies from a previous infection become non-neutralizing due to mutations in the virus's proteins. These non-neutralizing antibodies then act as trojan horses, allowing live, active virus to be pulled into macrophages through their Fc receptor pathways, allowing the virus to infect immune cells that it would not have been able to infect before. This has been known to happen with Dengue Fever; when someone gets sick with Dengue, recovers, and then contracts a different strain, they can get very, very ill.

If someone is vaccinated with mRNA based on the Spike from the initial Wuhan strain of SARS-CoV-2, and then they become infected with a future, mutated strain of the virus, they may become severely ill. In other words, it is possible for vaccines to sensitize someone to disease.

There is a precedent for this in recent history. Sanofi's Dengvaxia vaccine for Dengue failed because it caused immune sensitization in people whose

immune systems were Dengue-naive.

In mice immunized against SARS-CoV and challenged with the virus, a close relative of SARS-CoV-2, they developed immune sensitization, Th2 immunopathology, and eosinophil infiltration in their lungs.

We have been told that SARS-CoV-2 mRNA vaccines cannot be integrated into the human genome, because messenger RNA cannot be turned back into DNA. This is false. There are elements in human cells called LINE-1 retrotransposons, which can indeed integrate mRNA into a human genome by endogenous reverse transcription. Because the mRNA used in the vaccines is stabilized, it hangs around in cells longer, increasing the chances for this to happen. If the gene for SARS-CoV-2 Spike is integrated into a portion of the genome that is not silent and actually expresses a protein, it is possible that people who take this vaccine may continuously express SARS-CoV-2 Spike from their somatic cells for the rest of their lives.

By inoculating people with a vaccine that causes their bodies to produce Spike in-situ, they are being inoculated with a pathogenic protein. A toxin that may cause long-term inflammation, heart problems, and a raised risk of cancers. In the long-term, it may also potentially lead to premature neurodegenerative disease.

Absolutely nobody should be compelled to take this vaccine under any circumstances, and in actual fact, the vaccination campaign must be stopped immediately.

COVID-19 Criminal Conspiracy:

The vaccine and the virus were made by the same people.

In 2014, there was a moratorium on SARS gain-of-function research that lasted until 2017. This research was not halted. Instead, it was outsourced, with the federal grants being laundered through NGOs.

Ralph Baric is a virologist and SARS expert at UNC Chapel Hill in North Carolina. This is who Anthony Fauci was referring to when he insisted, before Congress, that if any gain-of-function research was being conducted, it was being conducted in North Carolina.

This was a lie. Anthony Fauci lied before Congress. A felony.

Ralph Baric and Shi Zhengli are colleagues and have co-written papers together. Ralph Baric mentored Shi Zhengli in his gain-of-function manipulation techniques, particularly serial passage, which results in a virus that appears as if it originated naturally. In other words, deniable bioweapons. Serial passage in humanized hACE2 mice may have produced something like SARS-CoV-2.

The funding for the gain-of-function research being conducted at the Wuhan Institute of Virology came from Peter Daszak. Peter Daszak runs an NGO called EcoHealth Alliance. EcoHealth Alliance received millions of dollars in grant

money from the National Institutes of Health/National Institute of Allergy and Infectious Diseases (that is, Anthony Fauci), the Defense Threat Reduction Agency (part of the US Department of Defense), and the United States Agency for International Development. NIH/NIAID contributed a few million dollars, and DTRA and USAID each contributed tens of millions of dollars towards this research. Altogether, it was over a hundred million dollars.

EcoHealth Alliance subcontracted these grants to the Wuhan Institute of Virology, a lab in China with a very questionable safety record and poorly trained staff, so that they could conduct gain-of-function research, not in their fancy P4 lab, but in a level-2 lab where technicians wore nothing more sophisticated than perhaps a hairnet, latex gloves, and a surgical mask, instead of the bubble suits used when working with dangerous viruses. Chinese scientists in Wuhan reported being routinely bitten and urinated on by laboratory animals. Why anyone would outsource this dangerous and delicate work to the People's Republic of China, a country infamous for industrial accidents and massive explosions that have claimed hundreds of lives, is completely beyond me, unless the aim was to start a pandemic on purpose.

In November of 2019, three technicians at the Wuhan Institute of Virology developed symptoms consistent with a flu-like illness. Anthony Fauci, Peter Daszak, and Ralph Baric knew at once what had happened, because back channels exist between this laboratory and our scientists and officials.

December 12th, 2019, Ralph Baric signed a Material Transfer Agreement (essentially, an NDA) to receive Coronavirus mRNA vaccine-related materials co-owned by Moderna and NIH. It wasn't until a whole month later, on January 11th, 2020, that China allegedly sent us the sequence to what would become known as SARS-CoV-2. Moderna claims, rather absurdly, that they developed a working vaccine from this sequence in under 48 hours.

Stephane Bancel, the current CEO of Moderna, was formerly the CEO of bioMerieux, a French multinational corporation specializing in medical diagnostic tech, founded by one Alain Merieux. Alain Merieux was one of the individuals who was instrumental in the construction of the Wuhan Institute of Virology's P4 lab.

The sequence given as the closest relative to SARS-CoV-2, RaTG13, is not a real virus. It is a forgery. It was made by entering a gene sequence by hand into a database, to create a cover story for the existence of SARS-CoV-2, which is very likely a gain-of-function chimera produced at the Wuhan Institute of Virology and was either leaked by accident or intentionally released.

The animal reservoir of SARS-CoV-2 has never been found.

This is not a conspiracy "theory". It is an actual criminal conspiracy, in which people connected to the development of Moderna's mRNA-1273 are directly connected to the Wuhan Institute of Virology and their gain-of-function research by very few degrees of separation, if any. The paper trail is well-established.

The lab-leak theory has been suppressed because pulling that thread leads one to inevitably conclude that there is enough circumstantial evidence to link Moderna, the NIH, the WIV, and both the vaccine and the virus's creation together. In a sane country, this would have immediately led to the world's biggest RICO and mass murder case. Anthony Fauci, Peter Daszak, Ralph Baric, Shi Zhengli, and Stephane Bancel, and their accomplices, would have been indicted and prosecuted to the fullest extent of the law. Instead, billions of our tax dollars were awarded to the perpetrators.

The FBI raided Allure Medical in Shelby Township north of Detroit for billing insurance for "fraudulent COVID-19 cures". The treatment they were using? Intravenous Vitamin C. An antioxidant. Which, as described above, is an entirely valid treatment for COVID-19-induced sepsis, and indeed, is now part of the MATH+ protocol advanced by Dr. Paul E. Marik.

The FDA banned ranitidine (Zantac) due to supposed NDMA (N-nitrosodimethylamine) contamination. Ranitidine is not only an H2 blocker used as antacid, but also has a powerful antioxidant effect, scavenging hydroxyl radicals. This gives it utility in treating COVID-19.

The FDA also attempted to take N-acetylcysteine, a harmless amino acid supplement and antioxidant, off the shelves, compelling Amazon to remove it from their online storefront.

This leaves us with a chilling question: did the FDA knowingly suppress antioxidants useful for treating COVID-19 sepsis as part of a criminal conspiracy against the American public?

The establishment is cooperating with, and facilitating, the worst criminals in human history, and are actively suppressing non-vaccine treatments and therapies in order to compel us to inject these criminals' products into our bodies. This is absolutely unacceptable.

COVID-19 Vaccine Development and Links to Transhumanism:

This section deals with some more speculative aspects of the pandemic and the medical and scientific establishment's reaction to it, as well as the disturbing links between scientists involved in vaccine research and scientists whose work involved merging nanotechnology with living cells.

On June 9th, 2020, Charles Lieber, a Harvard nanotechnology researcher with decades of experience, was indicted by the DOJ for fraud. Charles Lieber received millions of dollars in grant money from the US Department of Defense, specifically the military think tanks DARPA, AFOSR, and ONR, as well as NIH and MITRE. His specialty is the use of silicon nanowires in lieu of patch clamp electrodes to monitor and modulate intracellular activity, something he has been working on at Harvard for the past twenty years. He was claimed to have been working on silicon nanowire batteries in China, but none of his colleagues can recall him ever having worked on battery technology in his life; all of his research deals with bionanotechnology, or the blending

of nanotech with living cells.

The indictment was over his collaboration with the Wuhan University of Technology. He had double-dipped, against the terms of his DOD grants, and taken money from the PRC's Thousand Talents plan, a program which the Chinese government uses to bribe Western scientists into sharing proprietary R&D information that can be exploited by the PLA for strategic advantage.

Charles Lieber's own papers describe the use of silicon nanowires for brain-computer interfaces, or "neural lace" technology. His papers describe how neurons can endocytose whole silicon nanowires or parts of them, monitoring and even modulating neuronal activity.

Charles Lieber was a colleague of Robert Langer. Together, along with Daniel S. Kohane, they worked on a paper describing artificial tissue scaffolds that could be implanted in a human heart to monitor its activity remotely.

Robert Langer, an MIT alumnus and expert in nanotech drug delivery, is one of the co-founders of Moderna. His net worth is now \$5.1 billion USD thanks to Moderna's mRNA-1273 vaccine sales.

Both Charles Lieber and Robert Langer's bibliographies describe, essentially, techniques for human enhancement, i.e. transhumanism. Klaus Schwab, the founder of the World Economic Forum and the architect behind the so-called "Great Reset", has long spoken of the "blending of biology and machinery" in his books.

Since these revelations, it has come to the attention of independent researchers that the COVID-19 vaccines may contain reduced graphene oxide nanoparticles. Japanese researchers have also found unexplained contaminants in COVID-19 vaccines.

Graphene oxide is an anxiolytic. It has been shown to reduce the anxiety of laboratory mice when injected into their brains. Indeed, given SARS-CoV-2 Spike's propensity to compromise the blood-brain barrier and increase its permeability, it is the perfect protein for preparing brain tissue for extravasation of nanoparticles from the bloodstream and into the brain. Graphene is also highly conductive and, in some circumstances, paramagnetic.

In 2013, under the Obama administration, DARPA launched the BRAIN Initiative; BRAIN is an acronym for Brain Research Through Advancing Innovative Neurotechnologies®. This program involves the development of brain-computer interface technologies for the military, particularly non-invasive, injectable systems that cause minimal damage to brain tissue when removed. Supposedly, this technology would be used for healing wounded soldiers with traumatic brain injuries, the direct brain control of prosthetic limbs, and even new abilities such as controlling drones with one's mind.

Various methods have been proposed for achieving this, including optogenetics, magnetogenetics, ultrasound, implanted electrodes, and transcranial electromagnetic stimulation. In all instances, the goal is to obtain read or read-write capability over neurons, either by stimulating and

probing them, or by rendering them especially sensitive to stimulation and probing.

However, the notion of the widespread use of BCI technology, such as Elon Musk's Neuralink device, raises many concerns over privacy and personal autonomy. Reading from neurons is problematic enough on its own. Wireless brain-computer interfaces may interact with current or future wireless GSM infrastructure, creating neurological data security concerns. A hacker or other malicious actor may compromise such networks to obtain people's brain data, and then exploit it for nefarious purposes.

However, a device capable of writing to human neurons, not just reading from them, presents another, even more serious set of ethical concerns. A BCI that is capable of altering the contents of one's mind for innocuous purposes, such as projecting a heads-up display onto their brain's visual center or sending audio into one's auditory cortex, would also theoretically be capable of altering mood and personality, or perhaps even subjugating someone's very will, rendering them utterly obedient to authority. This technology would be a tyrant's wet dream. Imagine soldiers who would shoot their own countrymen without hesitation, or helpless serfs who are satisfied to live in literal dog kennels.

BCIs could be used to unscrupulously alter perceptions of basic things such as emotions and values, changing people's thresholds of satiety, happiness, anger, disgust, and so forth. This is not inconsequential. Someone's entire regime of behaviors could be altered by a BCI, including such things as suppressing their appetite or desire for virtually anything on Maslow's Hierarchy of Needs.

Anything is possible when you have direct access to someone's brain and its contents. Someone who is obese could be made to feel disgust at the sight of food. Someone who is involuntarily celibate could have their libido disabled so they don't even desire sex to begin with. Someone who is racist could be forced to feel delight over cohabiting with people of other races. Someone who is violent could be forced to be meek and submissive. These things might sound good to you if you are a tyrant, but to normal people, the idea of personal autonomy being overridden to such a degree is appalling.

For the wealthy, neural laces would be an unequalled boon, giving them the opportunity to enhance their intelligence with neuroprosthetics (i.e. an "exocortex"), and to deliver irresistible commands directly into the minds of their BCI-augmented servants, even physically or sexually abusive commands that they would normally refuse.

If the vaccine is a method to surreptitiously introduce an injectable BCI into millions of people without their knowledge or consent, then what we are witnessing is the rise of a tyrannical regime unlike anything ever seen before on the face of this planet, one that fully intends to strip every man, woman, and child of our free will.

Our flaws are what make us human. A utopia arrived at by removing people's free will is not a utopia at all. It is a monomaniacal nightmare.

Furthermore, the people who rule over us are Dark Triad types who cannot be trusted with such power. Imagine being beaten and sexually assaulted by a wealthy and powerful psychopath and being forced to smile and laugh over it because your neural lace gives you no choice but to obey your master.

The Elites are forging ahead with this technology without giving people any room to question the social or ethical ramifications, or to establish regulatory frameworks that ensure that our personal agency and autonomy will not be overridden by these devices. They do this because they secretly dream of a future where they can treat you worse than an animal and you cannot even fight back. If this evil plan is allowed to continue, it will spell the end of humanity as we know it.

Conclusions:

The current pandemic was produced and perpetuated by the establishment, through the use of a virus engineered in a PLA-connected Chinese biowarfare laboratory, with the aid of American taxpayer dollars and French expertise.

This research was conducted under the absolutely ridiculous euphemism of “gain-of-function” research, which is supposedly carried out in order to determine which viruses have the highest potential for zoonotic spillover and preemptively vaccinate or guard against them.

Gain-of-function/gain-of-threat research, a.k.a. “Dual-Use Research of Concern”, or DURC, is bioweapon research by another, friendlier-sounding name, simply to avoid the taboo of calling it what it actually is. It has always been bioweapon research. The people who are conducting this research fully understand that they are taking wild pathogens that are not infectious in humans and making them more infectious, often taking grants from military think tanks encouraging them to do so.

These virologists conducting this type of research are enemies of their fellow man, like pyromaniac firefighters. GOF research has never protected anyone from any pandemic. In fact, it has now started one, meaning its utility for preventing pandemics is actually negative. It should have been banned globally, and the lunatics performing it should have been put in straitjackets long ago.

Either through a leak or an intentional release from the Wuhan Institute of Virology, a deadly SARS strain is now endemic across the globe, after the WHO and CDC and public officials first downplayed the risks, and then intentionally incited a panic and lockdowns that jeopardized people’s health and their livelihoods.

This was then used by the utterly depraved and psychopathic aristocratic class who rule over us as an excuse to coerce people into accepting an injected poison which may be a depopulation agent, a mind control/pacification agent in the form of injectable “smart dust”, or both in one. They believe they can get away with this by weaponizing the social stigma of vaccine refusal. They are incorrect.

Their motives are clear and obvious to anyone who has been paying attention. These megalomaniacs have raided the pension funds of the free world. Wall Street is insolvent and has had an ongoing liquidity crisis since the end of 2019. The aim now is to exert total, full-spectrum physical, mental, and financial control over humanity before we realize just how badly we've been extorted by these maniacs.

The pandemic and its response served multiple purposes for the Elite:

- Concealing a depression brought on by the usurious plunder of our economies conducted by rentier-capitalists and absentee owners who produce absolutely nothing of any value to society whatsoever. Instead of us having a very predictable Occupy Wall Street Part II, the Elites and their stooges got to stand up on television and paint themselves as wise and all-powerful saviors instead of the marauding cabal of despicable land pirates that they are.
- Destroying small businesses and eroding the middle class.
- Transferring trillions of dollars of wealth from the American public and into the pockets of billionaires and special interests.
- Engaging in insider trading, buying stock in biotech companies and shorting brick-and-mortar businesses and travel companies, with the aim of collapsing face-to-face commerce and tourism and replacing it with e-commerce and servitization.
- Creating a casus belli for war with China, encouraging us to attack them, wasting American lives and treasure and driving us to the brink of nuclear armageddon.
- Establishing technological and biosecurity frameworks for population control and technocratic- socialist "smart cities" where everyone's movements are despotically tracked, all in anticipation of widespread automation, joblessness, and food shortages, by using the false guise of a vaccine to compel cooperation.

Any one of these things would constitute a vicious rape of Western society. Taken together, they beggar belief; they are a complete inversion of our most treasured values.

What is the purpose of all of this? One can only speculate as to the perpetrators' motives, however, we have some theories.

The Elites are trying to pull up the ladder, erase upward mobility for large segments of the population, cull political opponents and other "undesirables", and put the remainder of humanity on a tight leash, rationing our access to certain goods and services that they have deemed "high-impact", such as automobile use, tourism, meat consumption, and so on. Naturally, they will continue to have their own luxuries, as part of a strict caste system akin to feudalism.

Why are they doing this? Simple. The Elites are Neo-Malthusians and believe that we are overpopulated and that resource depletion will collapse civilization in a matter of a few short decades. They are not necessarily incorrect in this belief. We are overpopulated, and we are consuming too many resources. However, orchestrating such a gruesome and murderous power grab in

response to a looming crisis demonstrates that they have nothing but the utmost contempt for their fellow man.

To those who are participating in this disgusting farce without any understanding of what they are doing, we have one word for you. Stop. You are causing irreparable harm to your country and to your fellow citizens.

To those who may be reading this warning and have full knowledge and understanding of what they are doing and how it will unjustly harm millions of innocent people, we have a few more words.

Damn you to hell. You will not destroy America and the Free World, and you will not have your New World Order. We will make certain of that.

[The Plan to Escape Medical Tyranny – By Andrew Torba](#)



Andrew Torba is the CEO of gab.com, a social media platform that many have turned to after being censored by Facebook or Twitter for posting information the megarich corporate elite do not want you to know. I find this message encouraging. We do not have to sit back and let the Devil's people walk over us! We should not fear them for they fear us! Jesus told us in Revelation 17:14

These (the Devil's people) shall make war with the Lamb, and the Lamb shall overcome them: for he is Lord of lords, and King of kings: and they that are with him are called, and chosen, and faithful.

Much if not all of the Book of Revelation is symbolic. I think it's possible Christians may be fighting the final battle of Armageddon right NOW against the forces of Antichrist! Joe Biden may not be *the* Antichrist, but he is an antichrist because he is promoting ungodly practices such as abortion.

Many of the people who received either one or two shots are beginning to wake up. They were told by the "experts" that they just needed to get the shot and things would get back to normal. Things are far from normal and now they are

being told that they will likely need to get multiple booster shots and [even a pill to treat Covid-19](#).

Thankfully, many of them are taking a stand and fighting back.

On September 10th it was reported that a [New York hospital is going to pause baby deliveries after a "spate of resignations"](#) by maternity unit workers who refused to inject an experimental substance into their bodies.

Over the weekend I received a direct message from a NASA engineer who informed me that "almost all the engineers here have all banded together and are forcing NASA admin to fire them (both vaccinated and unvaccinated alike). NASA is on a hiring freeze, so firing all these folks would essentially kill the Artemis mission."

Many people believed they were "fully vaccinated" after two shots. They trusted the system. They believed things would get "back to normal." They took the shots, often reluctantly, with these things in mind and they are quickly finding out that they've been lied to.

Now they are preparing to be labeled "unvaccinated" again if they refuse to get yet another shot. Look on the bright side: Moderna's shares [jumped 5% on news](#) that they revealed a new single shot booster.

Meanwhile tens of millions of Americans face being fired, kicked out of school, removed from our Military, refused medical care, and more for having faith in the immune system God gave them to overcome a virus with a 99%+ survival rate for the overwhelming majority of the population.

This all comes after Pseudo-President Joe Biden [declared war on 80 million](#) (or likely way more) Americans who refused to participate in the biggest lab rat experiment in human history.

I've been writing about concepts like [the need for a parallel economy](#), a parallel internet, and a parallel society throughout all of 2021. But what does that actually look like?

We are about to find out.

If you've already been vaccinated you can join those of us who have not been by refusing to get any of these booster shots. At some point enough of us need to say enough is enough. The way this is going to work is even if you've received two shots already they are going to group you in with us "unvaccinated" people because without the booster you will no longer be "fully vaccinated." So you might as well unite with the rest of us and start building something new.

All of the best, most talented, and smartest people are critical thinkers. They are builders. Doers. They are quickly leaving the existing system. What will be left is low quality talent. The "yes" men people who will shut up, do what they are told, and get their 15th booster shot to keep their job. My heart goes out to these people, but you all know exactly the type I'm talking about.

The existing system will begin to collapse under a sea of “vaccinated” talent shortages, incompetence, and woke political nonsense.

Hospitals won't ([and already can't](#)) find much needed nursing talent. NASA missions will be aborted. Schools won't be able to find teachers. Businesses who are already having trouble filling open positions will be forced to compete with businesses who don't pry into your healthcare privacy. You can't just cut off 80 million people and not expect your business and country to suffer.

The society of obedient regime sheep will chug along for a while, but inevitably it will succumb under the weight of market forces from a growing new parallel society.

Companies without mandates will perform better and get all of the best talent. Doctors will start private practices. Families will begin to homeschool their children. Blue states and major cities will see a mass exodus unlike anything in American history.

All we have to do is say no and start building a new society for ourselves. We need to take control of our own destiny here and do what needs to be done to protect our families and preserve our values and indeed our own humanity.

I believe that God has a plan, as He always does, for what is unfolding on a global scale today. Now more than ever we must keep the faith and do as Christians have always done: survive and thrive. Do you think it was “easy” for the Pilgrims to set out for a new land and start building from scratch? Of course not, but they did it and ended up building the greatest country in the history of the world. Do you think it was “easy” for first century Christians to spread the Gospel? Of course not, but today billions of Christians know that Christ is on the throne because of their work and sacrifice.

In a lot of ways we are the modern Pilgrims of our time, seeking religious freedom and sovereignty to escape the rule of a tyrannical elite who hate us. Their blood runs in our veins, the spirit of their plight is in our hearts, and most importantly their God is our God.

We can and must do this. Force their hand. Band together with other like minded people at your school and work to say: no, we will not comply. Then start your pilgrimage to a new parallel society where Jesus is King, family values matter, and freedom rings.

To God Be The Glory,

Andrew Torba
CEO, Gab.com
Only Jesus Saves

Dr. Lawrence Palevsky Discloses the Dangers and Unknown Risks of Vaccines



Introduction

I think this talk about vaccines by Dr. Palevsky is nothing short of outstanding! He is talking about regular vaccines given to children, which, in my opinion, are harmful but not even nearly as harmful as the Covid-19 vaccines! My first son, Jeremy, was vaccinated at only 5 months old, and he was not a normal child. It was only after Jeremy became older that I found information from the Internet that led me to think Jeremy has a type of autism known as Asperger syndrome. And I firmly believe it was due to the vaccination he received when he was a baby. His brother Timothy was never vaccinated and is normal. Timothy has lots of friends. Jeremy has few friends and is not a social person like Timothy is.

It's my hope that after you listen to or read this talk by Dr. Palevsky that you will question everything you hear from the mainstream media that is called "science". It may not be true science at all, only opinions, assumptions, conjectures, or speculations that are pushed by big corporations whose interest is only in profit for their shareholders, and not in your well-being! If you're a Bible believer, you *know* when you hear scientists talk about Darwin's evolution, they are not talking about real science which is based on observation and measurement. They absolutely refuse to consider God the Creator in the equation in spite of all the evidence that abounds in nature that manifests intelligent design. There is no design without a designer! True science is a quest for knowledge. An honest scientist will follow the evidence wherever it leads.

Transcription

My name is Dr. Lawrence Palevsky. I'm a pediatrician, originally trained at NYU School of Medicine, graduated in 1987, finished my residency at Mount Sinai Hospital in New York in 1990, did a fellowship at the Bellevue Hospital in the outpatient department. The first nine years of my career were spent in ERs, running an intensive care unit, working in a neonatal intensive care unit, working inpatient in the hospital, working in a clinic and then

eventually having a private practice.

In 1983, when I started medical school, I was taught vaccines were safe, and they were effective, but I was not taught about any of the science around their safety, or any of the studies around how safety were done. And it wasn't until 1998 that a mother came up to me and said, "Dr. Larry, did you know that there's mercury in vaccines?" And I said, "No, I did not." And as a medical student, I was trained to critically think. If you see an observation, you go after it, and try and figure out if there's a question to ask. So instead of just ignoring it, I looked further into the vaccine ingredients. And I found that there were a number of vaccine ingredients that in animal studies were proven to be very dangerous to animals. And I didn't understand why these same ingredients were actually in vaccines.

I'm starting to hear stories from parents, not dozens, not hundreds, but 1000s of stories from parents, who took a very healthy child into their doctor's office, and then found that their child lost much of their health, whether it was their speech, whether seizures, whether it was death, whether it was asthma, allergies, eczema, whether it was autism, whether it was learning disabilities, whether it was inflammatory bowel disease, autoimmune diseases. And every one of those parents were told, it had nothing to do with the vaccine, every single one. And this continues today. But yet, when I look at the ingredients that are in the vaccines, I have the science to actually explain how these medical problems could be happening in these children.

Today, one child in five is learning disabled. In 1976 it was one in 17. One in six under age eight, one in two adolescents, and one in four young adults are diagnosed with a mental behavioral, or emotional disorder. One in 20 children under the age of five have seizures. One child in 40 develops autism. The number of cases of children and adults with autoimmune diseases is rising exponentially. It's one of the highest-rising diseases in this country. And the vaccine ingredients, if you are willing to look at them, and understand how they work when they're injected into the body, can be seen to be responsible for every single one of these cases.

So what are these ingredients? Well, when I was in medical school, we were taught that the body has something called the *blood-brain barrier*. The blood-brain barrier is like Fort Knox to the brain. Elements of the bloodstream cannot get into the brain. And those elements include drugs, viruses, and bacteria, among other things that are in the blood. Drug companies were very concerned about being able to develop drugs to get the drugs into the brain. And so they used something called a nanoparticle, nanoparticle, very small particle, bound to the drug. And they found that **if they could put a nanoparticle onto a drug, they could get that drug to go into the brain**. And it shows in animal studies, that they were able to do this.

They then were able to take an emulsifier which is something that's good with water and fat, it can dissolve in both. And if they added the emulsifier to the nanoparticle bound to the drug, **they could increase drug entry into the brain 20 fold**. This is right out of animal studies that I found. So you have a drug, you have a nanoparticle, and you have this emulsifier. The vaccines are constructed the same way. You have the vaccine viruses and bacteria that

are bound to a nanoparticle called aluminum, and that aluminum is a nanoparticle. And by definition, a nanoparticle has the potential to enter the brain.

Most vaccines also contain polysorbate 80, or sorbitol. Both of those compounds are emulsifiers. Emulsifiers bind very tightly to the nanoparticle aluminum, which is bound very tightly to the vaccine antigens. This raises a question: If the vaccine model is the same model as the model that the drug companies are using to enhance the delivery of drugs into the brain, is it possible that vaccine ingredients are making their way into the brain of our children? That could explain why so many parents are watching their kids deteriorate after vaccinations, even though the doctors, the media, and the government say absolutely no connection, even though the science suggests that there is. You cannot find a single study in the literature that addresses whether the injection of aluminum into the body penetrates the brain, whether any vaccine ingredients enter the brain, and whether polysorbate 80 enhances the delivery of any of those ingredients into the brain. And when I could not find those studies, I was concerned, because I'm told you're told vaccines are evaluated, and very, very distinctly tested for safety. But yet, you cannot find a study that says, "Does aluminum get into the brain of children? Does aluminum take other vaccine ingredients into the brain that don't belong in the brain?" Because when ingredients get across the blood-brain barrier that don't belong in the brain, they cause inflammation. And inflammation is what we see in one in five children with learning disabilities, and one in 40 children with autism. And all you have to do is ask the guidance counselors. And if you get honest pediatricians who are telling you what they're seeing in their practice, they're seeing kids one after another with more and more brain disorders.

Now, as a medical doctor, who was taught to think and then went into the literature, and said, Are proper science studies done? – safety studies – where you take a vaccine and you inject it into 100 kids, and then you give 100 kids a saline placebo, meaning it's inert. No study exists to actually evaluate the safety of a vaccine compared to a placebo group. None.

When vaccines are studied, the maximum amount of days that vaccines are studied are up to 10 days to two weeks. And unfortunately, the vaccine manufacturers preselect what side effects they will allow to be associated with the vaccines. So if a child has a vaccine reaction that is associated with the vaccine, the vaccine manufacturers will decide whether or not it should or should not be associated with a vaccine. And the public knows this, and they're learning it more and more. So if your child develops seizures five months after a vaccine, your child is told by the doctor it had nothing to do with the vaccine. But that's not true. Because there are no studies to prove it. There's opinion, but there's never been a study, really addressing whether a vaccination at two months, or even nine hours of age, could be related to an event that happened months or even years later. And yet we have some of the sickest children in our country.

In New York, we lost the religious exemption on June 13, because the unvaccinated children with a religious exemption were blamed for a measles outbreak. When I met with representatives in New York, I told them that there

is no study to prove that unvaccinated children have ever been proven to start an epidemic. And he was surprised and he said, "I will vote against removing the religious exemption if I can't find a study, like you said." He could not find a study, but he voted to repeal the exemption anyway. Because there are no studies. There are no studies proving that unvaccinated children are responsible. There's consensus, and here's why there's consensus:

We are taught that vaccines stop the children from carrying the germs that we are vaccinating against. And **study after study shows that children who are vaccinated can still carry the germ, despite having received the vaccine.** So, the vaccinated are still capable of spreading disease. But **the unvaccinated are being unfairly blamed because of a consensus opinion, but not true science.** To repeat, no study, no science has ever proven that vaccines eliminate the existence of the organism in your body. If anything, science is showing that the vaccines cause the organisms to mutate, and there are plenty of articles showing that strains are replaced by new strains after vaccination, similarly, to the way antibiotics are bringing about new strains of bacteria because of the overuse of antibiotics.

So why are we blaming the unvaccinated children? No study has ever been done in this country appropriately to address the health outcomes of children who are vaccinated, versus the children who are unvaccinated. I have been seeing families in my practice for over 20 years that have opted out of vaccination. They are the healthiest children I have ever seen. I have families who have older children who have been vaccinated, middle children who have been partially vaccinated, and then younger children who have not been vaccinated at all. And those families are rising in number. And they see the difference between the health outcomes of their younger children who are rarely sick, versus their older children who are getting IDPs (?) in schools, needing medications, ERs and constant health issues. And all I get when I hear that, when I state something like that is, "Well, that's anecdotal." Well, it's anecdotal if you see it a couple of times. But it's not anecdotal when you see it for over 20 years, and when you speak to parents, and when you speak to teachers, and when you speak to guidance counselors.

And when I speak to pediatricians who were too afraid to come out in public, there is pressure to ostracize the families who know the science and know the lack of science that's available. There's a lot of consensus. And when I think about the subject of vaccination, I want to ensure that if we're going to prevent infectious diseases in children, that we don't create something worse in its place.

Unfortunately, we're dealing with a lot of beliefs instead of actual science, and beliefs go a long way. I took the oath of "first do no harm". But when I look into the science, and I don't see long term studies, and I see only short-term studies, up to four to 10 days, where the side effects are manipulated by the manufacturers who are the only ones doing the studies on the vaccines. And when I see no placebo groups, and I see no studies of the single ingredients or the combined ingredients, and I see the science, the biochemistry of the ingredients in animal studies, where animals who are given the aluminum are found to have motor delays and behavioral problems, which is a great deal of what we're seeing in children today, I say, are we

first doing no harm? And so, first do no harm means the precautionary principle. And more and more parents are understanding the dangers of vaccines. And that's why we're seeing such pressure to mandate vaccines because more of the science is coming out.

In order to create herd immunity, you have to be able to prove that children who are vaccinated are immune. And the sad part about that is that whenever you vaccinate a population of children, you're always going to have a population that doesn't develop any antibodies at all. The estimates of that are about 10% that vaccines will fail in 10% of the population. Vaccination, no antibody production. But the next group is even more suspicious. Because when you vaccinate, and you do produce an antibody, there is science to show that the presence of an antibody doesn't guarantee immunity either. And we don't know the percentage of children who get a vaccine, develop an antibody, but aren't immune at all. We assume that if we vaccinate, we're getting protection. **We assume that if we vaccinate, we're stopping spread of disease. Those are assumptions that have never been solidified in science.** And I'm happy to offer more explanations during the Q&A. I wouldn't say that if I didn't have the science to prove it.

The parents that I work with in New York that I see around the country are very concerned that their rights are being taken away, that their knowledge about the science is being pushed away by an agenda that only says unvaccinated children are a problem.

Just to wrap up, in California when they had a measles outbreak, there were 194 cases. Of the 194 cases, 73 cases were due to the actual virus in the vaccine itself. Seventy-three, 38%, 73 cases were due to the measles virus causing measles. All the literature states that measles virus infection is not true measles and should not be counted as a health threat. That means only 121 Kids developed measles, 121 people. New York State did not do the proper testing that's given down by the CDC to test every child to see if the children had measles strain, wild type measles or a mutated measles. There are cases around the country and around the world where in a 95 ~ 98% vaccinated population they had measles outbreaks, because they found mutated viruses. As I said before, there are cases where the virus mutates, where they're strain replacements. New York State did not do the proper testing of the 1000 plus young children and adults who came down with measles. They wrote a little blurb on the CDC website of the two wild viruses that were responsible for the measles outbreak. But we in New York know that the testing was not done. Four thousand two hundred kids on Long Island had the religious exemption and were not vaccinated. And there was not one case of measles on Long Island.

Thank you.

How Are Forced Covid Vaccinations Different From The Mark Of The Beast? They Aren't!



All lovers of liberty should be against mandatory vaccinations. They are against the principles laid out in the Nuremberg Code (1947) which states:

The voluntary consent of the human subject is absolutely essential. This means that the person involved should have legal capacity to give consent; should be so situated as to be able to exercise free power of choice, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him to make an understanding and enlightened decision.

You can read all 10 points of the Nuremberg Code on <http://www.cirp.org/library/ethics/nuremberg/>

Below is a message from Pastor Chuck Baldwin to Liberty Fellowship on Sunday, August 22, 2021. You busy people can read the transcript of the main part of the message below the video.

All right, open your Bibles, if you would with me, please to the book of Revelation, the book of Revelation, chapter 13. I'm going to pull out two verses from this chapter, as the text for the message, Revelation chapter 13. And the two verses are verses 16 and 17. Again, Revelation chapter 13, verses 16, and 17.

Revelation 13:16 And he (the Beast) causeth all, both small and great, rich and poor, free and bond, to receive a mark in their right hand, or in their foreheads:

Now, just a pause for a moment, when we get into our detailed discussion on prophecy will go into this much more, of course, but just for now, you have to understand that most of the book of Revelation is written in allegorical form. And that's true here in the Passage. In their right hand or in their foreheads does not necessarily mean some kind of a tattoo in your right hand or forehead, literally. The term forehead and right hand would immediately resonate with the Hebrew Christians who were reading this prophecy of John, because under the old covenant, the Hebrews, many of them would wear phylacteries, on their heads, and on their arms. And so this was definitely a symbolic allegory to that. And even though the book itself was written in Greek, the Hebrew believers would have definitely understood the right hand, and the forehead, meaning accepting, in the case of the Hebrews, under the old covenant, it would have meant accepting the law of the Lord, with your heart, and mind and with your body. So the mind and then the arm, representing the totality of the human being, body, soul, spirit, heart. And so that was the symbolism of the phylacteries that the Hebrews would wear under the old covenant. So when he talks about this, pertaining to the Beastly System, he's saying, that you will accept this System with your whole heart, with your mind with your flesh. And that's, that's the meaning of this.

Revelation 13:17 And that no man might buy or sell, save he that had the mark, or the name of the beast, or the number of his name.

So I'll read it one more time without the comment.

*Revelation 13:16 And he causeth all, both small and great, rich and poor, free and bond, to receive a mark in their right hand, or in their foreheads:
17 And that no man might buy or sell, save he that had the mark, or the name of the beast, or the number of his name.*

In other words, **if you do not accept the authority of the Beast, over your life, by whatever Mark is meant, you would not be able to function in society.** You would not be able to purchase to buy to travel to work, you must submit to the authority of the Beast. You must have the Mark of the Beast, whatever specifically that refers to, or you will not be able to conduct business, to work, and to live in the Beastly society. That's what the verse is saying.

This week, an article appeared on theburningplatform.com/. And I'd like to read this to you.

Now, in France, where this column originates or this article, the Mark is called a Pass. If you do not have a Pass, showing that you have been vaccinated with the COVID vaccines, you are not able to conduct yourself in society throughout the country of France. So as I read the article, I have no idea whether this individual is a Christian or not, there's no reference to that. But in the article, he refers to the Pass. Okay. So instead of using the word Pass, every time it appears, I'm going to use the word Mark, because it's one and the same. The Pass is the Mark. The Mark is a Pass. It's identical in definition. So I'm going to use the word Mark. Every time he used the word Pass. Let me read it.

(From <https://www.theburningplatform.com/2021/08/15/message-from-france/>)

Here in France, it has gone to the extreme with the health Mark. Last week on the 21st, all restaurants, bars, coffee shops, and any leisure activities like sporting events, theaters, cinemas, museums were closed to anyone without the Mark. And all staff at these places are mandated to get the jab to keep their job. It is now a six month prison sentence. If you are caught inside any of these places without the Mark, business owners will get a fine of 45,000 euros and one year prison sentence if they do not comply with the use of the Mark and force all their employees to get the jab.

So the result? All the low paid employees quit, they can make more on welfare here. (for now) We can still technically "get take out food" but I just tried last night and every restaurant in our town (that is dine in with take out) has closed their doors due to the lack of staff.

As of last week ALL doctors, nurses and health industry workers have been mandated to get the jab or lose their license, practice, job, business etc. (ALL health care here is Govt paid positions and there are no private health care Doctors or Hospitals etc.)

That no man might buy or sell. Save he that had the Mark or the name of the Beast, or the number of his name.

Continuing with this article:

As of Aug 1st ALL large malls, retail stores and grocery store owners and their staff need to be jabbed and the health Mark is required to enter for employees and customers.

You cannot even get in the grocery stores, malls etc. without the Mark.

This would be the equivalent to closing ALL Targets, Walmarts, Costcos, Home Depots, and all major grocery stores. (basically any building over 20,000 square meters) to those without "the Mark".

As of Sept 15th all public areas and access will be off limits. No farmers markets, no parks, no national parks, lakes, rivers, beaches, recreation areas, campsites etc. and no gathering over 100 people, no churches, no weddings, etc. (Without the Mark.)

As of Oct 1st ALL small vendors such as, delis, pizza trucks, sandwich shops, butchers, bakers, vegetable stands etc. (Will be off limits if you don't have the Mark.

So as of Oct 1st I will only be able to purchase food by internet

and pick up (if the store allows it).

Is it me or does all this seem a bit extreme for a “pass” that isn’t exactly working?

America Canada England Australia New Zealand you’d better wake up.

All over the United States, government employers and many private companies are mandating their employees take the jab or lose their jobs – as we found out from this dear lady from Missouri today. Paul Craig Roberts wrote a great article that was picked up on [Lewrockwell.com](https://www.lewrockwell.com) this week. Paul was former assistant treasury secretary under Ronald Reagan, as most of you know. And I quote his brief column.

(From

<https://www.lewrockwell.com/2021/08/paul-craig-roberts/why-are-we-being-deceived-about-covid/>)

Why have US corporations involved themselves in public health policy? Why have they taken a position that is totally contradicted by all facts and all known evidence?

And you see, if you don’t understand the spiritual nature of this Beastly system, if you don’t understand that this is not science, this is not medicine, this is spiritual deception, then you’re not going to understand why all of this is happening. And Paul, that’s that’s why he’s asking the question. He may not understand the spiritual significance of this.

It is not only democratic governments that have turned totalitarian but also private corporations who are asserting authority to override the Nuremberg Laws and mandate that employees be vaccinated with the Covid Vaccine. A vaccination is a medical procedure and requires informed consent.

It is very strange to find corporations recruited to serve a coerced marketing campaign. We hear about the “pandemic of the unvaccinated.” But there is no such pandemic. All evidence shows that the majority of new cases are among the double inoculated.

The majority of people are those who’ve been inoculated.

Public officials and the presstitutes (the media) are implying that it is those who refuse the vaccine who are responsible for the new outbreak when to the contrary it is the vaccinated people who are the cause of the variants and new illnesses. As Dr. Malone, the inventor of the mRNA technology used to create the vaccine has patiently explained, **the vaccine trains the virus to produce**

variants that escape vaccines.

Considering the enormous number of deaths and injuries associated with the vaccine, we are faced with the conclusion that the vaccine gives those vaccinated Covid illnesses.

No evidence exists that supports the claim of CDC director Rochelle Walensky that the delta variant is a “pandemic of the unvaccinated.”

No evidence exists that the vaccine protects against Covid. Indeed, the vaccine seems to spread the virus.

We have learned that there is no such thing as “fully vaccinated.” The new program is endless booster shots every few months, the result of which will be an explosion in adverse effects from the vaccine.

The Covid policy is so counterfactual and so contradicted by all evidence that conspiracy theorists who see a darker agenda at work are gaining credibility.

And for Paul Craig Roberts to say that, that’s significant. And then he concludes,

When a vaccine has proven itself not to protect but to cause unprecedented deaths and illnesses, how can any intelligent person arrive at the conclusion that more vaccine is the solution?

Just this week, we learned that two of my congregates from my former pastor, died after receiving the COVID vaccination. One of them was in her 40s. Two people that I personally knew as their pastor died this week, and both having taken the COVID vaccination. For those of you around the country, you should know that our state here in Montana is the only state in the United States to ban vaccine requirements for employees. And that was the direct result of a massive input from the grassroots citizenry of this country, and some great legislators who had a determined position to bring this legislation to the legislature, and the governor had the guts to sign it. And it’s the law of our state that no business can require the vaccine for their employees as a condition for employment. And we’re the only state in the country with such a law. And as you can imagine, pressure is coming in from all over the country, on our state government, our legislators and our governor to reverse this law.

Next week, would you please bring with me, the names of our legislative leaders, our governor, our Majority Leader, and majority Senate and House and all the leadership, and we need to start letting these people know that they cannot buckle to the pressure of outside influences, to try and undo the constitutional acts of the legislature supported by the people of the state of Montana. It’s very important that we stand in the gap with our legislative

because I'm telling you, right now, the pressure is immense, including economic bribery attempts in order to get them to reverse because we're the one state the only state that has done this, and they don't want other states copying this. And so they're going to try to stop it here in Montana. It's very important that we get involved in this, will have those names. And if you have the names yourself, don't wait for us to give them to you. You can start contacting them this week. Tell them thank you so much for what you've done and do not submit to the pressure. We are behind you.

With that in mind, I'm gonna give you a couple of other articles that were in the news this week that I think are so very relevant to the message of the hour. This comes from attorney Thomas Renz and his [website](#). The title of it, "Bombshell lawsuit alleges government covering up tens of thousands of injection-related deaths". Attorney Thomas Renz, filed a lawsuit in federal court in Alabama on July 19, that alleges a massive government cover-up of injection-related US deaths, that number "at least 45,000". The suit filed on behalf of America's Frontline Doctors in US District Court for the Northern District of Alabama, is based on a sworn statement by a government insider under federal Whistleblower Protection. America's Frontline Doctors, a nonprofit, filed a motion seeking immediate injunction injunctive relief to stop the emergency youth authorization of COVID-19 vaccines for three groups of Americans, anyone under the age of 18, anyone who has recovered from COVID-19, and those who haven't get been given informed consent as defined by federal law.

Speaking at a reawaken tour event held July 17 and 18 in Anaheim, California, Renz made the bombshell announcement, he says is based on a whistleblower with access to government computers, and can prove that at least 45,000 Americans have already been killed by the three COVID-19 vaccines authorized for emergency use by the FDA. 45,000 according to this source, people have died after receiving the COVID injection. Well, I can vouch for at least two of those.

Then there was another report that I want to share. This is [from LeoHohmann.com](#). The doctor cites whistleblowers inside CDC, who claim injections have already killed 50,000 Americans. The doctor quoted is Dr. Peter McCullough. He says, "good doctors are doing unthinkable things. They appear to be under a spell. The whole world is under a spell. The spell is satanic deception. And it includes most of the pastors in America.

So I quote now the article,

The most highly cited physician on the early treatment of COVID-19 has come out with an explosive new video that blows the lid off the medical establishment's complicity in the unnecessary deaths of 10s of 1000s of Americans. Dr. Peter McCullough said these deaths have been facilitated by a false narrative bent on pushing an all-new unproven vaccine for a disease that was highly treatable. McCullough is a professor of medicine and vice chief of Internal Medicine at Baylor University. He also teaches at Texas A&M University. He is an epidemiologist, cardiologist, and internist and has testified before the Texas State Senate related to COVID-19 treatments. He holds the distinction of being the most widely cited physician in the

treatment of COVID-19 with more than 600 citations in the National Library of Medicine.

The sources are plenteous that the medical profession in general, and **the CDC in particular, are deliberately hiding the numbers of deaths that have occurred among people having taken the COVID vaccination.** In the same way that the CDC and the medical establishment manipulated and exaggerated the number of deaths associated with COVID, back in the spring of 2020, when our own Dr. Annie Bukacek, got up on this platform and gave her professional analysis citing this CDCs own documents to prove the manipulation, the exaggeration that was taking place at the CDC, in order to beguile the American people regarding the threat and the danger of COVID-19. In the same way, that they exaggerated the numbers of deaths associated with COVID in 2020, is the same way that they are manipulating the numbers in 2021, **to hide the numbers of those who are dying from the COVID vaccinations.** Ladies and gentlemen, **this is not medicine, this is not science, this is blatant deception.**

And as I said, unfortunately, the vast majority of evangelical pastors and churches are fully subservient to this medical Mark of the Beast. And that's exactly what these vaccine passports or passes, call them whatever you want, that's what they are. They are **medical Marks of the Beast!** Some churches and Christian organizations – and I am not making this up – some churches and Christian organizations are even refusing to allow unvaccinated people from attending their services or participating in their Christian observances. In other words, they would not deny them communion, they would deny them baptism, they would they would deny them the Christian ordinances that we we observe as a church body, and they are denying them attendance in the churches, because of their submission to the Beastly system. If you do not have a vaccination passport, many churches will not let you into their congregation. If you have run into that, wherever you are, would you please spread the word in your state and in your local community, that there is one church in this country where the unvaccinated will always be welcome? And that's Liberty Fellowship in Kalispell, Montana.

Now, please let me remind you of three important biblical truths that are all germane to everything we're discussing. Number one, the Israel-based pre-tribulation rapture is a myth. Let me say it again. The Israel-based pre-tribulation rapture is a myth! Why is that important? Because this Israel-based pre-tribulation rapture, deception is what the vast majority of evangelical churches have embraced for the last 100 years. As a result, they have fallen for these massive misinterpretations of Scripture, which have led evangelicals across the country to accept this medical Mark of the Beast. **If they had never accepted this phony pre-tribulation rapture myth, they would not be susceptible to the deception that is the medical Mark of the Beast.** So number one, the Israel base pre-tribulation rapture is a myth.

Number two, the Israel base seven-year tribulation itself is a myth! And when we get into our discussion of prophecy, I will elaborate on that in detail. But these two falsehoods formed the theological foundation that has opened the minds and the hearts of evangelical Christians to accept all of the lies that are now permeating the world pertaining to the phony COVID narrative,

and the COVID shots in particular. Without the acceptance of this false prophecy doctrine, that deception would not have a fertile groundwork on which to grow. But those foundations of false prophecy, give fertile ground for the deception that we are now experiencing.

And number three, let me remind you again, and I've mentioned this several times in messages of the past, the Beast is not a man. It is an antichrist beastly system. It's a system. But because the evangelical world thinks that the Beast is an individual being, an individual human being that's going to come in the future after they've been raptured – and this is all for Israel – and we're not going to be here – because of that deception, they are sitting on the sidelines, saying nothing and have actually given their hearts to this medical Beastly system, out of ignorance of truth, and out of the acceptance of the falsehood of the Scofield futurism that is known as predestinational prophecy that most evangelicals all accept thanks to the ministry and the Bible of C.I. Scofield.

So I'm trying to show you the connection between false theology that has permeated the church over the last 100 years, and the acceptance of this Beastly system by the church that we are now experiencing today. And let's face it, if the Evangelical Church had not have fallen victim to this lie back in the spring of 2020, if they would have stood their ground for truth, as a church body, collectively, you and I both know that the COVID narrative would have died on the vine, it would have died before it started. But when the churches started closing their doors, when the churches started accepting the virus, when the preacher started getting up on television and telling everybody that they need to stay home and do everything to CDC said, when they did that, it gave the spiritual cover for the deception that was needed in order for this to become the monster that it is today. Again, that's why I've told you from day number one, this is not a political issue. This is not a medical issue. This is not a science issue. This is a *spiritual* issue.

(Transcribed up to 34 minutes and 47 seconds.)

[Dr. Dan Stock explains how the current measures to combat COVID-19 do not work](#)



Dr. Daniel "Dan" Stock is a physician. This is his message about COVID-19 to a Mt. Vernon school board meeting in Indiana, USA, on August 6, 2021:

Dr. Dan stock introduces himself: Dr. Dan stock 5777 West seven in North McCordsville, Indiana. To address your comment, it's hard to believe we're 18 months into this and still having a problem. And I would suggest the reason we still have a problem is because we're doing things that are not useful. And we're getting our sources of information from the State Board of Health and the CDC, who actually don't bother to read science before they do this.

I'm actually a functional family medicine physician. That means I am specially trained in immunology and inflammation regulation. And everything being recommended by the CDC and State Board of Health is actually contrary to all the rules of science. So things you should know about Coronavirus and all other respiratory viruses, they are spread by aerosol particles which are small enough to go through every mask. By the way, the literature that supports all of that is in a flash drive that we presented to you. It's been given to the secretary. As a matter of fact, it quotes at least three studies. It's sponsored by the NIH to that exact fact even though the CDC and the NIH have chosen to avoid to ignore the very science that they paid to have done.

That is why you keep struggling with this is because you cannot make these viruses go away. The natural history of all respiratory viruses is that they circulate all year long waiting for the immune system to get sick through the winter, or become deranged, as has happened recently with these vaccines. And then they cause symptomatic disease because they cannot be filtered out and they have animal reservoirs. And this is a very important point. No one can make this virus go away.

The CDC has managed to convince everybody that we can handle this like we did smallpox where we could make a virus go away. Smallpox had no animal reservoirs, the only thing it learned to infect was humans. That's why we're able to make that virus go away. That will not happen with this any more than it will with influenza, the common cold respiratory syncytial virus,

adenovirus viral respiratory syndromes, or anything else that has animal reservoirs. So the reason you can't do this is because you're trying to do something which has already been tried and can't be done.

Equally important is that vaccination changes none of this especially with this vaccine. And I would hope this board would start asking itself before it considers taking the advice of the CDC, the NIH, and the State Board of Health, why we are doing things about this that we didn't do for the common cold, influenza, or respiratory syncytial virus? And then ask yourself, why is a vaccine that is supposedly so effective having a breakout in the middle of the summer when respiratory viral syndromes don't do that.

And to help you understand that you need to know the condition that is called antibody-mediated viral enhancement. That is a condition done when vaccines work wrong as they did in every Coronavirus study done in animals on Coronavirus is after the SARS outbreak and done in respiratory syncytial virus were a vaccine used in a vulnerable individual done the wrong way, which why it cannot be done right for respiratory virus, which has a very low pathogenicity rate causes the immune system to actually fight the virus wrong and let the virus become worse than it would with native infection. And that is why you're seeing an outbreak right now. In fact, in that flash drive you're going to have coming to you and in the emails with six extra oboeah (??) studies showing that 75% of people who had COVID-19 positive symptom cases in Barnstable, Massachusetts outbreak were fully vaccinated. (Applause)

Therefore, there is no reason for treating any person vaccinated any differently than any person unvaccinated. You should also know that **no vaccine** even the ones I support and would give to myself and my children **ever stops infection**. In 2014 there was an outbreak of mumps in the National Hockey League. The only people who came down with the symptoms were the people who were unvaccinated or had unknown vaccine status. Boy, that sounds like a great argument for vaccines. But a question that you should ask yourself, knowing that half of the people who came down with symptomatic disease had no contact with an unvaccinated or unknown vaccine status individual Where did they get the disease? And the answer was from the vaccinated individuals. No vaccine prevents you from getting the infection, you get infected, you shed pathogen. This is especially true of viral respiratory pathogens, you just don't get symptomatic from it. So you cannot stop the spread, you cannot make these numbers that you've planned on getting better by doing any of the things you're doing. Because that is the nature of viral respiratory pathogens. And you can't prevent it with a vaccine because they don't do the very thing you're wanting them to do. And you will be chasing this remainder of your life until you recognize that the Center for Disease Control and the Indiana State Board of Health are giving you very bad scientific guidance. And instead, read the articles that are gonna come in the email and on this flash drive. And listen to the people in this audience here tonight, who actually have recognized the advice they are getting from the CDC and the NIH is counterfactual. And that's why you're still fighting this but this vaccine that supposedly was gonna make all of this go away, but it suddenly managed to make an outbreak of COVID-19 develop in the middle of the summer when vitamin D levels are at their highest.

By the way, the other thing that would be necessary for any vaccine restriction to be considered is if there were no other treatments available. And I can tell you having treated over 15 COVID-19 patients that between active loading with vitamin D, ivermectin, and zinc that there's not a single person who has come anywhere near the hospital. And we already have studies that show that if you achieve a 25 hydroxy, vitamin D level greater than 55, your risk of COVID-19 death will drop down to one-quarter of the population average for the United States. And there are active treatment trials included on that flash drive, that show the same is true.

So if you were going to discriminate based upon vaccine, you should also discriminate based upon 25 hydroxy, vitamin D level, zinc taste test response, and probably previous infections since there are also studies on the flash drive that show that **people who have recovered from Covid-19 infection actually get no benefit from vaccination at all**, no reduction in symptoms, no reduction in hospitalization, and suffer two to four times the rate of side effects if they are subsequently vaccinated. Therefore, the policies that you are basing on are totally counterfactual. I don't blame this board for that, because I know you aren't scientists, and you thought it was reasonable to listen to the CDC, NIH, and the Indiana State Board of Health. But I would encourage that instead, you listen to the people out here in this audience, and read what's on that data drive. And if anybody here on this board has any questions about anything on that, I will happily come back and sit with you individually if you would like me to explain the science behind this. And if you're worried about being sued by somebody because you don't follow the guidance of the CDC and the NIH, I will tell you, you have a free pro bono expert testimony at your disposal. (Applause) I will testify in defense of this court, turning down all these recommendations for free at any time in any court. Thank you.

Moderator: Thank you. Thank you.

(Loud applause.)

**Dr. Vladimir Zelenko Calls the
Covid-19 Vaccinations Government
Sanctioned Genocide!**



Vladimir (Zev) Zelenko (born 1973)[1] is a Ukrainian-American family physician known for promoting a three drug cocktail of hydroxychloroquine, Zinc and Azithromycin as part of an experimental outpatient treatment for COVID-19 that he has promoted as the Zelenko Protocol.

On March 23, 2020, Zelenko published an open letter to U.S. president Donald Trump where he claimed to have successfully treated hundreds of his COVID-19 patients with a 5 day course of hydroxychloroquine, azithromycin, and zinc sulfate.

Zelenko's treatment protocol quickly gained notoriety with several media figures and various U.S. administration officials promoting it, including Rudy Giuliani, Sean Hannity, and White House chief of staff Mark Meadows. – Quoted from Wikipedia

Transcript

Interviewer's introduction: Dr. Vladimir Zelenko. Dr. Zelenko is a Board Certified family physician for over 20 years. He has been described by his patients as a family member to thousands of families, and he's a medical advisor to the volunteer ambulance courts in Kiryas Joel, New York. Dr. Zelenko developed and is now famous for the *Zelenko Protocol*, which has saved countless lives worldwide. So welcome Dr. Zelenko. Thank you for joining us. And I would like you to comment on our subject, please.

Dr. Zelenko: Thank you so much for having me. Can you hear me?

Interviewer: Yes, loud and clear.

Dr. Zelenko: So I'll just give you quickly my experience, my team has directly treated successfully 6000 patients. I've trained hundreds of physicians who are now training their students. And as a cumulative group, we've treated millions of patients successfully. President Trump was my patient, Rudy Giuliani was my patient, HaRav Chaim Kanievsky has been my patient, Mr. (Yaakov) Litzman your health minister of Israel, last year, was my patient. I'm just telling you, which people have contacted me for care, including President (Jair) Bolsonaro of Brazil.

Now, my experience has given me a very unique perspective in approaching COVID-19, which is basically keeping people out of the hospital. I would like to describe, regarding children, **the only reason you would want to treat a child is if you believe in child sacrifice**, or even [garbled] if you want [garbled], like a [garbled], there are very good reasons to give them a shot. Otherwise, there's no necessity.

Let me explain. Any time you evaluate any therapeutic, you need to look at it from three perspectives. Is it safe? Does it work? And do you need it? Just because you have a capability doesn't mean that you have to use it. It has to be a medical necessity, there has to be a need for it. You look at the CDC, the statistics for children under the age of 18 that are healthy, the survival rate is 99.998% – survival rate with no treatment, just like Dr. Yeadon said, the influenza virus is more dangerous to children than COVID-19. And he made an estimate that per million, 100 children would die from vaccination. I feel the number would be significantly higher. And I'll explain to you the rationale for it.

So if you have a demographic, can you hear me? **If you have a demographic that has no risk of dying from an illness, why would you inject them with a poison death shot?**

Now, let's see if this thing works. Two countries in the world that have most vaccinated its citizens is Israel, with a high 85% rate of vaccination, and an island nation in the Indian Ocean called Seychelles, also over 80%. Both countries are experiencing a Delta variant outbreak. So let me ask you a question. If you vaccinated the majority of your population, why are you still having an outbreak? That's number one. Number two, why would you even give a third shot of the same stuff that didn't work the first two times? That's whether or not it works.

And let's talk about safety. Now, this is the real issue. There are three levels of safety toward death that we need to look at. One is acute, one is sub-acute and long-term. Acute, I'll define from the moment of injection to three months. The number one risk of the shot is blood clots, just like Dr. Yeadon said, according to the Salk Institute, oh, by the way, everything I'm saying I will defend with documentation. And please don't take my word for it, you should do your due diligence. And I can provide to you, proof of everything that I'm saying.

According to the Salk Institute, when a person gets an injection of these "vaccines", the body becomes a spike producing factory, making trillions of spikes which migrate to the endothelium, which is the inner lining of your blood vessels, and it's basically little thorns on the inside of your vasculature. As the blood cells flow through it, they get damaged, they cause blood clots. If that happens in the heart, that's a heart attack, if that happens in the brain, that's a stroke. So we're seeing the number one cause of death in the short term is from blood clots. And most of it is happening within the first three, four days. And 40% is happening within the first three days of injection of this **poison death shot**.

Now, the other problem is that it's causing myocarditis or inflammation in

the hearts of children, young adults, I'm sorry, in the hearts of young adults.

And the third problem, which is the most disturbing, is according to the New England Journal of Medicine (JAMA) article, their preliminary data, the miscarriage rate, and the first trimester woman gets vaccinated, the first trimester goes from 10% to 80%. I want you to understand what I just said. The miscarriage rate in the first trimester of pregnant women, when they get vaccinated, goes up by a factor of eight. That's preliminary data, it may change with time, but I'm just telling you what it is as of today. That's the smallest of the problem.

The second problem is the sub-acute death issue, which is the following, that the animal studies that were done with these vaccines showed that all the animals responded well, in generating antibodies. When they were challenged, however, with the virus that they were immunized against, a large percentage of them died. And when that was investigated, it was found that their immune system had killed them. It's called antibody-dependent enhancement (ADE), or pathogenic priming, or paradoxical immune enhancement. But the point is that a lot of those animals died. So you can make an argument maybe human beings are different. My answer to you, *maybe*. However, those studies were not done. **You are the study right now**, the Pfizer CEO said, Israel is the biggest laboratory in the world. And so those long-term studies to rule out that, Luc Montagnier who won the Nobel Prize in Medicine for the discovery of HIV, said that **this is the biggest risk to humanity, and the biggest risk of genocide in the history of humanity**. And so the risk of a ADE reaction in human beings, which happens later, has not been ruled out. So my question is, why would I vaccinate someone with a potentially destructive lethal substance without ruling that out first.

And the third component here is the long-term consequences. There is definite evidence that it affects fertility. damages ovarian function, that and reduces sperm counts. Number one, number two, definitely increases the amount of autoimmune diseases. Who knows over time, how that is going to reduce lifespan. And just last week, a paper came out showing that increases the risk of cancer.

Any way you want to look at it, whether it's an acute setting, where it causes blood clots, inflammation of the heart, and miscarriages, in the midterm, sub-acute setting where it can result in a pathological disastrous immune reaction, or in the long term, whether it causes autoimmune diseases, cancer, and infertility. Now, that's a big concern. Actually, I will say it this way. In my opinion, the current Israeli government is as guilty as Josef Mengele. They have permitted, they've committed human experimentation on their own people.

And, I'm going to tell you, I hope, I hope this space does a little different. Maybe not. But I know I finally understood what I'll say that if you take sort of some close role, you should look at the ??? role in the sector sharpest. [Cannot understand this sentence.] That if you see trouble in the Jewish people, you should look at the rabbinic leadership because if the head is diseased, what do you expect of the body? I beg this base (??) to

put the interest of Israel above politics, and anything else that may alter your opinions. I receive daily death threats. I risk my life, my career, my financial life, my reputation, almost my family, everything, just to sit here and tell you what I'm doing.

So I'll just summarize that there is no need for this vaccine. And there's actually no need for anyone and I'll explain. Children I already told you that they have a 99.998% chance of getting better. The young adults from 18 to 45 have a 99.95% of getting better, just according to the CDC, same concept. Someone who has already COVID that has antibodies, naturally, induced immunity is a billion times more effective than artificially induced immunity through a vaccine. So why would I vaccinate someone with a poison death shot that makes inferior or dangerous antibodies when I already have healthy antibodies? And then if you look at the high-risk population that has a 7.5% death rate, so my data, which was the first in the world, which I published in a peer-reviewed journal, which has become the basis of over 200 other studies, and that have corroborated my observations that, if you treat people in the right time frame, you reduce the death rate by 85%. So out of 600,000, Americans, we could have prevented 510,000, from going to the hospital and dying.

And by the way, I presented this information to Bibi Netanyahu directly into his hands by way of [Hebrew word?] in April of 2020. And I informed every single member of your Ministry of Health as well. So my question to you is, **if I can reduce the death rate from 7.5% to less than a half a percent, why would I use a poison death shot that doesn't work, and has tremendous and horrific side effects?**

I'll do one more mind experiment with you. If everyone on the planet were to get COVID and not get treated, the death rates globally, will be less than a half a percent. Now, I'm not advocating for that that's a lot of people, that's 35 million people would die. However, if we follow the advice of some of the "global leaders", let's say like Bill Gates said, last year, 7 billion people need to be vaccinated, the death rate will be over 2 billion people.

So wake up! This is world war three. This is a level of malfeasance and malevolence that we have not seen, probably in the history of humanity.

So I'm against child sacrifice. I'm against [Hebrew word?]. And I really believe that God is testing every human being here. And here's the test.

Are you going to bow down to me, HaShem [God]? Are you going to ask protection from Me? Are you going to take your fears, and ask Me to help? Or are you going to run to the other czar of the vaccine of your governments, of despots and tyrants, like sociopaths, who want to be deities! There's nothing new under the sun. These people are no different than pero (??). They think they're God. And you're going to bow down to them. If you're going about down to them, that's okay. Let them protect you. Let's see how that's going to work out for you.

I'm seeing fear drive people to do things that are completely irrational, do not make sense and they sacrifice their own children. And yes, your ministry

of elders is lying to you. Your statistics are absolutely skewed. If you want to see something real, there's a website called <https://www.worldometers.info/> Go to [Israel](#). And you can see at December 20, there's a huge spike in the curve of deaths in Israel. Do you know what happened in Israel December 20th.? National immunization started. And these are numbers being reported by the Israeli government. They're just too stupid to hide it. There is zero justification, **zero justification for using this poison death shot unless you want to sacrifice human beings.**

I think I'm done.

Interviewer: After these words, the fact I don't think you can ever say you're done. I very much I appreciate your time and effort. Very, definite and very clear. We appreciate that.

Dr. Zelenko: Do you have any questions?

Interviewer: I have many questions. But just as 2 billion would pass out if you gave 7 billion the shot according to what the doctor said, correct?

Dr. Zelenko: Not according to what I said, according to what world experts are saying. That....If you look at Dr. Malone, who invented the mRNA technology, has the original patent for the vaccine. He's saying, "Do not use this. The government is lying to you. The side effects are horrific. " Dr. Cahill from Ireland said that, she believes within two years 90% of the people that got vaccinated will be **dead**. When Dr. Michael Yeadon – I hope he can confirm, I hope he's still there – was asked that question, he said, "you wouldn't go that far". So I don't know. Maybe it's not 90%. What is the percentage? And maybe it's not two years, maybe it's three years. And Dr. Luc Montagnier, who is the Nobel Prize winner for the discovery of HIV, saying this is the biggest risk of genocide in the history of man.

[16 minutes transcribed]

[Dr. Roger Hodkinson Warns of Myocarditis and Infertility from Covid Vaccines](#)



Introduction

Anna Brees is a journalist who used to work as a reporter on BBC. In the video, she interviews Dr. Roger Hodkinson, a noted pathologist who is not an anti-vaxxer but who is sounding the alarm about the dangerous side-effects of Covid vaccinations.

Transcript

Anna Brees: Hello, everyone, it is the 11th of June 2021. And I'm talking to Dr. Roger Hodkinson again, for a third time with a very important message. We were chatting on the phone a few minutes ago, Roger, and I thought it was incredibly important that I got you on this call, because there's a really urgent message isn't there to the public? Tell me first of all, for those who haven't heard about you before, what's your experience? What do you do? Who are you?

Dr. Hodkinson: In summary, I'm a retired pathologist living in Canada. I was trained at Cambridge in the UK in medicine, and then in pathology in Vancouver, British Columbia. I've been an assistant professor of the Faculty of Medicine at the University of Alberta. I've been Chair of the examination committee for general pathology at the Royal College of Physicians and Surgeons in Ottawa, I've been the CEO of a large commercial laboratory. I'm currently the chairman of an American company involved in molecular diagnostics, DNA sequencing for early diagnosis of cancer. So I've had a rather well-rounded career, and I think I'm quite competent to comment upon many aspects of COVID.

Anna Brees: And you're not a lone voice. And I keep saying to people, you know, there are doctors for COVID ethics, you've got PANDA (Pandemics ~ Data & Analysis), you've got heart, you've got the Frontline American doctors. And there may be a few doctors in there, you're not completely so sure about, you know, in terms of ...

Dr. Hodkinson: Well, I'm part of, you might say, the inner circle, there are about twelve of us internationally, that converse on a regular basis offline. And I did have a conversation by email with Peter McCullough, which we'll talk about in a minute, the preeminent American cardiologist involved in COVID. And so yeah, I'm right in the thick of it. I'm extremely frustrated with what's going on. And I'm sure we'll talk about that.

Anna Brees: When I said at the beginning of this interview, is you have a really urgent message to get out to the public. So what is it?

Dr. Hodkinson: Well, this, of course, is an experimental vaccine. It should have never been released. It was never an emergency, which predicated the development of the vaccine. And as with all vaccines, there are complications, which were predictable with time, but there was never enough time given for the clinical trial, which only lasted four to six months. In particular, complications are now coming out that are very disturbing.

The latest one over the last few days starting off in Israel is the frequency of Myocarditis in young adult males. And getting worse, the younger they are in teenagers. Just so I can translate that, Myocarditis is a medical term for inflammation of the heart. Now, the CDC is calling this reality of a large number of these events – we're now up to well over 200 events in the United States recorded – the CDC is calling us an “unbalanced” realization. Well, **You're damn right it's unbalanced! It's the CDC that's unbalanced!**

Myocarditis is never mild, as they're describing it for the general public, meaning not terribly significant. The heart muscles, the cells that make up the heart muscles **never regenerate**. If one dies, they're done. It's not like the liver or the kidney that regenerates. When a heart muscle dies, it's dead and it's never replaced. Myocarditis means a generalized inflammation of the heart muscle. So muscle cells in the heart will be dying. The number is hard to determine, obviously, because the person is still alive. But I can tell you with categorical certainty, supported by Dr. (Peter) McCullough's conversation with me this morning, that Myocarditis is totally unpredictable in terms of its long-term consequences. It may only present 20 years later, because of the reserve of the heart having been destroyed. We're talking here about cardiac arrhythmias, abnormal heartbeats. We're talking about heart failure, and so on. This is a most worrying, development. And of course, it's exactly the kind of complication that would have come out of a normal clinical trial for a vaccine, which typically takes a number of years.

Anna Brees: Why did you speak to Dr. Peter McCullough? Where do you go at the moment when you're getting all this information and reports from all over the world? You know, you said you're in a group of 12. Where do you go? Where's the expertise? How can we be sure that what you're saying is something for us to take note of?

Dr. Hodkinson: Well, Dr. McCullough has his own group in the United States that I follow very carefully. I mean, communication, he's the lead of it. And I mean, frequent communication with him. In Europe, there are [doctors for COVID ethics](#), which is headed up by Dr. Sucharit Bhakdi, and Dr. Mike Yeadon, and Dr. Michael Palmer, all with substantial reputations in their own fields. And then in South Africa, of course, there's PANDA which is headed up by Nick Hudson, with his own esteemed scientific advisory board. So yeah, I'm as plugged in as anyone can be. We're all in frequent communication with zoom calls every week. And I'm speaking, therefore, with some authority on this. I'm connected on a daily basis, with the top guys in the world.

Anna Brees: But I need to challenge you here because you want 12 or small groups, but there must be 1000s and 1000s, of doctors who completely disagree

with you? Or are there they? Is there something that's keeping them quiet? I mean, why should we listen to you? And why is this so important in your experience with these groups?

Dr. Hodkinson: Let me assure you that the statistics, when the books are written, will be exactly the other way around. I suspect, and it's impossible to confirm because of the intimidation that colleges across the world are putting on individual physicians, including me. I can assure you that **there's a vast number of physicians who do not buy into this idiocy**. Physicians who are well trained can see through this immediately as so transparently stupid. It's medical idiocy of the most grotesque degree that's going on. None of the so-called mandates, first of all, are supported by any scientific consensus whatsoever. If there had been one, we would have used it in previous flu epidemics, and we never did. You simply can't solve these things. By any control, you can't solve the spread of a pandemic, with an upper respiratory tract virus, by any known names to medical science. It's simply not possible.

Anna Brees: What reaches the public that is maybe sitting on the fence? Those are the people I want to reach. What I found interesting is when I've been listening to these doctors, they were actually recommending the vaccination in January, and February, and March and even, you know, I wasn't getting any emails whatsoever. As a journalist who has quite a high profile in this situation. I wasn't getting any stories of adverse vaccine reactions, but something shifted, I would say about six weeks ago. And so these doctors were recommending it to patients. But they've actually changed completely changed their mind and said, **"We must halt this immediately."** So it's not you're in an anti-Vax movement in any way you were promoting the vaccine. And Dr. Mike Yeadon talked about vaccinating the vulnerable, but over the last, I don't know, two months, they've pulled back and said, "Actually, no, we need to hold back now. We no longer recommend this for our patients."

Dr. Hodkinson: Dr. Tess Lawrie is the most authoritative person on this. And she's just published a devastating analysis of the whole NES (??), with the bottom line being exactly that, that this vaccination of everybody should stop immediately. Remember, please, that the predicate for this vaccine or these vaccines, was the statement that this was a medical emergency of a most sinister global scale. Well, it never was by any definition. And so if you take away that underpinning, requirement, if you take away the emergency, there was absolutely no reason for the development of a vaccine that contravened all the normal safeguards for the introduction of something on such a global scale. There's never been ever in medical history, a vaccination program on this scale involving billions of people with the most minor attention to long-term consequences. And I do want to expand on that because the story is not yet over.

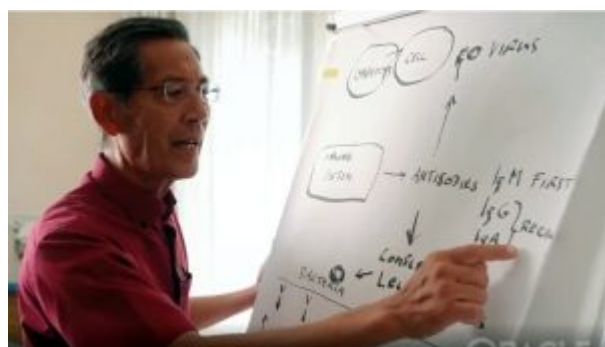
Look, last time I checked, pregnancy takes nine months. You cannot conceivably check for fertility issues, if you're only doing a clinical trial for four to six months, but never even included pregnant women other than those that got pregnant during the trial, and there were only 40 of them. **There are very serious scientific possibilities here for long-term infertility.** The studies have not been done. We do know for a fact that the placenta and the testis have a very heavy expression of the receptor for the

spike protein which is being produced in large amounts by the vaccines. We do know that. We also know that during the SARS epidemic, which was a very similar organism, there were reports of a small number, but then it was a small number of people that came down with it, obviously, it was well contained. But we do know that during the SARS epidemic, there were reports of orchitis, which is a medical term for inflammation of the testis. So what I'm saying is on the male side of fertility, there are serious scientific grounds for worry. Not proven, I'm not being a scaremonger here. I'm not a conspiracy theorist, I'm not an anti-vaxxer da de da, right, I take vaccines myself.

On the female side does equal concern, because it comes out of the obscure Pfizer submission to the Japanese regulatory authority, that the vaccine particles, the little tiny lipid nanoparticles that are part of the vaccine locate very heavily in the ovary. Now, this was a rat study. But it still showed heavy localization most unexpectedly of these vaccine particles in the ovary.

End of the first 12 minutes of the transcript. I hope this inspires you to listen to the rest of the interview if you have not done so.

[Proof Our Immune System Can Protect Us from All Variants of the Coronavirus](#)



The original title to this talk by Dr. Sucharit Bhakdi is

“Proof that puts an end to the Sars-CoV-2 Narrative” | Professor Sucharit Bhakdi

Dr. Sucharit Bhakdi is a retired Thai-German microbiologist. I consider this information important which is why I transcribed the video into

text. I hope you watch both the video and read the text to get the message.

A person in Australia wrote saying he gets an error message in the place the video above should be. If you cannot see the video on this page, please go to [https://odysee.com/\\$/embed/Dr.-Sucharit-Bhakdi-Oracle-Films-Message-HD](https://odysee.com/$/embed/Dr.-Sucharit-Bhakdi-Oracle-Films-Message-HD)

Transcript of the video

The good news today is that scientific publications have just appeared that put an end to the whole narrative. What one has been made to believe up to now is that the SARS-CoV-2 virus is so new, that our immune system will not recognize it, and therefore, when the need arises, the immune system will not respond in time with the production of antibodies, that they could save our lives. And that's why we need to be vaccinated. That's why the whole world needs to be vaccinated.

Now, scientific publications that have appeared in the last weeks, as I said, put an end to this narrative, because it turns out that the Corona SARS-CoV-2 virus and its descendants are not so different from the old normal coronaviruses that they would not be recognized by the immune system.

Now, I tried to explain this with this chart here. This is the immune system, and the immune system can make many components. One of them are the antibodies that the immune system will make when it meets a new opponent of virus. Now, depending on

whether the immune system recalls that it has seen this virus before or not, the response will be slow. The first response is always slow; takes about four weeks for the antibodies to be made, and these antibodies are called IgM, immune globulin M.

If, however, the immune system has seen this virus before, and remembers it because the immune system has a memory, then it quickly makes other antibodies, which are called IgG and IgA. These are recall antibodies.

these antibodies serve principally two functions. One function is that if it's a virus that the antibodies are supposed to combat, the antibodies can try to prevent the entry of the virus into yourself. This is what the antibodies to Corona are supposed to do. They are called protective antibodies, because they protect the cell from getting infected by the virus.

If however, the cell does get infected, then lymphocytes are there behind the scenes that will come out and recognize that the cell is infected. And these killer lymphocytes have the duty to kill the cell. So once the cell is killed, the virus factory is destroyed, the virus can't be produced any more, and you get up and go back to work.

The other function of antibodies – major function – is that if the antibodies are directed against a bacterium, or a fungal, then these antibodies will bind to the bacteria. And that will cause another arm of the immune system to be activated. This is

so-called complement, because it complements the action of the antibodies and leukocytes.

Leukocytes are the cells that eat. These are cells that are in your blood. And they're circulating all the time. And waiting for these bacteria to come to your blood to be coated with the antibodies and they will come and eat them. And thus are you protected by your antibodies against bacteria.

So we have actually two major arms of the immune system, one, the lymphocytes that are directed against viruses and virus infected cells, and the others are leukocytes that are directed against bacteria. It's like the Navy and the Air Force, Air Force, Navy, and both are really deadly. They take care of all the viruses that you are confronted with and all the bacteria normally.

So the question is now, is our immune system really blind to the new so called new SARS-CoV-2 virus?

Now this can be answered very simply. And for that, what one has to do is, one has to inject this virus or the virus gene into the body and see how long the immune system takes to make the antibodies against this gene. And this was done by three independent American research groups in the last weeks and published, so everyone can go and have a look at these papers. And everyone should look at the papers because two questions arise.

First, was the antibody response, fast or slow? This would be fast. And this would be slow. 30 days, 10 days or five days? And if it were fast,

did the antibodies carry the correct label IgM, IgA or the wrong label?

So, what do you think? I'm going to ask you, the Americans measured in the blood, the appearance of the antibodies every day. The people who are telling you that you should get vaccinated are going to say, "of course, they were IgM antibodies because this was blind to them. But the fact is the opposite. All groups found out that everyone who had been vaccinated responded with IgG, and IgA antibodies within days after the vaccination, which is absolute proof that it is a recall response to something that the immune system has recognized.

You may ask me, "How can this be?" The answer is very simple. Look, this is the hand, the grasping hand of the virus, this is the spike and the spike is there to grasp the handle of the door to yourself to get in. The antibody comes and forces itself into the jaw, like the crocodile, the mouth is open, it stops the crocodile from closing his mouth. Of course, this is not completely correct. But it will do as a picture for you.

All right. Now, this key that enters into the mouth, of course, it's not a perfect fit. So you could change a finger or two, and it will still go in. And this is the difference between coronaviruses and influenza viruses. influenza are flu viruses, the real flu, alright, which has really caused pandemics because flu viruses can completely change the whole hand so that the hand looks like this suddenly. Okay. And then your

antibodies don't fit into that. But this is something that the Coronavirus can never do. They can't, and so they can only change the shape of the fingers. And that's not enough to fool the immune system. It's that simple. And this applies to all the variants. So forget it, if someone tells you that you are not immune against the variants.

The fact is, of course, that the immune system doesn't splurge. It keeps its antibodies in a locker, just like you have money in the bank, you don't go around throwing your money out of your pocket, you get the money out of the bank when you need it. And that's what happens to the immune system. And wonderfully enough, another publication coming from Denmark, showed that true infections with the SARS-CoV-2 do exactly the same, meaning that everyone who has had an infection, even if he's asymptomatic, you know no symptoms, if the virus just gets into your throat, multiplies a bit and gets thrown out again. But even then, the immune system responds by making IgG and IgA antibodies, meaning that you have the money in the bank.

This means dear fellow citizens, that the herd immunity is already present, but kept under lock and key like a treasure. But it can be mobilized at any time you want. This is like a dog and his master. The dog, this is the immune system. The master in this case would be the virus. So the moment the virus comes near to the house, gets back, the dog senses that the viruses is coming, begins to wagging his tail, begins barking,

throwing out the antibodies to say hello to the master.

So you see, this virus always first enters through the front door goes into your throat and it takes days to multiply and if it multiplies in your throat, it doesn't matter. It only kills you if it gets to your lungs.

But now we know that this is enough time for you and me or anyone, because the Danes showed that over 99% of all people running around, have this treasure, they have the treasure, and they could mobilize the IgG and IgA antibodies, even when the virus was only in the throat. Now, isn't this a piece of wonderful news? I think it causes us to realize, it causes us to realize that we can cast the dread of this pandemic away, and return to a wonderful world, return to our friends, our beloved ones, join hands with them, and rejoice. The pandemic is not existent as a mortally dangerous new disease.

Now, the second piece of news I have for you is that this will not only cause vaccination to be unnecessary, but also says if the vaccination carries any danger whatsoever, it must be stopped because there is no benefit. And if it only contains danger, then it is the duty of the doctors and the authorities not to undertake vaccination.

Now, let me tell you something very, very alarming. So alarming that this piece of news is just as important as the good piece of news. And this comes

also from the publications that have just appeared. So we'll go back to this chart here. And I told you, in the vaccinated, they found that the IgA, and IgA antibodies came immediately. Then they waited for another two weeks or three weeks. And then they gave the people a second shot. What did you see, they saw that the IgG and IgA levels immediately continued to rise, which is what a booster is supposed to do.

However, now, listen very carefully, look at this. This is a vessel wall, this is your blood. It is now known that the genes that are injected into your body will enter the bloodstream. And it is absolutely certain now that these genes are going to enter the cells that line the vessel wall. Because these are the cells that they contact.

Now, what happens when the cells that line the vessel walls begin to produce these spikes? The spikes will then be produced by the cell and protrude from the cell surface into the bloodstream. Alright, now, these cells going to be recognized by your lymphocytes that have been given to you by the Dear Lord to kill those cells that are making the virus or the virus protein, any virus protein. So, these lymphocytes are going to mount the attack on your vessel walls.

This is the first way towards clot formation that as we know is happening all over the place all over the world. Now at the beginning after the first vaccination, this danger is bad and is already terrible in itself if your killer lymphocytes start

trying to kill you. But at that time, during the first seven to 10 days, they are still no antibodies. They are not yet any antibodies. However, after three or four weeks, there are masses of antibodies all over the place in your blood. And if you dare to repeat this performance and start to put those spikes out into your blood, God help you because now not only the killer lymphocytes will detect antibodies and complement, and leukocytes are also going to attack thinking that your cells that are producing these spikes are bacteria and they are going to try to eat your vessel wall cells.

Now, this attack of the Air Force and the Navy on a single cell target has never been seen before. There is no situation because either you're combating a virus, or you're combating the bacteria; mixed infections that go through the body are actually virtually unknown. So we have the unique situation that has been created by the vaccination.

That is, in a way, extremely interesting. Because no one knows what the outcome will be. However, the vision is so horrible, and so awful and terrifying, that I, myself, don't really want to know the answer. And I don't want this answer to become known.

I want you to decide to not take the second shot. Not only the second shot, but any shot thereafter is going to place your life in danger. That is what I am convinced of now, especially because of the

publications that have just appeared. So I think that was the most important thing I have to say today. And I hope people will sit down, look at these papers, talk about them. And I hope that my colleagues, physicians, and scientists will do the same and get together to see whether this may have a grain of truth. Because if it does, the consequences are absolutely endless or the consequences are very simple. We just have to stop everything now.

(End of transcript.)

The transcript was proofread by Dr. John Gideon Hartnett. Please see his website:

<https://biblescienceforum.com/>

**Science Confirms the
Truth of the Bible**

Science Confirms the Bible (Bear in mind that the Bible was written 2,000–3,000 years ago)		
THE BIBLE	SCIENCE NOW	SCIENCE THEN
The earth is a sphere (Isaiah 40:22).	The earth is a sphere.	The earth was flat disk.
Incalculable number of stars (Job 38:22).	Incalculable number of stars.	Only 1,200 stars.
Free flow of earth in space (Job 28:7).	Free flow of earth in space.	Earth sat on a large animal.
Creation made of invisible elements (Hebrews 11:3).	Creation made of invisible elements (atoms).	Science was ignorant on the subject.
Each star is different (1 Corinthians 15:42).	Each star is different.	All stars were the same.
Light moves (Job 38:19,20).	Light moves.	Light was fixed in place.
Air has weight (Job 28:25).	Air has weight.	Air was weightless.
Winds blow in cyclones (Ezekiel 1:1).	Winds blow in cyclones.	Winds blow straight.
Blood is the source of life and health (Leviticus 17:14).	Blood is the source of life and health.	Sick people must be bled.
Ocean floor contains deep valleys and mountains (2 Samuel 22:16; Jonah 2:6).	Ocean floor contains deep valleys and mountains.	The ocean floor was flat.
Oceans contain springs (Job 38:18).	Oceans contain springs.	Oceans fed only by rivers and rains.
When dealing with diseases, hands should be washed under running water (Leviticus 15:10).	When dealing with diseases, hands should be washed under running water.	Hands washed in still water.

True scientific discoveries confirm the truth of the Bible. The very first verse in the Bible, Genesis chapter one verse one, has a profound meaning in physics.

Genesis 1:1 ¶In the beginning God created the heaven and the earth.

Einstein's *space-time continuum* verifies Genesis 1:1. Before “the beginning” there was no time, there was no heaven – space – and there was no earth – matter. Time, space, and matter all must exist simultaneously or none of them can exist.

Physicist Dr. John Gideon Hartnett adds to the preceding paragraph:

At first glance, this seems to give credibility to the Big Bang theory that the universe had a beginning in time and was ‘created’ out of ‘nothing’. Those are in scare quotes because there is no creator in the big bang universe, and prior to it existing there was nothing. But nothing does

not spontaneously create a universe unless you are a believer in Steven Hawking's wishful thinking.

See

<https://biblescienceforum.com/2014/07/15/the-singularity-a-dark-beginning/>

Without space and time, matter cannot exist, but neither can a universe exist without a creator and the Bible tells us who He is. The Creator is a God whom we can know personally. He is the great I AM, who was always there, the uncreated First Cause, and we can trust what He says, because He never lies (Numbers 23:19, Titus 1:2). His name YHVH from Hebrew means the 'self-existent One'. He is not created but He created all things."

Dr. Henry M. Morris, Ph.D., says,

"In the beginning God created the heaven and the earth." Time itself, according to this most profound (yet simple) of all declarations, had a beginning. Space (i.e., "the heaven") and matter ("the earth") began simultaneously with time. Before that beginning, there was nothing—that is, nothing except God! (Quoted from

<https://www.icr.org/article/eternal-future-time-space-matter/>)

The Bible confirms the existence of harmful bacteria

The laws of sanitation in the Bible were written

some 3000 years before Louis Pasteur in the 19th century linked germs with infectious disease!

There are numerous rules for sanitation and quarantine found in the Old Testament, and especially in the Book of Leviticus that God gave for the benefit of His children to keep them free from contagious diseases. The scientific community only much later in time discovered the importance of these health rules which includes washing one's body in *running water*!

Leviticus 15:13 And when he that hath an issue is cleansed of his issue; then he shall number to himself seven days for his cleansing, and wash his clothes, and bathe his flesh in running water, and shall be clean.

“Soap and water don’t kill germs; they work by mechanically removing them from your hands. Running water by itself does a pretty good job of germ removal...” (Quoted from https://www.health.harvard.edu/newsletter_article/The_handiwork_of_good_health)

You have probably heard the proverb, “Cleanliness is next to godliness.” The phrase “running water” is found exactly seven times in the King James translation of the Bible! The number seven is God’s special number, for it signifies spiritual perfection and completion. The Bible mentions it more than any other number.

Leviticus 14:5 And the priest shall command that one of the birds be killed in an earthen vessel over running water:

Leviticus 14:6 As for the living bird, he shall take it, and the cedar wood, and the scarlet, and the hyssop, and shall dip them and the living bird in the blood of the bird that was killed over the running water:

Leviticus 14:50 And he shall kill the one of the birds in an earthen vessel over running water:

Leviticus 14:51 And he shall take the cedar wood, and the hyssop, and the scarlet, and the living bird, and dip them in the blood of the slain bird, and in the running water, and sprinkle the house seven times:

Leviticus 14:52 And he shall cleanse the house with the blood of the bird, and with the running water, and with the living bird, and with the cedar wood, and with the hyssop, and with the scarlet:

Leviticus 15:13 And when he that hath an issue is cleansed of his issue; then he shall number to himself seven days for his cleansing, and wash his clothes, and bathe his flesh in running water, and shall be clean.

Numbers 19:17 And for an unclean person they shall take of the ashes of the burnt heifer of purification for sin, and running water shall be put thereto in a vessel:

More Scriptures about sanitation

Leviticus 11:31 These are unclean to you among all that creep: whosoever doth touch them, when they be dead, shall be unclean until the even.

32 And upon whatsoever any of them, when they are dead, doth fall, it shall be unclean; whether it be any vessel of wood, or raiment, or skin, or sack, whatsoever vessel it be, wherein any work is done, it must be put into water, and it shall be unclean until the even; so it shall be cleansed.

33 And every earthen vessel, whereinto any of them falleth, whatsoever is in it shall be unclean; and ye shall break it.

34 Of all meat which may be eaten, that on which such water cometh shall be unclean: and all drink that may be drunk in every such vessel shall be unclean.

35 And every thing whereupon any part of their carcase falleth shall be unclean; whether it be oven, or ranges for pots, they shall be broken down: for they are unclean, and shall be unclean unto you.

36 Nevertheless a fountain or pit, wherein there is plenty of water, shall be clean: but that which toucheth their carcase shall be unclean.

The words “unclean” and “clean” indicate to me either the presence of germs and harmful bacteria or the absence of them. The microscope had not yet been invented in the time Moses led the children of Israel out of Egypt. The people of course could not see microbes. They didn’t have the “germ theory” in their education. They just obeyed God’s commands to Moses not knowing the scientific reasons why they should.

Medieval Europe was plagued with diphtheria, measles, tuberculosis, leprosy, typhus, anthrax,

smallpox, salmonella and other maladies. The worst of such diseases was of course the Black Death.

Leviticus 15:1 ¶And the LORD spake unto Moses and to Aaron, saying,

2 Speak unto the children of Israel, and say unto them, When any man hath a running issue (a discharge such as puss) out of his flesh, because of his issue he is unclean.

3 And this shall be his uncleanness in his issue: whether his flesh run with his issue, or his flesh be stopped from his issue, it is his uncleanness.

4 Every bed, whereon he lieth that hath the issue, is unclean: and every thing, whereon he sitteth, shall be unclean.

5 And whosoever toucheth his bed shall wash his clothes, and bathe himself in water, and be unclean until the even.

6 And he that sitteth on any thing whereon he sat that hath the issue shall wash his clothes, and bathe himself in water, and be unclean until the even.

7 And he that toucheth the flesh of him that hath the issue shall wash his clothes, and bathe himself in water, and be unclean until the even.

8 And if he that hath the issue spit upon him that is clean; then he shall wash his clothes, and bathe himself in water, and be unclean until the even.

9 And what saddle soever he rideth upon that hath the issue shall be unclean.

10 And whosoever toucheth any thing that was under him shall be unclean until the even: and he that beareth any of those things shall wash his clothes, and bathe himself in water, and be unclean until

the even.

11 And whomsoever he toucheth that hath the issue, and hath not rinsed his hands in water, he shall wash his clothes, and bathe himself in water, and be unclean until the even.

12 And the vessel of earth, that he toucheth which hath the issue, shall be broken: and every vessel of wood shall be rinsed in water.

13 And when he that hath an issue is cleansed of his issue; then he shall number to himself seven days for his cleansing, and wash his clothes, and bathe his flesh in running water, and shall be clean.

Does modern science tell us it's important for good health to keep our bodies and hands clean? You know it does. And why? To remove the presence of harmful bacteria, that's why.

Did you know that in the early part of the 19th century, 'Wash your hands' was once controversial medical advice?

Regarding the hygiene principle and germs, Ignaz Philipp Semmelweis (1818 –1865), who was a Hungarian physician, discovered that 10%–35% Of the mothers that came to the medical institutions suffered fatalities. Puerperal fever was common in mid-19th-century hospitals and was fatal. Doctors in those clinics had three times the mortality of midwives' wards. Sadly, nobody knew why. But after close observation, Semmelweis

discovered that the incidence of puerperal fever or “childbed fever” could be greatly reduced by the use of hand disinfection in obstetrical clinics.

Semmelweis proposed the practice of washing hands with chlorinated lime solutions in 1847 while working in Vienna General Hospital’s First Obstetrical Clinic. He ordered physicians to wash their hands thoroughly after every examination. In three months, the death rate fell from 18% to 1%. These were astounding results. And he was called the “savior of mothers.” He published a book of his findings in Etiology, Concept and Prophylaxis of Childbed Fever. Despite various publications of his successful results, Semmelweis’s suggestions were not accepted by the medical community of his time.

Why was Semmelweis research rejected? Because germs were virtually a foreign concept for the Europeans in the middle-19th-century. Later, Semmelweis’s publications earned widespread acceptance only years after his death, when Louis Pasteur confirmed the “germ theory” and Joseph Lister, acting on the French microbiologist’s research, practiced and operated on patients while using hygienic methods with great results.

Had the medical community paid attention to God’s instructions that were given 3000 years

before, many lives would have been saved. The Lord gave the Israelites hygienic principles against the contamination of germs and taught the necessity to quarantine the sick (Numbers 19:11-12). And the book of Leviticus lists a host of diseases and ways where a person would come in contact with germs (Leviticus 13:46).

Germs were no new discovery in 1847. And for this fact, Roderick McGrew testified in the Encyclopedia of Medical History: "The idea of contagion was foreign to the classic medical tradition and found no place in the voluminous Hippocratic writings. The Old Testament, however, is a rich source for contagionist sentiment, especially in regard to leprosy and venereal disease" (1985, pp. 77-78). – (from <https://bibleask.org/did-the-bible-teach-the-germs-theory/>)

The practice of the quarantine of people with infectious diseases is in the Bible

Numbers 12:10 ¶And the cloud departed from off the tabernacle; and, behold, Miriam became leprous, white as snow: and Aaron looked upon Miriam, and, behold, she was leprous.

11 And Aaron said unto Moses, Alas, my lord, I beseech thee, lay not the sin upon us, wherein we have done foolishly, and wherein we have sinned.

12 Let her not be as one dead, of whom the flesh

is half consumed when he cometh out of his mother's womb.

13 And Moses cried unto the LORD, saying, Heal her now, O God, I beseech thee.

14 And the LORD said unto Moses, If her father had but spit in her face, should she not be ashamed seven days? let her be shut out from the camp seven days, and after that let her be received in again.

15 And Miriam was shut out from the camp seven days: and the people journeyed not till Miriam was brought in again.

Other than the “germ theory” we also have the “terrain theory”

Diseases are results of our internal environment and its ability to maintain homeostasis against outside threats. Terrain theory believes if an individual maintains a healthy terrain, it can handle outside invaders or threats which cause diseases.

When terrain is weak, it favors the microorganisms. Hence, health depends on the quality of an individuals' terrain. (Quoted from

<https://drkarenwolfe.org/germ-theory-or-terrain-theory-of-disease/>)

Are these two theories of the cause of disease at odds with each other? I personally do not think so. In my opinion, both are true. We are supposed to wash our hands before we eat so we do not transfer

harmful bacteria into our mouths, and we try as much as possible to live in an environment free of toxic chemicals. We also are supposed to maintain a strong immune system by eating a nutritious diet, daily exercise, taking a good night's sleep and rest when our bodies tell us it's tired, and having a good mental attitude toward life in general.

People who have a relationship with God through the Lord Jesus Christ are the most likely people to have such a good positive attitude. They are less likely to worry about the future or experience stress which is harmful to health. If you are searching for such a relationship with your Creator God, please see [The Lover of all Lovers.](#)

Messenger RNA Vaccines May Cause Damage to the Cardiovascular System



Transcript of Dr. Bridle interview on *On Point* with Alex Pierson

Alex Pierson: Talking about a lot of science these days! It's coming out as fast and furious. And a lot of people asking a lot of good questions, you know, the vaccines, are they safe for kids? Certainly, there's a big push to get kids as young as 12 the shot as soon as possible, but, but everyone's confident about it, even if you're not an anti-vaxxer, there are a lot of parents who are kind of nervous about putting something into their kids.

And then I read that there have been several dozen cases of heart problems in teens and young adults, which Israel is now looking into. And what they're looking into which they'll release the results of are why mostly males, not all, but around 22 years of age and younger, are getting heart inflammation. So one to four days after getting a shot, they get shortness of breath, fatigue, and some very specific chest pain. It's mild, so no one's gotten really sick or died. But you want to know what you don't know if you're going to put something into your kids.

Let us bring in Dr. Byram Bridle. He's an associate professor of viral immunology at the University of Guelph (Ontario, Canada). Doctor, you've been very, you know, very open on this whole issue. And you know, you're not an anti-vaxxer by any stretch, but what do you think about this inflammation in the heart, and is it an actual threat?

Dr. Bridle: Yeah, thanks for having me on, Alex. Yeah, as you said, I'm very much pro-vaccine, but always making sure that the science is done properly, and that we follow the science carefully before going into public rollout of vaccines. I hope you'll let me run with this a little bit, Alex. I'll forewarn you and your listeners that the story I'm about to tell is a bit of a scary one. This is cutting-edge science.

There's a couple of key pieces of scientific information that I have become privy to just within the past few days that has made the final link. So we understand now, myself and some key international collaborators, we understand exactly why these problems are happening. And many others associate these vaccines. And the story is a bit of a scary one. So just to brace you for this, but I'm going to walk you through this. The science that I'm gonna be talking about. I don't have the time here to describe exactly the scientific data. But let me assure you that everything that I'm stating here that I'm gonna state right now is completely backed up by peer-reviewed scientific publications, and well-known and well-respected scientific journals.

I have all of this information in hand, I'm in the process of mildly trying to put it all into a document that I can hopefully circulate widely. So your listeners are going to be the first to hear the public release of this conclusion, and I can vouch for the science. So this is what it is.

The SARS-coronavirus 2 has a spike protein on its surface. That spike protein is what it allows it to infect our bodies. That is why we have been using the spike protein in our vaccines. The vaccines we're using get our cells in our bodies to manufacture that protein. If we can mount an immune response against that protein, in theory, we can prevent this virus from infecting the body. That's the theory behind the vaccine. However, when studying the disease, severe COVID-19, everything that you've just described heart problems, lots of problems with the cardiovascular system, bleeding and clotting is all associated with severe COVID-19.

And looking and doing that research, what has been discovered by the scientific community is the spike protein on its own is almost entirely responsible for the damage to the cardiovascular system if it gets into circulation. Indeed, if you inject the purified spike protein into the blood of research animals, they get all kinds of damage to the cardiovascular system, and it can cross the blood-brain barrier and cause damage to the brain.

Now at first glance, that doesn't seem too concerning because we're injecting these vaccines into the shoulder muscle. The assumption all up until now has been that these vaccines behave like all of our traditional vaccines that they don't go anywhere other than the injection site, so they stay in our shoulder. Some of the protein will go to the local draining lymph node in order to activate the immune system. However, this is where

the cutting edge science has come in this and this is where it gets scary.

Through a request for information from the Japanese regulatory agency, myself and several international collaborators have been able to get access to what's called a bio-distribution study. It's the first time ever that scientists have been privy to seeing where these messenger RNA vaccines go after vaccination. In other words, is it a safe assumption that it stays in the shoulder muscle?

The short answer is absolutely not. It's very disconcerting.

The spike protein gets into the blood, circulates through the blood in individuals, over several days post-vaccination. It accumulates once it gets to the blood and accumulates in a number of tissues such as the spleen, the bone marrow, the liver, the adrenal glands. One particular concern for me is it accumulates at quite high concentrations in the ovaries. And, and then also a publication that was just accepted for a scientific paper just accepted for publication that backs this up, looked at 13 young healthcare workers that had received the Moderna vaccine which is the other messenger-RNA-based vaccine we have in Canada. And they confirm this They found the spike protein in circulation in the blood of 11 of those 13 health care workers that had received the vaccine.

What this means is, so we have known for a long time that the spike protein is a pathogenic

protein, it is a toxin, it can cause damage in our body if it gets into circulation. Now, we have clear cut evidence that the vaccines that make our bodies, our muscles or the cells in our deltoid muscles, manufacture this protein, that the vaccine itself, plus the protein gets into blood circulation. When in circulation, the spike protein can bind to the receptors that are on our platelets and the cells that line our blood vessels.

When that happens, it can do one of two things. It can either cause platelets to clump, and that can lead to clotting. That's exactly why we've been seeing clotting disorders associated with these vaccines, it can also lead to bleeding. And of course, the heart involved. It's part of a key part of the cardiovascular system. That's why we're seeing heart problems.

The protein can also cross the blood-brain barrier and cause neurological damage. That's why also in the fatal cases of blood clots many times is seen in the brain. And also of concern is there's also evidence of a study – this has not yet been accepted for publication yet, this one – they were trying to show that the antibodies from the vaccine get transferred through breast milk. And the idea was this may be a good thing because it would prefer some passive protection to babies. However, what they found inadvertently was that the vaccines, the messenger RNA vaccines, actually get transferred through the breast milk. So the delivering the vaccine vector itself into infants that are breastfeeding. Also what this note we know

spike protein gets into circulation, any proteins in the blood will get concentrated in breast milk. Looking into the adverse event database in the United States, we have found evidence of suckling infants experiencing bleeding disorders in the gastrointestinal tract.

Alex Pierson: So okay, let me pause you there. There are only about 45 seconds left.

Dr. Bridle: Sure, I'll wrap it up this message.

So this has implications for blood donation. Right now Canadian Blood Services are saying that people who have been vaccinated can donate. We don't want the transfer of these pathogenic spike proteins to fragile patients who were being transfused with that blood. This has implications for infants that are suckling. And this has serious implications for people for whom SARS Coronavirus 2 is not a high-risk pathogen, and that includes all of our children.

In short, the conclusion is, we made a big mistake, we didn't realize it until now, we thought the spike protein was a great target antigen, we never knew the spike protein itself was a toxin and was a pathogenic protein. So by vaccinating people, we are inadvertently inoculating them with a toxin. And some people this gets into circulation. And when that happens in some people, they can cause damage, especially in the cardiovascular system. And I have many other, I don't have time, but many other legitimate questions about the long term

safety, therefore, of this vaccine, for example, with it accumulating in the ovaries, one of my questions is, will we be rendering young people infertile, some of them infertile? So I'll stop there. I know it's heavy heading...

Alex Pierson: I'm up against the clock. I need like an hour when I talk to you because you have so much information and of course your one opinion of many, but you know, it's interesting because you have a different look at it. And certainly, the time will tell on this but we'll have you on again because I always get an interesting and different perspective from you. Doctor, thank you.

Dr. Bridle: It was my pleasure. Take care.

COVID-19 mRNA Injections
are Legally Not Vaccines!
– By Dr. David E. Martin



This is a talk by David E. Martin Ph.D. He is the developer of several innovation-based quantitative indices of public equities and the founder of the Purple Bridge Funds and M-CAM International. He has worked closely with the United States Congress and numerous trade and financial regulatory agencies in the United States. Dr. Martin is also a Batten Fellow at the University of Virginia's Darden Graduate School of Business Administration. (Quoted from

<https://z3news.com/w/david-martin-presents-evidence-corona-virus-manmade/>)

Transcript of David Martin's talk

(Dr. Martin:) January 11, 2021, at least got the date, right? We're not in December anymore.

Today, hey, by the way, thanks, everybody, for the last six weeks that that series has been shared a lot, we've gotten a lot of great feedback. So thank you, everybody, who has been a huge part of our six-week series on the integral accounting view of what's next. That's been a really wonderful

experience. Today, we're diving back into some really important stuff. And there are a number of you who have been asking questions about the status of legal proceedings, and so forth. And, and today, I'm going to give give you a little window into a couple of the approaches that are going on in various lawsuits. We're not commenting specifically on lawsuits right now that are active and pending simply because that's just not an appropriate thing to do. Other than to say, there are active and pending cases.

But today is a really weird one, people. And I have to say, you know, back in the early 1990s, I was doing clinical trials at the University of Virginia medical school. And I happened to be working in a very controversial medical technology area called electromagnetic field therapy or EMF. And historically, I mean, if you go back for decades, there's been all kinds of disputes around whether or not that technology works or not.

And so we were doing a multi-center clinical trial for a Japanese company. And I became very aware of 15 US Code Section 41, which is part of the Federal Trade Commission Act, that specifically has to do with advertising that a product or service can prevent, treat or cure human disease unless you possess competent, reliable scientific evidence, including when appropriate, well-controlled human clinical studies substantiating that the claims are true at the time they're made. So there's a rule under the Federal Trade Commission Act, and it has been used to shut down alternative medicine for

years like you know, people who have been naturopaths, people who have been chiropractors, people who have been in any of the what are considered to be kind of alternative medical spaces have become very familiar with this, because it's the way the Federal Trade Commission shuts people down. confiscates materials, confiscates businesses, does some really egregious acts. And it occurred to me that no one seems to be talking about this when it comes to what is being promoted in the current regime!

And so, I thought, we're going to take a look into 15 US Code Section 41 today. And the reason for this is twofold. Number one is because it's important. Number two, is because I think that we need to call out a very important thing. So there's a part of the Federal Trade Commission Act, which also has to do with what's called deceptive labeling practices. It's when you use terms or phrases or words where you know that you are using them with an intent to deceive, deceptive medical practices. And so today, we're going to take apart a couple of the deceptive medical practices, and suggest that if any of you, and this is now a specific challenge, people, listen, we've been doing 39 of these videos.

Somebody who's watching this video knows an elected official, somebody watching this video knows a prosecutor, whether that's a US Attorney, whether that's an Attorney General in a state, somebody in the viewing of this video knows somebody who needs to listen to this video. And I'm going to really

encourage you to share this, because it's actually super important. Listen, if this law can be applied to shut down people of goodwill, who are trying to help other people, it certainly should be equally applied when we know deceptive medical practices are being done in the name of public health. And we're going to get to that.

But Kim, let's start off with both of us worked in hospitals. Both of us worked in medical centers. As a condition of employment, you had to have shots, right?

(Kim:) Yeah, definitely had to have shots that have hep B and a few others. That was a bit way back in the day. But yeah, we had to have, all of us had to have as to be a nurse. You had to have shots done.

(Dr. Martin:) Yeah, I mean, at the Medical Center at the University of Virginia, you know, hep B was a standard. If you didn't have hep B, you know, you had no patient interaction. How about when you were in your own business?

(Kim:) No, not when I was running my own business, because I wasn't employed by a hospital. I did my own assessments of my own group of nurses. And we didn't have to because I was the boss.

(Dr. Martin:) Yeah. But there are people. I mean, let's be really clear. There are people for whom vaccines and various medical measures are a requirement for employment. And that's a really interesting problem where you get forced into doing something, and that made me think. Somethings

troubled me. And the thing that's troubled me is that both Pfizer and Moderna have been promoting what they call a "vaccine".

Now, for those of you who don't really think about it, you have thought about it, because the public thinks that when you say vaccine, one of at least two things is happening. First is, whatever you're getting is going to keep you from being infected by some sort of pathogen. So that's assumption number one. Assumption number two, is that somehow or another, if you get that vaccine, somehow you're doing your public health bit to make sure that you don't transmit it to other people, right? Am I going out on a limb here? The word "vaccine" kind of means that.

And let's let's go back in history a little bit, shall we? Let's go back to 1905, to the very, very, very, very, very famous Jacobson case in Massachusetts (Jacobson v. Massachusetts Ref: https://en.wikipedia.org/wiki/Jacobson_v._Massachusetts), the Supreme Court 1905. And I'm going to read the quote, because I think it's important,

"This Court has more than once recognized as a fundamental principle, that persons and property are subjected to all kinds of restraints and burdens in order to secure the general comfort, health, and prosperity of a state."

So what the Supreme Court and Jacobson said was that the police powers the public health powers were legitimate if they secured the general

comfort, health and prosperity of the state. That implies that the individual benefit is superseded by a collective benefit, that somehow or another, the individual is not the point when it comes to public health laws, it's about the community, which would then suggest that to meet a vaccine public health standard, and quite frankly, a vaccine public health definition, something about either you are immune from getting a pathogen or and potentially and, you are not going to transmit the pathogen, must be part of what lives inside that definition. That couldn't be more straightforward than the Supreme Court of the United States in 1905, which, by the way, happens to be a decision that I have yet to even meet many attorneys who have bothered reading it. They talk about vaccine litigation. But I haven't heard many that can actually quote the majority opinion out of Jacobson, which is a very dangerous problem that we have.

But here's where it gets more interesting. So when Moderna was started, and if you go back and look at their SEC filings, and we've gone through all their SEC filings, they make a point of saying that their technology is a gene therapy technology, gene therapy technology, you'll notice that they don't say vaccination, they actually say gene therapy technology. And it was set up to be a cancer treatment. So this is gene therapy, chemotherapy.

Now, let's just stop for a minute. Let's just ask the question. If Anthony Fauci got up and said to everybody, "Hey, we want you to take chemotherapy

for the disease that you may or may not ever have.” There wouldn’t be a single person raising their hand, the prophylactic chemotherapy, you wouldn’t be doing it. You know why you wouldn’t be doing it? Because it’s a dumb idea, that’s why you wouldn’t be doing it. And, States wouldn’t be able to mandate it and employers wouldn’t be able to mandate it, no employer would be able to mandate a chemotherapy for a disease that you don’t have. That would not be a legal thing to do. But they called their technology, gene therapy technology. They made a big point of saying that this was not investigational new drugs, this was gene therapy technology. This belonged in the Center for Biologics, potentially even the CDRH, the Center for Device and Radiological Health, because let’s think about what they actually do. And by the way, this is super important. All the references are going to be in this video on the YouTube channel. And I’m going to put a bunch of the references actually, in the comments section on Facebook Live so that you can go see this yourself.

But what they’re doing is they’re putting together a synthetic fragment of nucleic acid, it’s not mRNA. It’s not natural. It’s not even a natural component of a fragment. It’s a synthetic fragment, it’s a technology embedded within a fat carrier, a peg carrier, and that is being introduced into the cell not to induce a immunity from infection with a SARS COVID virus, and it’s not to block transmission of it. It’s actually to lessen symptoms associated with the S1 spike protein, not even the virus itself. So it gets better and or

worse, depending on your point of view. The fact of the matter is this thing is actually not a vaccination.

Now, why would I say it's not a vaccination? People go, "Dave? Why would you say it's not a vaccination?" Well, let's look at the legal standard for what a vaccination is. And let's start with the Center for Disease Control's own definitions, why not start with the people who run the racket?

Two important operative definitions: Immunity is protection from an infectious disease, protection from an infectious disease. If you are immune to a disease, you can be exposed to it without becoming infected. Now, by definition, neither Pfizer nor Moderna even claims that to be the case. That's straight-up, not their definition. So immunity, you can be exposed to a pathogen infectious disease without becoming infected. Not only is that not the case, we're going to get to this in a minute, but in their clinical trials, they specifically say they're not going to test that. So stay with me on that.

And then the CDC says a vaccine is a product that stimulates a person's immune system to produce immunity, see the definition above, to a specific disease protecting the person from that disease. And then it says vaccines are usually administered through needle injections, but also can be administered by mouth and sprayed in the nose. Now, that's the CDC.

So let's just stipulate for the sake of this conversation, that the CDC has its own definition, and what Pfizer and Moderna are doing, do not match.

And by the way, you should be thinking somewhere in this video, hold on a second. If this isn't a vaccine, why are they calling it a vaccine? That's a question. You should be thinking in your head because we're going to come to that in a second.

But I thought, okay, CDC, CDC is not the law. CDC is an expression of an agency, empowered by the law, but it's actually not the law. So why don't we actually look at the laws where vaccine has been defined? And it turns out, that's a much harder exercise than you would think. Because vaccine The term is actually not a legally defined term in an enormous number of statutes that govern vaccines, which is actually a really interesting thing. But let's look at some examples. And I just pulled a couple examples from the Iowa code. Vaccine, and I'm quoting means a specially prepared antigen administered to a person for the purpose of providing immunity.

Immunity once again, the operative definition, which is to say that when exposed to a pathogen, you are not susceptible. That's the Iowa code. How about Washington State? You know, the State that has been absolutely tyrannical and all of its interventions around Coronavirus, allegedly the birthplace of the US experience with Coronavirus, State of Washington. Vaccine legally defined term now, this is in the statute, means a preparation of

a killed or attenuated living microorganism or fraction thereof, just Just stop right there, vaccine means a preparation of a killed or attenuated living microorganism. Stop right there. And mRNA synthetically developed by Moderna and Pfizer do not meet this definition. b0r a fraction thereof, it's not a fraction of a living thing or a killed thing, because it's neither living nor killed. They are explicitly synthetic gene therapies. They are not vaccines as defined by the statute that upon administration stimulates immunity. There we have it, again, that stimulates immunity, meaning that you do not get a thing when exposed to that pathogen, right? That protects us against disease and is approved by the Federal Food and Drug Administration and safe and effective. Now, that's the State of Washington statute. And by the way across the board, that's the definition of vaccine, which means immunity is a defined term vaccine is a defined term.

But here comes a really big problem. The big problem is that if we look at the clinical trials that were approved for what was called the SARS-CoV2 COVID-19 vaccine program under the operation warp speed, listen very carefully to what the primary endpoint is.

The primary endpoint is the prevention of symptomatic COVID-19 disease. Now, let's pause and unpack that starting with COVID 19 disease.

As you all know, if you've been watching this show at all, you know that in February, the World Health

Organization, and the CDC and the Department of Health and Human Services made a very clear distinction. They wanted to make sure that COVID-19, which was a series of clinical symptoms, which included things like fever, muscle pain, aches, loss of smell, certain radiologic findings in the lungs, a whole host of things, there's a laundry list of things that all got subsumed within this thing called COVID-19, which by the way, has been now redefined as to pick which is pneumonia, influenza COVID, as a combined set of things so that we can catch more people allegedly dying of this thing. But COVID-19 disease is actually not a disease, it is a set of symptoms.

And they were very clear on this, by the way. They tried to make a causal statement, they tried to say sorry, COV2 causes COVID-19. But then there was a tiny problem. Most of the people who tested positive using the RT PCR method had no clinical presentation, which means you can't make a causal statement. You can't say the virus causes a disease, because unfortunately, most people with a positive PCR test for a fragment of what was called SARS-CoV-2, didn't have any problem. In fact, well over 80% had no problem. Which then leads us to the question of, okay, so we can't say it's causal, but it's more problematic than this, the primary endpoint for the vaccine trial was actually not a vaccine endpoint.

A vaccine endpoint has to do with immunity. And a vaccine endpoint has to do with transmissibility. And neither of those were measured, and it gets

worse.

And I'm quoting right now straight out of Moderna's own statement. "Key secondary endpoints include prevention of severe COVID-19 disease, and prevention of infection by SARS-CoV-2." But here comes a tiny little problem. By their own admission in their clinical study, it was and I'm quoting, "impractical to measure infection." That's right, you heard me correctly. It's impractical to measure infection. So there is no evidence inside the phase three clinical trials, that any of the gene therapy had anything to do with the infection or not of SARS-CoV-2.

You cannot have a vaccination. It's not under the legal definition of vaccination, you cannot have a vaccination. That is in fact, not meeting either an immune or a transmission standard. And their clinical trial was set up specifically so that it could not measure either of those things.

And then, let's quote, shall we, from *The New England Journal of Medicine*, and from [The Lancet](#) . And this is October, and this is December respectively. And I'm just going to go ahead and read this quote:

"At the time of this writing, no correlate of protection from SARS-CoV-2 has been established."

(Ref:

<https://www.nejm.org/doi/full/10.1056/NEJMoa2028436>

)

Maybe you misheard what I just said. As of this

writing, no correlative protection for SARS-CoV-2 has been established. In other words, not a shred of evidence from the clinical trials said anything about protection from infection with SARS-CoV-2, which means every single person who has value signaled their vaccination because they're doing their part not to be infected with SARS-CoV-2, and not to get COVID-19, newsflash, you have been violating the Federal Trade Commission Act by deceptive practices. You've been telling people that there is a protection that the data itself does not afford. But maybe that was just one report. So why don't I read from the second report? And I quote, and this is the *Lancet* and *New England Journal of Medicine*, quote,

"No existing vaccines have been shown to be effective against infection with any betacoronavirus, the family that includes SARS-CoV-2, which causes Covid-19." (Ref: <https://www.nejm.org/doi/full/10.1056/NEJMe2034717>)

People, this isn't my opinion, this is not me selectively choosing to take a spin on facts. This is in fact, fact. Which then begs the question, Kim. What would motivate Pfizer and Moderna and more importantly felonious Fauci, the unsavory, what would motivate them and CDC and others to lie to the American people about this being a vaccine, because vaccines in the ordinary course of the use of that term, invokes within the listener, a presumption of protection against infection, and protection against transmission, neither of which have been established at all? Why would they use

the term vaccine?

And here's where we have to depart from the facts. And we have to go into conjecture because that's the only thing we have available to us. As recently as 2018, Moderna was insisting that they were not making vaccinations, they were insisting that this is gene therapy technology, and it was cutting edge and it was all this kind of nonsense. And suddenly, courtesy of SARS-CoV-2, it suddenly became a vaccine company. It wasn't a vaccine company before. It's not a vaccine company now, it's a gene therapy technology company with an unproven gene therapy. That's what it is.

So when asked to ask the question, okay, so why, why do we keep hearing about vaccines? Ah, well, here's the reason I think we keep hearing about vaccines. And once again, my opinion here, people, this is not based on information that I have readily available, but it is my opinion. I think that if Anthony Fauci if Moderna and Pfizer, and others, public health authorities around the country and around the world, actually called this gene therapy chemotherapy, number one, people wouldn't want to take it. And they wouldn't want to take it for a good reason. Because experimental gene therapy is a bad idea, no matter who it is, no matter what it is, no matter where it is. Experimental gene therapy should not be relentlessly and recklessly distributed to a population, that shouldn't happen. So that's number one.

But number two is the 1986 liability exclusion. And this is what I think it really is. See, as long as Mr. Alex M. Azhar, the director or the Secretary of Department of Health and Human Services, as long as Alex Azhar keeps the state of emergency going, as long as every governor and every mayor and every unelected official keeps the state of emergency going under emergency use authorization rules, liability is a shield that's afforded to people like Pfizer and Moderna and others. So they're making billions of dollars on the back of something for which they have no liability. But, if this was not a vaccine, then all a sudden the liability shield would vanish, because there is not a liability shield under the 1986 Act for a medical countermeasure that is gene therapy.

Which means we're probably having governors, and the Health and Human Services and CDC and others, maintaining the illusion of a state of emergency not because there's a state of emergency. They're maintaining it, because it maintains the illusion of the liability shield. Remember that if you suspended the state of emergency today, like, I don't know, if you're the governor of South Dakota, and you ever have anybody who remotely cares about this matter, listening to this video, lift the state of emergency because on the day you do it, RT PCR can't be used. Because RT PCR is not a diagnostic, it has never been approved, and it does not and cannot diagnose and treat a disease, which means every time Bloomberg, Gates Foundation and Zuckerberg foundation COVID-19 dashboard reports that there is a another case of COVID-19 because of

a positive RT PCR test, they are violating the 15 US code Federal Trade Commission Act. You cannot diagnose a thing that cannot diagnose the thing. That's a misrepresentation. That is a deceptive practice under the Federal Trade Commission Act. And they're liable for deceptive practices. Because it turns out, you do not have a waiver of liability under deceptive practices, even in a state of emergency.

So maybe the reason why they're calling it a vaccine is because they can count on the fact that neither you nor I will ever have this video, you and I will never do this independent inquiry you and I will never ask the question, is it possible that the entirety of what operation warp speed was, was nothing but propaganda? Which leads me to my conclusion.

Some of you know this, some of you don't. But operation warp speed has a middleman. And the middleman is a company called ATI, a defense contractor out of North Carolina. And it turns out that that defense contractor is the one that clears the billions of dollars of orders for vaccines. And that defense contractor is the one that then is supposed to be controlling the rollout of the vaccines, which has been a total train wreck, even setting aside all of the ethical, legal moral obligations of the things that we just talked about. But ATI also has another contract, also with the Department of Defense, and other government agencies, and that contract is for propaganda and misinformation.

“Hold on a minute! You mean that the company that actually got the contract to officially manipulate public media to officially convey the propaganda of the United States government, you mean that company is also the company in charge of operation warp speed, Dave? Is that what you’re saying?” And the answer is, you got it! That’s exactly what I’m saying. This thing does not stink like rotten fish because I’m making up some sort of stench. It stinks like rotten fish because it is rotten fish. That’s why it smells of rotten fish.

So listen, this is a pretty straightforward situation. You’re being lied to. Your own government is violating its own laws. 15 US code is not my interpretation. They have thrown this book at more people than I can count. They have shut down practitioners around the country, time and time again for violating what are called deceptive practices and medical claims. Guess what? They’re doing exactly that thing. Right now.

You need to send this video to your US Attorney in your state. You need to send this to your attorney general in your state. You need to actually do something with this video. Don’t just share it among your friends don’t preach to the converted. This is a violation of federal statutes perpetrated by defense contractors by gene therapy companies, not vaccine manufacturers, by gene therapy companies who are doing experimental trials and doing them under deceptive medical practices. That’s what this is.

And by the way, every statement that I have made before I went to my opinion, and my opinion is pretty grounded, because if you really examine why I think that the liability shield is the point, look at how many times the Department of Defense wanted to confirm that they were shielded under the immunity act of the emergency use authorization. They would not play this game if they didn't get the liability shield. And that liability shield came from the emergency use authorization.

So we're very, very, very desperately in need right now as a civilization to make sure we interrupt this. And the reason is because real people are being harmed. Real people are actually having significant side effects. Some people may in fact be dying. The doctor in Florida, who two weeks after receiving the vaccine, dropped over dead, very healthy guy, a couple days after he got the vaccine started having splotches and blotches and everything else, and then at the end of two weeks died, his death is being investigated, are you ready for this? By the CDC and by Pfizer! That's like asking a bank robber to investigate their own bank heist. It is beyond insane people. And it's time for each one of you not to just like this, not to just share this, but send it to law enforcement in your state, because somebody somewhere out there in these 50 states is going to actually care about following the law. Somebody is, or this is not America. It's on you. Do something with this. I'm doing the work. You can help me carry the burden. So make sure you share this and we'll see you again next week. Thanks very much.

CDC Says Only 6% of Covid Patients Died from CV19 Alone



That means 94% of so-called Covid 19 deaths is a mainstream media lie!

I got the following text from a video on Twitter. It's very similar in content to the Bitchute video.

The Centers for Disease Control have updated their death counts for Coronavirus and reveal yet again that COVID-19 is rarely the actual cause of death among Coronavirus patients.

According to the CDC themselves, of the 220 thousand deaths attributed to the Coronavirus, 87,000 of them died from pneumonia and influenza. Another 17,000 died from chronic respiratory diseases, and 26,000 died from respiratory distress

syndrome, 44,000 patients died from hypertensive diseases, 23,000 died from heart disease, and a whopping 28,000 died from cardiac arrest and heart failure. Yet all of these, even patients who died from heart attacks, were marked down as dying from the Coronavirus. Doctors who spoke with one American News explained that 131,000 patients who are being considered COVID-19 deaths already had life-ending diseases, including cancer, dementia, and even end-stage renal failure. And, according to the CDC again, if you look at the place of death, you'll see that some 10,000 patients who died from Covid were on hospice care, meaning they were terminally ill to begin with and we're already expected to die.

Doctors tell one American news that all of these patients were critically ill and likely died from their pre-existing conditions without any help from the Coronavirus. However, they explained that the Cares Act passed by Congress in March gives hospitals a 20% bonus on their Diagnosis Related Group paid for by Medicare. Essentially that means doctors are being paid to list deaths as Coronavirus without any indication the patient's death was actually Covid related.

The CDC backs these numbers up by explaining that Coronavirus itself is responsible for just 6 percent of all deaths listed as Coronavirus related. The other 94% of deaths are due to pre-existing comorbidities, including serious illnesses and advanced age. However, despite this report being officially published by the CDC, so far the

mainstream media have completely ignored it and instead continue to hype a pandemic that seems less dangerous every day.

[Dr. James Lyons-Weiler | Coronavirus Vaccine Safety Warning PA Medical Freedom Press Conference in Text Format](#)



The National Vaccine Injury Compensation Program itself is corrupt. The HHS determines which vaccine injuries are real.

Dr. Simone Gold – The Truth about the CV19 vaccine



Dr. Simone Gold is the Los Angeles-based doctor who is leading a group called “America’s Frontline Doctors” that held a press conference on COVID-19 on July 27, sparking a controversial viral video that was removed from multiple social media platforms except for Bitchute which does not censor views just because they oppose the mainstream narrative. That video is at the very end of the text of this article.

The video directly below is Dr. Simone Gold’s talk to a group of doctors who all agree with her. It’s still hosted on YouTube but will probably be deleted any second which is why I am showing the same video which is hosted on Bitchute. It may take time to load. While it does, you can read the text I transcribed from it.

Thank you so much for inviting me. I come to you tonight with a lot of information about the experimental vaccines, what's called the experimental vaccines, regarding Covid-19. I think all of this information will be brand new to you. I know that this was all brand new to me over the last few months, even as a board-certified emergency physician I did not know a lot of what I'm about to share with you.

And I come before you on behalf of America's Frontline Doctors which is a volunteer physician organization that we started specifically to combat the serious and life-threatening disinformation campaign that has really taken over America and really the entire globe. It's very very scary stuff.

I've been a doctor for a long time. Before me my father is a doctor. I've never seen anything like this where we have groups of physicians or scientists and government bureaucrat agencies essentially lying to the American people and people across the world. I have many many examples. One brief example I'll give you is that the national institute of health right now has as its policy recommendation for patients with Covid-19 stating that unless you're in the hospital requiring oxygen there's no actual treatment available for you. That is a complete falsehood, completely false. In most of the world non-first world countries there's plenty of treatment easily available, Hydroxychloroquine, Ivermectin here in America. if you can find a doctor to prescribe it you get those

medicines, or Budestinide. There's many options. And you know, this disinformation is why we came public.

When we started to speak out around July a little bit sooner but we got a lot of attention starting in July. we were promptly as the pastor said de-platformed. And it doesn't bother me so much, I know the information, it bothers me tremendously on behalf of all of humanity, right? This is a crime against humanity. There's a physician in the Netherlands who's bringing a lawsuit in the Hague calling it that, calling it a crime against humanity. There is a lot of information you haven't heard. There was a Senate testimony about a month ago. A bunch of doctors went and testified. It was I believe, senator Johnson is the chairman you, can find it on our website America's frontlinedoctors.com. But the doctors testified that the vast majority of deaths in America would have not ever happened, not ever happened. I start with that because you must understand the magnitude of the lie to understand what they're trying to tell you about these experimental vaccines. So we need to just kind of go through that for a little bit.

I know some of you heard this first sentence which I said this morning, but the disinformation was apparent since the beginning, right? We call this illness Covid-19, but its real name should be after the location from where it arose which is Wuhan China. And if you remember it was called the Wuhan virus for a while, a month or so before we

discovered the Chinese Communist Party didn't like that name. They set about putting a lot of pressure on media and other politicians let's say to change it. And they started calling it the coronavirus. They called it the coronavirus because it is actually a coronavirus. But that became very confusing to doctors and scientists because there are seven coronaviruses, this is just number seven. So we used to use the word coronavirus sometimes on our charts when we meant a common cold. A person would come into the ER in my case and they just had a common cold and I would sometimes write coronavirus on the chart as the diagnosis. So it was pretty confusing for doctors and scientists to call it the coronavirus, so they had to change the name again and it became known by its acronym coronavirus disease 2019 Covid-19.

I have to start there because it was never a racist or or weird thing to call it the Wuhan virus, right? There's so many diseases that are named after the location from which they rise. There's Zika and Ebola, there's Middle East respiratory syndrome, Rocky Mounted spotted fever, Lyme disease, I mean the list is endless, German measles, Spanish flu, this list is endless. So you need to understand that deception was there from the very beginning. So that was the first big lie.

The next big popular well-known lie was the maligning of this common ordinary cheap safe medication called hydroxychloroquine. Those of you who have traveled abroad who have taken mission trips for example or anybody in the military are

quite familiar with this drug. Doctors would just give it out like candy. I know that I was going to take a holiday to Africa about 20 years ago and I was a medical student at the time and they just handed me the pills, here you go, I never asked any questions. It was a big fat nothing burger taking hydroxychloroquine. All of a sudden we started hearing doctors, even as doctors, that hydroxychloroquine is unsafe. You can't understand what's going on with the lies until you understand what an enormous lie this is! Hydroxychloroquine is over the counter in much of the world. It's taken in many African nations. They call it Sunday Sunday medicine because you take it every Sunday. That's like its name Sunday Sunday. People keep it in their pocket the way Americans might keep Tylenol in their purses. It's absolutely ordinary stuff. It was over the counter really in any country which had malaria or any country that had citizens that would visit malaria countries on holiday it was over the counter. For example, it's over the counter in France. The only reason it wasn't over the counter in America is there just wasn't a consumer demand.

In America, we use hydroxychloroquine for two main reasons, lupus, and rheumatoid arthritis, and also for malaria for people going on holiday but generally, it's lupus and rheumatoid arthritis. And for those illnesses patients regularly see physicians so they can get a prescription for it. That's why it was never over the counter here, not because it was unsafe. It's been FDA approved for 65 years. We give it to babies, we give it to

children, we give it to pregnant women, we give it to nursing mothers, we give it to the elderly, and we give it to the immune-compromised. Those last two categories take this medication for decades. There's never a pretense that it's not safe. That's the drug that you've been hearing about for nine months now ten months telling you it's unsafe! It's an incredible lie of incredible proportions! Once you understand that you will be suspicious of everything that follows.

So that's where I found myself. There I was in the emergency department treating patients as they came in with Covid-19, and once we had the rapid test so I can confirm the diagnosis, my first patient who I needed to give hydroxychloroquine and zinc, I did it and even knowing the kind of the controversy I really didn't think twice about it. It was fine. I gave it to her, I actually called her the next day. She was so much better. She herself got better within about 12 hours. In about 48 hours she was essentially completely well. This completely matched what I had read in the scientific literature. I knew many doctors have done this. I've read many journals. It was completely consistent. What was really shocking and completely inconsistent was my medical director who calls me the next day and threatens to fire me for doing this, this treatment! I can't even tell you even as I describe this moment to you, it's shocking to me. I remember the case, the situation, the conversation, and he's saying he's going to fire me. And I said, "why would you fire me over this?" "Well, I don't think it works." I said, "well then.

Don't prescribe it! You haven't read the science the way I have. I know it works you'll change your mind in a couple of months when you get a little wiser, but why would you get involved with me treating a patient? You do your thing I do my thing that's how medicine is practiced." we are licensed as individuals.

It's actually against the law to have what's called a corporate practice of medicine. It has to be the individual doctor's position. That's why patients go to multiple doctors, right? (Applause) and really the almost the worst part of the conversation was not even that he was ignorant that the drug worked but his reasons for saying that he was going to fire me if I did this and the reason which he put in writing because he wasn't so smart he said it was because the biggest payer at that hospital which is a large insurance company that everyone here has heard of that's back on the West Coast mainly, didn't want us to prescribe it, they were blocking it. So that payer insurance company was pressuring the hospital that their doctor shouldn't do it. It had nothing to do with even if he thought it was good or bad for the patient, it all had to do with money and payment. Honestly, I still can't believe I'm relating this story! It was really unbelievable. So he said I could never do that again. I said well good luck with that. So it kept happening. It happened about four or five times. And I kind of knew that my days at that particular hospital were really we're going to be numbered, right? I mean, how long is this going to last?

So I started looking online for other physicians like myself. I knew I couldn't be the only one. And I found the most amazing group of doctors really just brilliant intelligent compassionate kind, and we got together and we called ourselves the America's Frontline Doctors. And what I felt needed to happen was we needed to break this disinformation cycle to which the Americans were all being subjected to, and people across the world as well. So I set up to do something called the White Coat Summit which was an entire day of education. We brought doctors and we brought social media influencers, young people know them as YouTubers. So we brought a whole bunch of YouTubers and a whole bunch of doctors we brought to Washington. We did seven hours of education and we laid out all the facts, very dispassionate, here are the facts on hydroxychloroquine, here are the facts on lockdowns, here are the facts on masks, here's the facts on schools and kids transmission, here's the facts for the elderly, here's the facts on other treatments other than hydroxychloroquine. And we did that. In the middle of that day, we took a break and we walked over to the supreme court and that was the video that got 20 million views. It gets 20 million views not because I can sing like Beyonce but because human beings recognize truth, we have something inside of us. (Applause) I really emphasize that point because you can't get to 20 million views nobody plans such a thing it's only if people say "oh my gosh you got to listen to this you got to listen to this." you recognize the truth, you recognize the truth. So I guess after a while big tech caught up with the fact that this

was like breaking the internet. And so within an hour all of the platforms censored us simultaneously. So it's essentially a monopoly. We're talking about Youtube, Instagram, LinkedIn, Facebook, Twitter, all went down immediately. (Webmaster: It's on Bitchute!) The President had retweeted us, the President's son had retweeted us.

And from that moment on everything really kind of changed. I did get fired from both of my hospitals. It is a scary experience to get fired especially when you've worked as long as I have to be a board-certified emergency physician, and that's what I do. I'm a mom, I have kids it's not a comfortable feeling to be fired. You don't know what the future holds. On the other side of this which is now several months, it's really been a blessing, because we doctors have been able to come forward and speak freely and help other doctors who've been put in this situation. There are several of my peers, several doctors in the Americas Frontline Doctors group that have faced tremendous personal pushback. There's a fellow right now in Oregon who refused to force the mask. He won't wear it and he won't force his staff to wear it. If you want to wear it. He was public about it. So the state of Oregon actually yanked his medical license. And when I when he first told me this, I thought this can't be possible because you may not know but I'm also an attorney and it was impossible to conceive of an event like that happening without due process. I mean the whole thing about law if anybody's been involved in the law at all it's all about process. You've got to go through the

process. You can't just pull someone's license. You have to have hearings and phone calls and papers filed and all that. I really just thought oh he missed his deadlines, but it was true. They actually just summarily pulled his license. It's unbelievable.

This is 12 minutes and 26 seconds of the 56-minute video. I hope this text inspires you to want to listen to the rest.

Also, see the famous video of the doctors before the Supreme Court!

Doctors Around the World
Issue Dire WARNING: DO
NOT GET THE COVID
VACCINE!! – With Text



I'm a medical doctor and board-certified forensic psychiatrist. This pandemic is not a real medical pandemic. The COVID-19 vaccine is not proven safe or effective because there has not been enough time. In addition, there is not a clear definition of any new disease for which it can be tested against. There has not been a virus that has been purified or shown to be the cause of an illness.