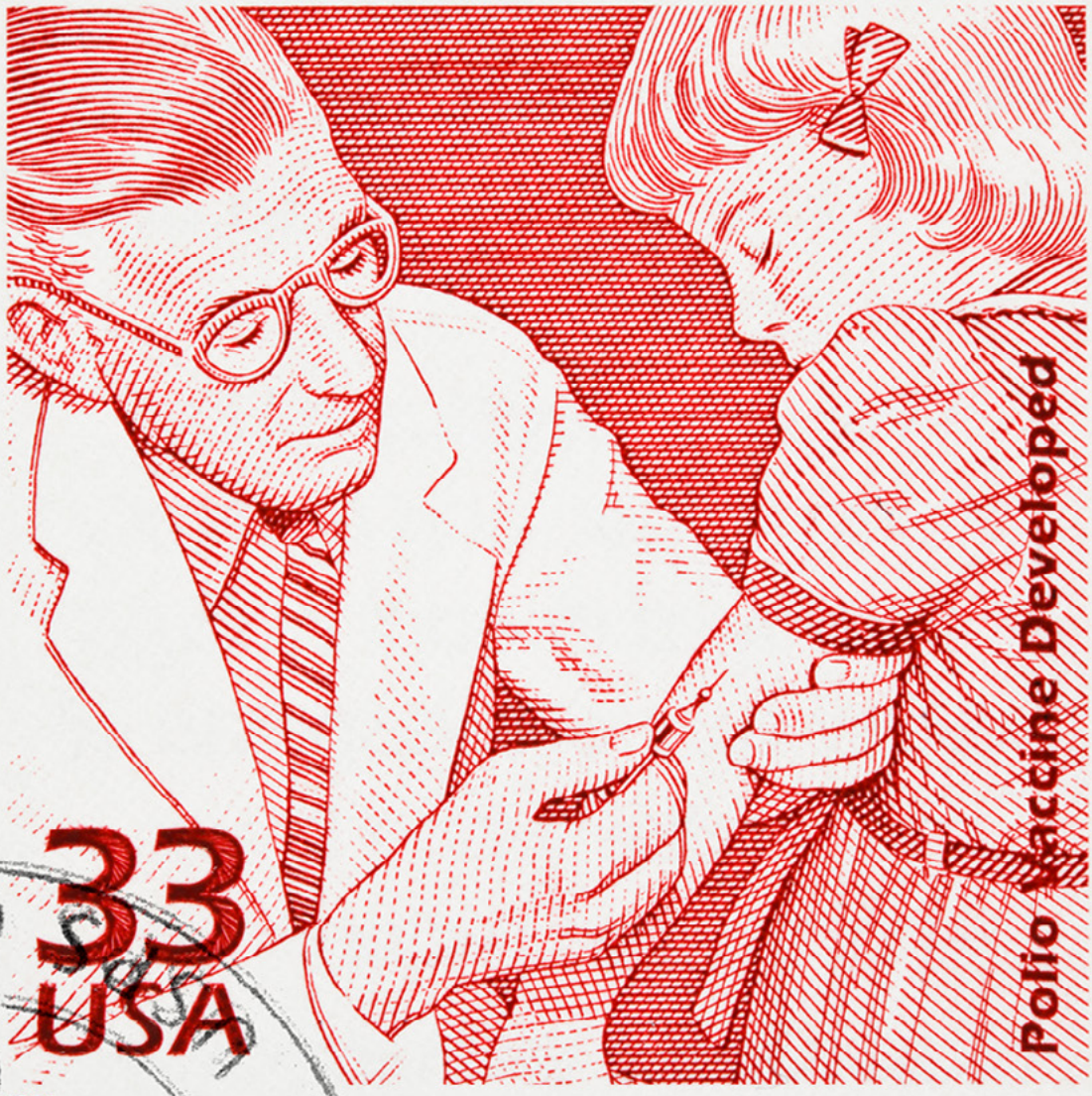
FIRST DO NO HARM:

THE SHOCKING HISTORY OF VACCINES



By Ty & Charlene Bollinger

The TRUTH About VACCINES PRESENTS

REMEDY

REMEDY.film

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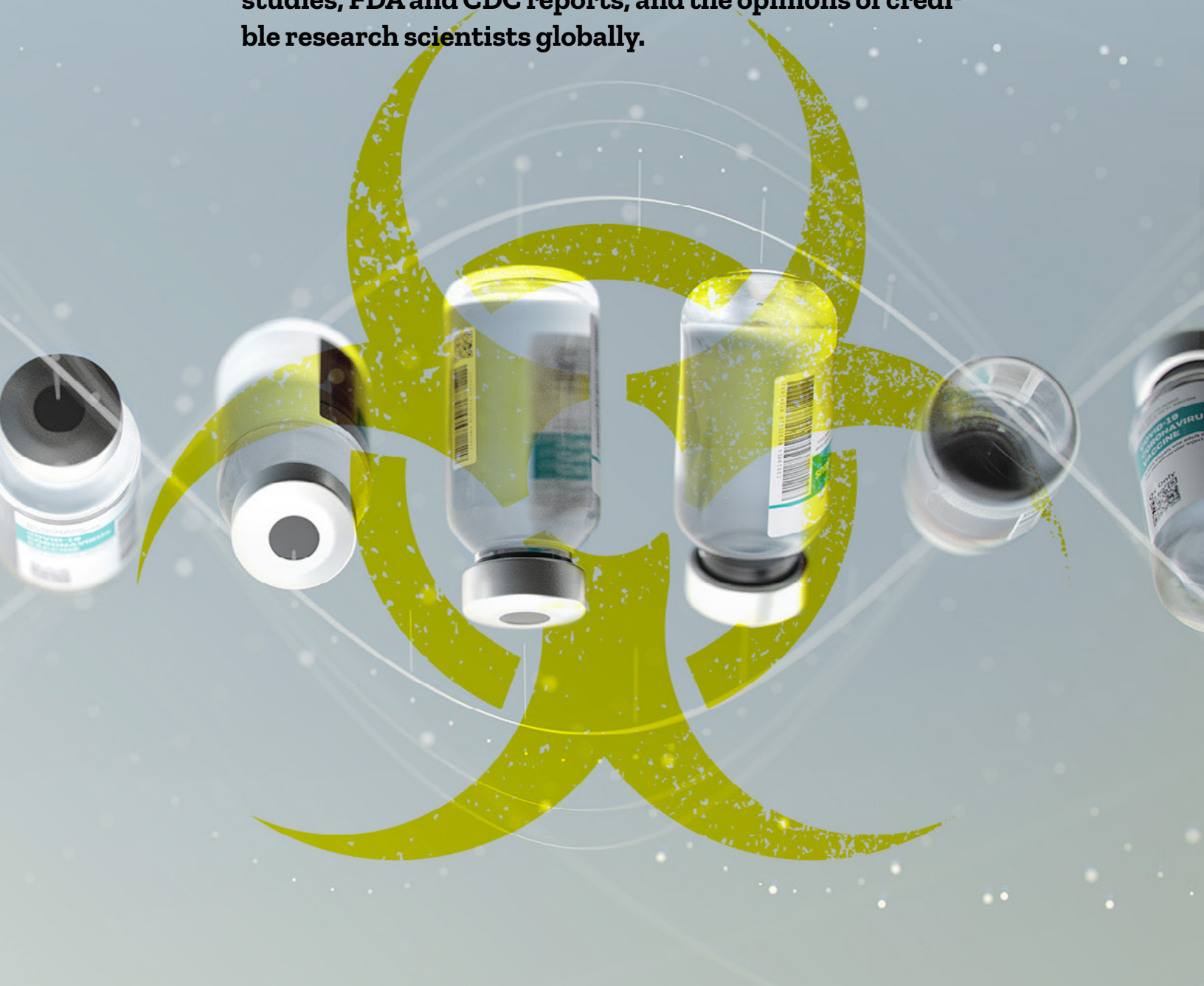
INTRODUCTION

Vaccinations are another of conventional medicine's colossal blunders. The notion that vaccines protect you from infectious diseases and increase immunity is not supported by scientific data. Health "authorities" credit vaccines for disease declines and assure us of their safety and effectiveness, yet these assurances are directly contradicted by government statistics, published medical studies, FDA and CDC reports, and the opinions of credible research scientists globally.



Vaccines contain additives, preservatives, and adjuvants, which are supposed to increase the body's immune response to the vaccine-substances like mercury, aluminum, formaldehyde, MSG, aborted fetal tissue, squalene, and antifreeze.

Medical research has well established that the direct injection of foreign proteins and other toxic materials (listed above) makes the recipient more, not less, easily affected by what he/she encounters in the future. This means they do the opposite of immunize, commonly even preventing immunity from developing after natural exposure. Some have described vaccinations as "toxic cocktails" of the most noxious substances on earth.

Many parents and professionals are completely unaware of exactly which ingredients are in our vaccines.

In 2012, the late Dr. Harold Buttram wrote an article titled *The Ultimate Gamble: Do Childhood Vaccines Result in Genetic Hybridization from Alien Human and Animal DNA Contents?*

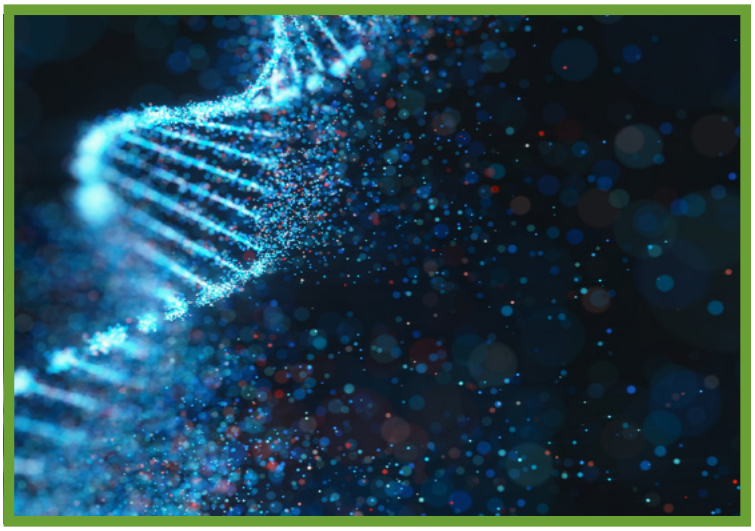
As the title suggests, his article contains powerful evidence suggesting that vaccine manufacturers may be intentionally tampering with human DNA, in an effort to develop hybrids. Hybridization is the mating between unrelated individuals. In plant systems, the term is most commonly used to mean mating between different species.

VACCINES CONTAIN ADDITIVES, PRESERVATIVES, AND ADJUVANTS, WHICH ARE SUPPOSED TO INCREASE THE BODY'S IMMUNE RESPONSE TO THE VACCINE-SUBSTANCES LIKE MERCURY, ALUMINUM, FORMALDEHYDE, MSG, ABORTED FETAL TISSUE, SQUALENE, AND ANTIFREEZE.

In an effort to explain his theory in more detail, Buttram explained that: *"According to an article in World Medicine (1971), scientists at the University of Geneva made the startling discovery that biological substances entering directly into the bloodstream may truly become a part of us and even a part of our genetic material.* The article stated in part:

"When Japanese bacteriologists discovered that bacteria of one species transferred their own highly specific antibiotic resistance to bacteria of an entirely different species, they seemed to hit on a unique if not startling phenomenon. Dr. Maurice Stroun and Dr. Philippe Anker, with colleagues in the Department of Plant Physiology at the University of Geneva, have now accumulated a wealth of evidence that the transfer of genetic information is not confined to bacteria but also can occur between bacteria and higher plants and animals."

Buttram continued: *"The Geneva scientists are convinced that normal animal and plant cells also shed DNA and that this DNA is also taken up by other cells in the organism. If they are right, the consequences to virtually every aspect of a cell's metabolism would be considerable. The growth and development, diseases, and even the evolution of an organism would be affected."*



THERE IS NOW A WEALTH OF EVIDENCE THAT THE TRANSFER OF GENETIC INFORMATION IS NOT CONFINED TO BACTERIA BUT ALSO CAN OCCUR BETWEEN BACTERIA AND HIGHER PLANTS AND ANIMALS.

He stated that: *"As purely genetic material, it would be expected that viruses are more prone to the process of "jumping genes" than other microorganisms. The following publication tends to support this hypothesis: In a study of 24 passages of a nuclear polyhedrosis virus through cell cultures, there were both insertions and deletions in the virus, appearing to suggest that the virus both donated genetic material to and received genetic material from the cells in which it was cultured, therefore suggesting that similar viral exchanges take place in the human system."*

Vaccines contain a startling list of cancer-causing ingredients, neurotoxins, and immune-destroying ingredients, including:

FORMALDEHYDE

This is classified as a known carcinogen. Both the EPA and the International Agency for Research on Cancer admit this. So, why do vaccines still contain formaldehyde? Formaldehyde has been linked to several types of cancers, including leukemia. It has also been used in the anthrax vaccine, DT, DTaP, Hib, HPV, Hep A, Hep B, influenza, meningitis, polio, and more.

ALUMINUM

Aluminum salts are in childhood vaccines such as the DTaP vaccine, the pneumococcal conjugate vaccine, hepatitis B vaccine, and more. Aluminum hydroxide (just one of the aluminum salts that is used) has been linked to autism, Alzheimer's disease, and yes, cancer. Aluminum causes cancer by displacing iron from its protective proteins, raising the level of free iron in the body, and triggering intense inflammation, free radical generation, and lipid peroxidation.

ALUMINUM HYDROXIDE (JUST ONE OF THE ALUMINUM SALTS THAT IS USED IN VACCINES) HAS BEEN LINKED TO AUTISM, ALZHEIMER'S DISEASE, AND YES, CANCER.

MERCURY (THIMEROSAL)

This preservative is in almost every vaccine and has been linked to autism, mental retardation, and yes, cancer. The search for the association between mercury and cancer reveals 643 scientific papers.

POLYSORBATE 80

Polysorbate 80 is a toxic substance that should never be ingested or placed on the skin, much less injected, and yet it is in vaccines. Studies with lab rats show polysorbate 80 has both carcinogenic and infertility effects.

Yet, it's ironic that this carcinogenic ingredient is found both in Merck's cancer vaccine, Gardasil, and is also used in chemotherapy given to cancer patients.

According to Buttram and the CDC's list of vaccine ingredients, many childhood vaccines also include the following substances:

- **ANIMAL TISSUES: pig blood, horse blood, rabbit brain**
- **AFRICAN GREEN MONKEY KIDNEY CELLS (Vero) (CDC list of ingredients)**
- **DOG KIDNEY, MONKEY KIDNEY**
- **CHICK EMBRYO, CHICKEN EGG, DUCK EGG**
- **BOVINE CALF SERUM**
- **DULBECCO'S MODIFIED EAGLE MEDIUM (CDC list of ingredients)**
- **FETAL BOVINE SERUM**
- **HUMAN DIPLOID CELLS (originating from human aborted fetal tissue)**
- **PORCINE (PIG) PANCREAS**
- **VERO CELLS, a continuous line of monkey kidney cells**
- **SHEEP WASHED RED BLOOD CELLS**

The Physicians' Desk Reference (PDR) states that in addition to mercury, aluminum, and formaldehyde, vaccines may also contain SV40, bovine serums, latex, neomycin and other known carcinogens and allergens. Many of these toxins are injected into the bloodstream of babies as young as one day old. In fact, no long term testing for efficacy or safety for any vaccination has ever been done. Essentially, Big Pharma is using our babies as their own guinea pigs.

In 2002, the British medical journal The Lancet published compelling evidence that contaminated polio vaccine was responsible for up to half of the 55,000 non-Hodgkin's lymphoma cases that were occurring each year. What was it contaminated with? SV40-a carcinogenic monkey virus! The puzzle began in 1994 when Dr. Michele Carbone, a Loyola University researcher, found the virus SV40 (which had never before been detected in humans) in half of the human lung tumors he was

studying. Since then, 60 different lab studies have confirmed the results and SV40 has been found in a variety of human cancers: brain, lung, bone, and lymphatic.

In 2011, Dr. Maurice Hilleman made astounding revelations in an interview that was cut from The Health Century. In the interview, Hilleman admitted that Merck drug company vaccines had been injecting dangerous viruses into people worldwide. Keep in mind that Dr. Hilleman was the developer of Merck's vaccine program. He developed over three dozen vaccines, more than any other scientist in history. He was a member of the U.S. National Academy of Science, the Institute of Medicine, the American Academy of Arts and Sciences, and the American Philosophical Society. He received a special lifetime achievement award from the WHO.

Although vaccines have been almost universally touted as "safe and effective" by governments, health officials, and the media, there have been numerous instances of vaccines causing serious harm.

From ineffective vaccines to dangerous side effects and death, here are just a few examples of how vaccines have historically been anything but "safe and effective."

26 TIMES VACCINES WENT BAD

CUTTER INCIDENT

In 1955, a tragic incident known as the Cutter incident occurred during the early days of polio vaccination efforts. The Cutter incident was one of the worst pharmaceutical disasters in U.S. history and exposed several thousand children to live polio virus. Instead of protecting against polio, the vaccine *caused* cases of polio and paralysis among some of those who received it. In 1954, staff member Dr. Bernice Eddy had reported to her superiors that some inoculated monkeys had become paralyzed and provided photographs. William Sebrell, the director of NIH, rejected the report

Of children who received the vaccine, 40,000 developed abortive poliomyelitis (a form of the disease that does not involve the central nervous system), 56 developed paralytic poliomyelitis—and of these, five children died from polio. The exposures led to an epidemic of polio in the families and communities of the affected children, resulting in a further 113 people paralyzed and 5 deaths.

GARDASIL SCANDAL

In 2007, Texas Governor Rick Perry received public backlash after mandating the HPV vaccine (Gardasil) by executive order. He later rescinded his mandate. California passed a law in 2012 allowing 12-year-olds to receive the vaccine without parental knowledge or consent.

The U.S. Centers for Disease Control (CDC), Food and Drug Administration (FDA), and Merck (the company who produces Gardasil) all claim the HPV vaccination is safe for children as young as nine.

How can they possibly know? Gardasil was fast-tracked through the system meant to safeguard our health and wellbeing. It was approved and rushed to market (like many pharmaceutical drugs with horrific side effects) despite questionable results in regard to safety.

No independent studies have been done to determine if the vaccine itself causes cancer or what the long-term effects might be on those vaccinated.

As should have been expected, a shocking number of girls have had adverse reactions to receiving the HPV vaccination. According to the FDA's guidelines, the tolerance for serious adverse reactions should be narrow when injecting a healthy person with a vaccine with uncertain benefits. Yet, Gardasil is marketed widely to girls ages 9 to 12. With such a low death rate from cervical cancer the risk to those vaccinated should be minimal.

If a person has already been exposed to HPV, there's absolutely no benefit from vaccination. Most commonly, women do not develop cervical cancer until 35-45 years of age. By this time, most women are receiving annual pap tests which identify early stages of cancer.

The package insert states the vaccine has not been tested to see if it can cause cancer.

As the testing period for the vaccine was too short to evaluate any long-term benefits, manufacturers of HPV vaccines have failed to present significant data that their product can prevent cervical cancer.

NO INDEPENDENT STUDIES HAVE BEEN DONE TO DETERMINE IF THE HPV VACCINE ITSELF CAUSES CANCER OR WHAT THE LONG-TERM EFFECTS MIGHT BE ON THOSE VACCINATED.

Invasive cervical cancer takes 20-40 years to develop from the time of HPV infection, so is it really worth all the young lives lost? Is there any benefit at all...for anyone?

It appears the public has been duped.

While well-meaning guardians were misled into having the young women in their care vaccinated with an untested and uncertain drug, the pharmaceutical company raked in billions of dollars in profit. That trickled down to the doctors and agencies who administered it.

These parents have been tricked into giving their children a vaccination they didn't need for a disease they're unlikely to ever get.

SWINE FLU VACCINE

In January 1976, several soldiers at Fort Dix complained of a respiratory illness diagnosed as influenza. The next month, Private David Lewis, who had the symptoms, participated in a five-mile forced march, collapsed and died. The New Jersey Department of Health tested samples from the Fort Dix soldiers. While the majority of samples were of the more common A Victoria flu strain, two were not. The atypical samples were sent to the Centers for Disease Control in Atlanta, Georgia, which found evidence of swine influenza A related to the 1918 flu pandemic, which killed 50 to 100 million people worldwide.

October 12, 1976: Nurse Jacqueline Spaky administers a swine-flu injection with an injector gun on the first day of the immunization program in New York City.

President Gerald Ford orders a nationwide vaccination program to prevent a swine-flu epidemic.

Photo courtesy Bettmann/Corbis 1976:

Source: Wired

https://www.wired.com/2008/03/dayintech-0324/

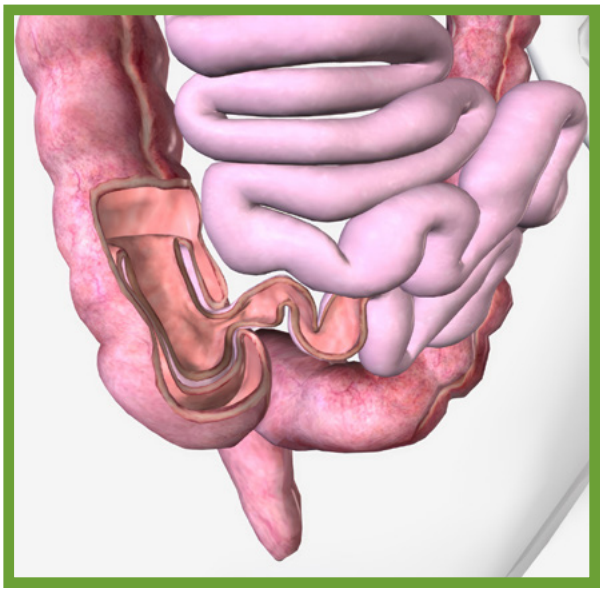
In response, a mass vaccination campaign was initiated, aiming to protect the population from the swine flu strain. But representatives from the pharmaceutical industry refused to provide a vaccine unless they were granted indemnity from any lawsuits that may arise due to vaccine injuries. This set a precedent for the National Childhood Vaccine Injury Act, which absolves manufacturers of any liability associated with their vaccines.

The vaccine, known as the swine flu vaccine, was administered to millions of Americans. In October, 3 patients at a Pittsburgh clinic suffered heart attacks following vaccination. By mid December, cases of Guillain-Barré syndrome affecting vaccinated patients were reported in 11 states, resulting in a 1-month suspension of the nationwide vaccination effort. Over 360 GBS cases were reported in the 6 weeks following the swine flu vaccination program, and the vaccination effort was ultimately abandoned.

The swine flu outbreak ultimately resulted in 1 death (Pvt. Lewis) and 13 hospitalizations. The 25% of Americans who received the vaccine were 4 times more likely to be diagnosed with Guillain-Barré syndrome than their unvaccinated counterparts.

ROTASHIELD

In 1998, the rotavirus vaccine known as Rotashield (manufactured by Wyeth) was introduced to combat severe gastroenteritis caused by rotavirus infection, which predominantly affected young children. The vaccine was administered orally and was intended to provide protection against rotavirus-related illnesses. However, Wyeth withdrew the vaccine a year later after post-licensure monitoring identified an increased risk of intussusception (a condition where a portion of the intestine folds into itself, causing a blockage) in infants. The risk was found to be higher within a week after vaccination.



Intussusception is caused by part of the intestine being pulled inward into itself.

3D Rendering

Eight years later, rival manufacturers were able to introduce new vaccines that were shown to be more safe and effective in children: Rotarix by GlaxoSmithKline and RotaTeq by Merck. In March 2010, the detection of DNA from porcine circovirus types 1 and 2 within RotaTeq and Rotarix prompted the FDA to suspend the use of rotavirus vaccines while conducting an investigation. By May, the FDA

had revoked the suspension. Both vaccines are currently on the CDC's Childhood Vaccination Schedule and are administered in multiple doses beginning at 2 months of age.

VAXELIS

VAXELIS was the first hexavalent (six vaccines in one) drug to be approved in the U.S. and is being hailed as the solution to the increasing number of injections children receive during physician visits. **In their first year of life, children routinely receive over 25 vaccines, some administered just hours after birth. Safety concerns have continued to grow as increasing evidence points to vaccines as a cause of many childhood illnesses and even death.** The efficacy of these drugs has been hotly debated, though the CDC states unequivocally that vaccines are both safe and effective.

The limited research on the adverse effects of VAXELIS showed some troubling trends, and several children died after receiving the combo vaccine. Lethal side effects included asphyxia (loss of breathing), excess fluid in the brain, "unknown causes", and Sudden Infant Death Syndrome (SIDS). Somehow, none of these fatalities were attributed to the vaccine, including half that had no other attributable cause.

Additional problems were reported, including immune disorders, extensive swelling of injected limbs, and seizures. These effects weren't factored and were considered to not be related to the vaccine. According to the vaccine insert:

"Because these events are reported voluntarily from a population of uncertain size, it is not possible to reliably estimate their frequency or establish a causal relationship to vaccination."

There are other issues with these studies. Both participants and the "control" groups received various additional vaccines, rendering potentially important data statistically insignificant. The control vaccine also had reports of seizures, convulsions, immune disorders, and insufficient oxygen in the blood. Hardly a high bar to set; and because VAXELIS was compared with and against a vaccine known to cause these adverse effects, it is impossible to determine if these problems are a direct result of the combo drug, or simply a known problem with the control drug.

FDA COLLUDES WITH MODERNA TO BYPASS SAFETY STANDARDS

According to an ex-pharmaceutical industry and biotech executive, documents obtained from the U.S. Department of Health and Human Services (HHS) on Moderna's COVID-19 vaccine suggest the U.S. Food and Drug Administration (FDA) and Moderna colluded to bypass regulatory and scientific standards used to ensure products are safe.

Alexandra Latypova has spent 25 years in pharmaceutical research and development working with more than 60 companies worldwide to submit data to the FDA on hundreds of clinical trials.

After analyzing 699 pages of studies and test results "supposedly used by the FDA to clear Moderna's mRNA platform-based mRNA-1273, or Spikevax," Latypova said she believes U.S. health agencies are lying to the public on behalf of vaccine manufacturers.

"It is evident that the FDA and NIH [National Institutes of Health] colluded with Moderna to subvert the regulatory and scientific standards of drug safety testing," Latypova added.

"They accepted fraudulent test designs, substitutions of test articles, glaring omissions and whitewashing of serious signs of health damage by the product, then lied to the public on behalf of the manufacturers."

In an op-ed, Latypova disclosed the following findings:

- **Moderna's nonclinical summary contains mostly irrelevant materials.**
- **Moderna claims the active substance — mRNA in Spikevax — does not need to be studied for toxicity and can be replaced with any other mRNA without further testing.**
- **Moderna's nonclinical program consisted of irrelevant studies of unapproved mRNAs and only one non-GLP [Good Laboratory Practice] toxicology study of mRNA-1273 — the active substance in Spikevax.**
- **There are two separate investigational new drug numbers for mRNA-1273. One is held by Moderna, the other by the Division of Microbiology and Infectious Diseases within the NIH, representing a "serious conflict of interest."**
- **The FDA failed to question Moderna's "scientifically dishonest studies" dismissing an "extremely significant risk" of vaccine-induced antibody-enhanced disease.**
- **The FDA and Moderna lied about reproductive toxicology studies in public disclosures and product labeling.**

"Moderna's documents are poorly and often incompetently written — with numerous hypothetical statements unsupported by any data, proposed theories, and admission of using unvalidated assays and repetitive paragraphs throughout," Latypova wrote.

PANDEMRIX

The 2009 Pandemrix scandal is a stark reminder of the unintended consequences of mass immunization campaigns and the need for robust surveillance and response systems. Pandemrix, a vaccine manufactured by GlaxoSmithKline (GSK), was used extensively during the 2009 H1N1 swine flu pandemic, particularly in Europe, as part of the global effort to curtail the virus's spread.

The development and release of Pandemrix were fast-tracked in the face of the pandemic's imminent threat. It was perceived as a necessary measure to address the mounting public health crisis at the time. However, the vaccine's wide-scale usage was soon shadowed by unsettling reports. An unexpected surge in narcolepsy cases, a chronic sleep disorder characterized by excessive daytime sleepiness and sudden attacks of sleep, emerged in several countries, predominantly affecting children and young adults.

In particular, Sweden and Finland reported an up to 13-fold increase in narcolepsy cases among vaccinated children compared to the unvaccinated. This association was later confirmed by multiple observational studies and expert reviews. It was found that the sudden onset of narcolepsy was specifically linked to Pandemrix and not seen with other H1N1 vaccines used during the pandemic.

Image of vaccine vial: Extract from photo of Boris Roessler / EPA

https://yle.fi/a/3-7151251

While the exact mechanism of how Pandemrix triggered narcolepsy is not completely understood, research indicates that the vaccine's adjuvant, AS03, might have played a role. AS03 is a compound designed to enhance the immune response to the vaccine. It's hypothesized that in some genetically susceptible individuals, this strong immune response might have led to an autoimmune reaction, damaging the brain cells that regulate sleep and wakefulness.

NOVAVAX APPROVED DESPITE HEART RISK

An FDA advisory board this week recommended Emergency Use Authorization (EUA) for Novavax's COVID-19 shot. The FDA's committee of "independent vaccine experts" voted 21 to 0 with one abstention at the end of an all-day meeting to recommend authorizing the shot for use in the U.S. after an all-day public meeting in which it weighed safety and effectiveness data.

The FDA is not obligated to follow the committee's recommendation, although it almost always does. Physicians who sit on these advisory boards nearly always end up taking money from the companies relying on their votes. These bribes are not well-masked, showing up as consulting fees, travel compensation, or research grants.

According to science.org, *"An analysis of pharma payments to 107 physicians who advised FDA on 28 drugs approved from 2008 to 2014 found that a majority later got money for travel or consulting or received research subsidies from the makers of the drugs on which they voted or from competing firms."*

Novavax's vaccine is made using small laboratory-built pieces of the coronavirus to stimulate immunity. This protein-based approach is a more traditional one for vaccine development than the mRNA vaccines from Pfizer-BioNTech and Moderna.

The shot works by introducing a replica of the coronavirus spike protein into the bloodstream along with adjuvants to trigger an immune response, hopefully "training" the immune system to recognize and combat the coronavirus if it is ever encountered.

Novavax had hoped that the more "traditional" shot would win over those who had concerns about the mNRA shots. But just like the mNRA shots developed by Pfizer and Moderna, the Novavax jab seems to come with some serious risks.

A week before the drug was recommended for approval, the FDA raised concerns about the risk of myocarditis (heart inflammation) associated with the shot. Here's what the FDA's own report found:

"Multiple events of myocarditis/pericarditis were reported in temporal relationship to NVX-CoV2373 administration, similar to myocarditis following mRNA COVID-19 vaccines and raising concern for a causal relationship to NVX-CoV2373. Data from passive surveillance during post-authorization use in other countries also indicate a higher than expected rate of myocarditis and pericarditis...associated with the vaccine. Further evaluation is needed to inform the risk of myocarditis and pericarditis, and their outcomes, as additional data emerge over time."

Aside from the cardiac inflammation risks, the FDA staffers also cited tenderness at the injection site, headache, fatigue and muscle pain as immediate reactions. They also mentioned hypersensitivity and swelling of the lymph nodes as reactions linked to the Novavax shot. There was also one case of Guillain-Barré syndrome —which is "known to be associated with other [COVID-19] vaccines"—observed during the Novavax clinical trial.

AUTISM & VACCINES

In the 1970s, only 1 child in 10,000 had autism. In the 1990s, there was a "stepped-up vaccine schedule" where the amount of thimerosal was drastically increased in most childhood vaccines, including the MMR and DPT. Now, in the year 2023, autism affects 1 in 36 children! It is a well-established fact that exposure to mercury can cause immune, sensory, neurological, motor, and behavioral dysfunctions—all similar to traits defining, or associated with, autism. My cousin's second boy has autism and he first showed autistic behavior less than 24 hours after receiving the MMR vaccine. The evidence linking vaccines to autism is overwhelming.

Interestingly, in March of 2008, the U.S. government conceded that childhood vaccines were responsible for the autism in 9-year-old Hannah Poling. This unprecedented concession was in response to one of three test cases that allege thimerosal caused autism in children.

"I am no longer trying to dig up evidence to prove vaccines cause autism. There is already abundant evidence...This debate is not scientific but political," said Dr. David Ayoub, M.D.

We've been taught to blindly trust our doctors, but the fact is that they no longer deserve that trust. Physicians take an oath to "First, do no harm," but today, what gets injected into your child is being decided not by physicians but by multinational pharmaceutical companies which have a financial incentive to sell as many vaccines as possible. Only by keeping people in the dark can they continue their absurd profiteering from the vaccine industry. We assume that because vaccines are mandated by U.S. law that the government is verifying their safety and effectiveness. Nothing could be further from the truth.

Every day, millions of children are lined up and injected with toxic, putrid substances called vaccines. Before they begin first grade, children can get as many as 36 vaccines! There are about 200 more vaccines in the pipeline. Scenarios for the future even include consuming vaccines in nose sprays, ointments and fruits and vegetables. This "Vaccine Obsession" has gone beyond what anyone can possibly defend on scientific grounds. Pumping more vaccines into our precious children borders on the criminal.

With every child on the planet a potential "required recipient" of multiple vaccines, and with every healthcare system and government a potential buyer, it is little wonder that billions of dollars are spent nurturing the vaccine industry. Without public outcry, we will see more and more new vaccines required of us and our children and while profits are readily calculable, the real human costs are being ignored. According to Dr. James R. Shannon, former director of the National Institute of Health reported in December 2003 that *"the only safe vaccine is one that is never used."*

METAL SHAVINGS FOUND IN MODERNA VACCINES

In 2021, Japan discovered 4 instances of foreign contamination of the Moderna COVID-19 vaccine in less than a week. Kanagawa prefecture has suspended an entire lot of the product after finding several black particles in a Moderna vaccine vial.

The worrying trend began a week prior, when Japan suspended at least 1.6 million doses of the Moderna shot after initial reports of contamination. Moderna acknowledged the cases of "particulate matter being seen in drug product vials of its COVID-19 vaccine," but said that the suspension was "just a precaution."

But many of these contaminated vaccines have already been administered.

The Japanese defense ministry operates a mass vaccination site in Osaka, and said it had been using doses from the contaminated lot for over 2 weeks (although they did not disclose the full number of doses administered).

JAPANESE OFFICIALS CONFIRMED THAT AT LEAST TWO PEOPLE HAD DIED AFTER RECEIVING DOSES THAT WERE LATER SUSPENDED DUE TO CONTAMINATION. SO FAR, KANAGAWA PREFECTURE ESTIMATES THAT ROUGHLY 4,000 PEOPLE HAVE ALREADY RECEIVED SHOTS FROM THE CONTAMINATED LOT FROM MODERNA VACCINES.

Japanese airline ANA said that they had administered about 4,700 doses from the contaminated lot. Other companies had also suspended vaccination events pending further investigation.

Moderna's problems worsened when two more contaminations were reported. The fresh reports, from Gunma prefecture near Tokyo and the southern prefecture of Okinawa, prompted two new Moderna lots to be suspended.

Japanese officials confirmed that at least two people had died after receiving doses that were later suspended due to contamination. So far, Kanagawa prefecture estimates that roughly 4,000 people have already received shots from the contaminated lot.

In Gunma, a Moderna vial was contaminated with a tiny black substance, while in Okinawa, black particulate was found in vials and syringes. Pink substances were also reported in Okinawa.

The contamination solidified concerns about Moderna's manufacturing process and brought cause for apprehension involving Moderna's international distribution. Moderna had contracts with the European Union (and its 27 member nations) to provide 460 million doses. Moderna had already been facing production issues. At the end of July 2021, the company announced that production delays would cause disruption to the supply chain for all markets outside of the U.S.

Moderna and Spanish pharma company ROVI, which bottles Moderna vaccines for markets other than the United States, said the contamination may have been due to a manufacturing issue in one of ROVI's production lines.

E. COLI ADDED TO MENINGITIS VACCINE

Vaccine manufacturers are continually adding new ingredients to their vaccines in a bid to make them more effective. In 2019, E. coli was added to the GlaxoSmith-Kline (GSK) meningitis B vaccine, Bexsero. An ingredient that, according to the U.S. Centers for Disease Control and Prevention (CDC), can cause a range of serious illnesses.

The CDC stated that: *"Escherichia coli (abbreviated as E. coli) are bacteria found in the environment, foods, and intestines of people and animals. E. coli are a large and diverse group of bacteria. Although most strains of E. coli are harmless, others can make you sick. Some kinds of E. coli can cause diarrhea, while others cause urinary tract infections, respiratory illness and pneumonia, and other illnesses."*

Due to the fact that E. coli can cause serious illness and the fact that many of the illnesses listed by the CDC can, in fact, be found listed as side effects, I decided to investigate exactly which ingredients are being added to our vaccinations and why.

It is worth noting that, while the CDC has listed E. coli as an ingredient of the vaccine, Bexsero, in their literature on vaccine ingredients, the manufacturer, GSK, failed to include it as an ingredient in their information leaflet.

The reason why GSK decided to leave this particular ingredient out of their information leaflet remains a mystery.

JAPANESE ENCEPHALITIS AND ACUTE DISSEMINATED ENCEPHALOMYELITIS

Japanese Encephalitis (JE) is a mosquito-borne viral disease prevalent in many parts of Asia. The disease can cause severe neurological symptoms, including inflammation of the brain, and has a high mortality rate. Those who survive often suffer significant neurological and cognitive impairment.

The Japanese Encephalitis Vaccine (JEV) has been a mainstay in the public health strategy to combat this devastating disease. There are several types of JEV, including inactivated vaccines (mouse brain-derived and Vero cell-derived), live-attenuated vaccines, and a chimeric live-attenuated vaccine. One major setback was the association between JEV, specifically the mouse brain-derived vaccines, and

a rare but serious neurological disorder known as Acute Disseminated Encephalomyelitis (ADEM).

ADEM is an immune-mediated inflammatory disorder of the central nervous system. It often occurs following viral infections or vaccinations and is characterized by a brief but widespread attack of inflammation in the brain and spinal cord that damages myelin, the protective covering of nerve fibers. ADEM can cause a wide range of neurological symptoms, including motor and sensory deficits, altered mental status, and in severe cases, life-threatening complications.

This link was first noticed in the 1990s when several case reports and studies began to emerge, showing an increased incidence of ADEM following administration of the mouse brain-derived JEV. This led to concern among healthcare professionals and the public, particularly in Japan, where the majority of these cases were reported. These concerns were validated by subsequent epidemiological studies showing a significant risk of ADEM following vaccination with this specific type of JEV.

1990s WHEN SEVERAL CASE REPORTS AND STUDIES BEGAN TO EMERGE, SHOWING AN INCREASED INCIDENCE OF ADEM (IMMUNE-MEDIATED INFLAMMATORY DISORDER) FOLLOWING ADMINISTRATION OF THE MOUSE BRAIN-DERIVED JEV (JAPANESE ENCEPHALITIS VACCINE).

The precise mechanism of how the JEV might trigger ADEM is not entirely understood, but it's thought to involve an overactive immune response. In some individuals, the immune system's reaction to the vaccine might cross-react with myelin, triggering an autoimmune response that results in widespread inflammation and damage to the nervous system.

FLU SHOTS CAUSE...FLU?

One exception to targeted vaccines is the influenza vaccine, which changes annually in accordance with whatever flu strain happens to be circulating in a given year. But influenza strains are constantly evolving, leaving vaccine developers in a virtual guessing game. In 2009, the influenza vaccine was incorrect, leading to an increased risk of infection and death.

Even though natural exposure to influenza produces the strongest and longest lasting type of immunity, developing the flu in order to achieve this can cause a person to suffer for weeks on end prior to recovery.

Further, the natural immunity gained from wild exposure to the flu provides protection against only that particular strain, and possibly other strains that are similar to it (though not all strains).

The flu shot is customized to address whatever strain is circulating in a given year, but that assumes that health officials choose correctly, which isn't always the case. Another problem with the flu shot is that it can cause a phenomenon known as "Hoskins Effect" that results in the body becoming less able to fight off flu strains of all types.

Because there are many varieties of influenza that easily evolve from year to year, pre-existing antibodies within the body that were produced to fight off the old strains can cross-react with the new ones being introduced, effectively switching off the immune system's ability to keep the newest invading diseases at bay.

This may have been what caused the 2009 H1N1 flu pandemic that was characterized by extreme severity and high mortality rates in otherwise healthy adults. An epidemiological study out of Canada found that people who received the 2008 seasonal flu shot were significantly more prone to developing H1N1 the following year compared to people who did not receive the 2008 seasonal flu shot. Another study published in the journal Clinical and Vaccine Immunology in 2011 made this same correlation, and while correlation is not the same as causation, these results are still food for thought.

BCG VACCINE AND LOCAL LYMPHADENITIS

The Bacillus Calmette-Guérin (BCG) vaccine has been used for a century to fight tuberculosis (TB), one of the deadliest infectious diseases in the world. Developed in the 1920s, the BCG vaccine is one of the oldest and most widely used of all current vaccines, given to over 100 million babies globally each year. Despite its extensive use, the BCG vaccine has faced several issues over the years, not least of which is the development of local lymphadenitis, a swelling of the lymph nodes, in a small percentage of those vaccinated.

BCG lymphadenitis is a well-documented complication of the BCG vaccination. It is characterized by the enlargement of the regional lymph nodes, typically within two to six months following vaccination. While this condition is usually benign and self-limiting, it can sometimes lead to a suppuration or "bursting" of the lymph nodes, which can be distressing to both patients and parents.

The exact reason why some individuals develop BCG lymphadenitis is not entirely understood. Several factors may play a role, including individual immune responses, the strain of the BCG vaccine used, the dose administered, and the method of vaccine administration. Some studies have suggested that a stronger immune response, possibly associated with the simultaneous administration of other vaccines, may contribute to the development of lymphadenitis.

These incidents have generated significant concern and discussion among health-care professionals, policy-makers, and the public. Although BCG lymphadenitis is generally a mild and self-resolving condition, its occurrence can be distressing and may lead to additional medical interventions, such as antibiotics or surgical drainage.

DENGUE FEVER & ZIKA VACCINATION

The Zika virus, closely related to dengue, yellow fever, and West Nile virus, first came into the global spotlight during an outbreak in 2015-2016 in Brazil. The urgency to control the outbreak and prevent congenital malformations, known as Congenital Zika Syndrome, associated with Zika virus infections led to extensive efforts to develop a Zika vaccine. Yet, the development of a Zika vaccine is fraught

with complexities, and one significant concern is the possible interaction between Zika vaccination and dengue fever.

Both Zika and dengue are transmitted by the same mosquito species and co-circulate in many regions of the world. Immunologically, they are similar enough that the immune system can recognize them as related, yet distinct enough that immunity to one doesn't guarantee immunity to the other. This makes the interaction between Zika and dengue infections—and by extension, Zika and dengue vaccinations—particularly complex.

A central concern is the phenomenon known as Antibody-Dependent Enhancement (ADE) of disease, which has been observed with dengue virus infections. ADE occurs when a person who has been infected with one type of dengue virus is later infected with a different type. In this scenario, instead of protecting the person, the antibodies from the first infection can actually help the second type of dengue virus enter cells, leading to more severe disease. The fear is that a similar phenomenon might occur in people vaccinated against Zika virus who later become infected with dengue virus, or vice versa.

Aedes albopictus (Stegomyia albopicta), from the mosquito (Culicidae) family, also known as the (Asian) tiger mosquito. Vector of yellow fever virus, dengue fever, Chikungunya fever, Zika virus.

Evidence supporting this concern comes from several laboratory and animal studies, which have shown that antibodies against the Zika virus can enhance dengue virus infection, and vice versa. This cross-reactivity and the potential for ADE has raised serious concerns about the safety of developing and administering Zika vaccines, particularly in regions where both Zika and dengue viruses are prevalent.

In some instances, individuals who received a Zika vaccine experienced an increased risk of developing severe dengue fever upon subsequent infection. The risk in humans emerged during post-licensure surveillance.

YELLOW FEVER VACCINE-ASSOCIATED NEUROLOGIC DISEASE

On January 10th, 2019 renowned cancer scientist Martin Gore died unexpectedly. Gore, 67, suffered total organ failure shortly following a routine inoculation for yellow fever. A professor of cancer medicine at the Institute of Cancer Research and a consultant at the Royal Marsden National Health Service foundation trust, Gore was awarded The Royal Marsden Lifetime Achievement Award in 2015.

THE VACCINE CAN SOMETIMES RESULT IN VISCEROTROPIC DISEASE, WHICH IS AN ARTIFICIAL FORM OF YELLOW FEVER INDUCED BY THE VACCINE STRAIN OF THE DISEASE.

The vaccine can sometimes result in viscerotropic disease, which is an artificial form of yellow fever induced by the vaccine strain of the disease. According to the CDC, this man-made virus can lead to multiple organ dysfunction syndrome or multi-organ failure and death in at least 60% of cases. They acknowledge that the disease can only come from the vaccine, saying, *"Yellow fever vaccine-associated viscerotropic disease (YEL-AVD) is a rare and serious adverse event associated with administration of the yellow fever vaccine."*

Symptoms of YEL-AVD include headache, nausea and vomiting, jaundice, and death; and it isn't just older folks or those with immune problems who are at risk. One study in 2011 found that young women may be more susceptible to viscerotropic disease. According to the study: "A review of published and other data suggested a higher than expected number of deaths from yellow fever vaccine–associated viscerotropic disease among women 19–34 years of age without known immunodeficiency."

ALUMINUM IN VACCINES

Each year the CDC provides a list of ingredients that the FDA allows in vaccinations. Some of these ingredients are called "adjuvants" which serve the purpose to stimulate an immune response. Aluminum adjuvants are found as either aluminum gel or aluminum salts such as aluminum hydroxide, aluminum potassium sulfate, and aluminum phosphate.

The second type of adjuvant containing aluminum used in U.S. vaccines is AS04 which is found in the Cervarix vaccine intended to protect against genital human

papillomavirus (HPV). This vaccine contains a combination of both monophosphoryl lipid A and aluminum hydroxide.

The following forms of aluminum are found in vaccines against various forms of hepatitis, DTaP (diphtheria, tetanus and pertussis), encephalitis, meningococcal meningitis, pneumococcal disease, anthrax, and vaccination boosters:

- **Aluminum Hydroxide**
- **Aluminum Phosphate**
- **Aluminum Hydroxyphosphate**
- **Potassium Aluminum Sulfate**
- **Amorphous Aluminum Hydroxyphosphate Sulfate**
- **Aluminum Potassium Sulfate**
- **Aluminum Lake Dyes**

Research shows that the lymphatic system is able to relocate aluminum injected into a muscle into distant organs in the body. A study done with a group of 357 healthy individuals found that those who received aluminum-containing vaccinations had an increase in reported side effects—as noted through hospital admission records, reports, and participant diary notes.

This same study also reported that vaccine side effects were greater in younger and older participants. Data also showed that given the reduced immune response that resulted post-vaccination, the greatest immune response was detected 41 days following vaccination and inflammatory responses were dose dependent.

One of the first studies of its kind conducted in 1992 showed the accessibility for aluminum to cross the blood-brain barrier posing its greatest physical threat on the human body. Findings of the neurotoxic effects of aluminum was published by The New England Journal of Medicine in 1997. The study showed that aluminum accumulates into toxic levels in the brain, blood and bones of infants.

Aluminum accumulation in the brain is shown to influence genetic factors increasing the expression of genes that alter the genetic code, cause neuroinflammation, and affect distant physiological pathways resulting from aluminum infection on the central nervous system response. Such disastrous neurological abnormalities are implicated in the exponentially increasing diagnosis rate of Parkinson's, Alzheimer's, ALS, and other neurodegenerative diseases.

There is little to no doubt from the plethora of evidence in scientific studies that aluminum toxicity is part of the stress induced in the brain that causes neurodegenerative diseases.

ALUMINUM ACCUMULATION IN THE BRAIN IS SHOWN TO INFLUENCE NEUROLOGICAL ABNORMALITIES IMPLICATED IN THE EXPONENTIALLY INCREASING DIAGNOSIS RATE OF PARKINSON'S, ALZHEIMER'S, ALS, AND OTHER NEURODEGENERATIVE DISEASES.

CHINESE VACCINE SCANDAL

In 2019, violent protests erupted in China after nearly 150 children received expired polio vaccines. Parents said that this is just one example of a rampant vaccine scandal revolving around the Chinese pharmaceutical industry.

Much of the scandal has centered around Changsheng Bio-Technology, one of the major vaccine manufacturers in China. The company was fined after watchdogs discovered Changsheng had produced 252,600 DPT (diphtheria, tetanus, and pertussis) vaccines that did not meet potency standards.

According to a 2018 report by CNBC, Chinese regulators found that the pharmaceutical company had "arbitrarily made up and changed manufacturing and inspection records" regarding the vaccine, which was administered to hundreds of thousands of young children. They also fabricated inspection reports for over 100,000 rabies vaccines.

They were forced to pay over $1 billion in penalties and their manufacturing license was revoked.

The New York Times reported that Wuhan Institute of Biological Products, a state-run pharmaceutical manufacturer, is said to have produced over 400,000 vaccines that did not meet standards. Wuhan was required to pay a fine.

After paying small fines, many of the companies responsible for faulty vaccines continued to operate normally. There is also concern that government officials were involved in the vaccine scandal, and that their failure to accurately monitor and label the vaccines was due to influence from manufacturers.

HUANGSHAN, CHINA - JULY 23: View of sealed boxes of freeze-dried rabies vaccines for human use produced by Changchun Changsheng Bio-Technology Co. at the Center for Disease Control and Prevention (CDC) on July 23, 2018 in Huangshan, Anhui Province of China.

Photo Getty Images)

Many parents said that their children suffered similar side effects (fever, rashes, and vomiting) to children who received the expired vaccines and believed that faulty vaccines were administered for over a decade. The state-run system for providing vaccine information did not provide information to parents who were concerned that their children may have received dangerous or ineffective vaccines.

THE OMNIBUS AUTISM PROCEEDINGS

In the early 2000s, the VICP faced over 5,000 cases alleging that vaccines had caused autism. Rather than hear these cases on an individual basis, the VICP set up the Omnibus Autism Proceedings, in which they examined six cases to determine if there was a link between vaccines and autism. They specifically looked at cases claiming that the measles, mumps, and rubella (MMR) vaccine or any vaccine containing the mercury-based preservative thimerosal might lead to autism.

The proceedings lasted from 2002 to 2010. Dr. Zimmerman was brought in by Department of Justice (DOJ) lawyers as an expert medical witness in support of the defense. Dr. Zimmerman is a pro-vaccine, board-certified, pediatric neurologist and former Director of Medical Research, Center for Autism and Related Disorders, Kennedy Krieger Institute, and Johns Hopkins University School of Medicine.

IN THE EARLY 2000S, THE VICP FACED OVER 5,000 CASES ALLEGING THAT VACCINES HAD CAUSED AUTISM.

This doctor is no slouch and has no inherent bias against vaccines.

That's why, in 2007, he made an excellent witness for HHS in the Omnibus Autism Proceedings and at first, things seemed to be going well. Regarding the case of Michelle Cedillo, Dr. Zimmerman testified that "there is no evidence of an association between autism and the alleged reaction to MMR and Hg [mercury], and it is more likely than not that there is a genetic basis for autism in this child."

It was exactly what the DOJ needed to protect the HHS from a massive liability and to silence any doubt about the vaccine-autism connection. But then, on Friday June 15th, 2007, Dr. Zimmerman spoke with Vincent Matanoski, the DOJ's lead attorney for the hearings, wanting to clarify his written expert opinion. The following is directly from Dr. Zimmerman's signed affidavit:

"I clarified that my written expert opinion regarding Michelle Cedillo was a case-specific opinion as to Michelle Cedillo. My written expert opinion regarding Michelle Cedillo was not intended to be a blanket statement as to all children and all medical science.

I explained that I was of the opinion that there were exceptions in which vaccinations could cause autism. I explained that my opinion regarding exceptions in which vaccines could cause autism was based upon advances in science, medicine, and clinical research of one of my patients in particular."

Shortly after clarifying his opinion to the DOJ attorneys, Zimmerman was contacted and informed that he would no longer be needed as a witness for HHS. He had been scheduled to testify on Monday June 18th, just three days after his clarification to attorneys.

VACCINE-ASSOCIATED PARALYTIC POLIO (VAPP)

The polio vaccines developed in the 1950s by Jonas Salk and Albert Sabin allegedly eradicated one of the most feared diseases of the 20th century. The media hailed the success of these vaccines as a modern-day miracle. However, the polio story has a much darker side that has mostly been kept a secret.

Both Sabin's live virus vaccine (given orally) and Salk's inactivated virus vaccine (given by injection) were far from perfect. In fact, in 1955 the vaccine used in

First and second graders at the Kit Carson School in San Diego line up for Salk Polio vaccine shots on April 16, 1955.

Photo: Bettmann via Getty Images

Source: https://www.commonwealthfund.org/blog/2021/philanthropy-time-pandemic-polio-covid-19

In the shipping room at Cutter Laboratories in Berkeley, Calif., workmen label packages of Salk polio vaccine.

Photo: Ernest K. Bennett/AP

Source: https://www.npr.org/sections/goatsandsoda/2015/04/12/398806324/jonas-salks-polio-vaccine-makes-a-comeback

Berkley, California infected some 200 children, leaving several dead and many paralyzed. Yet this incident proved minor compared to what was later discovered.

In order to grow large quantities of the poliovirus, scientists needed to use rhesus monkey kidney cells, which carried many different viruses. As a result, their polio vaccine became contaminated with a cancer-causing virus carried by these monkeys. This vaccine was given to almost 100 million people.

The virus found in this particular polio vaccine was SV40, or simian virus. It is present in human tumors, and research has established it to be a contributing factor in the rise of many types of cancer, including mesothelioma, bone, and brain cancer.

When the government became aware of this, it was downplayed for fear the public would stop accepting vaccination.

In 1959, Dr. Bernice Eddy of the National Institutes of Health discovered that the monkey kidney cells used to grow the poliovirus caused cancerous tumors when injected into hamsters. After reporting these findings, Eddy was excused from her job and assigned a new position. Not long after, the pharmaceutical company Merck made the same discovery.

In 1960, Merck scientists Dr. Maurice Hilleman and Dr. Benjamin Sweet (the Merck scientists who named the SV40 virus), published findings concluding that the polio vaccine was indeed contaminated with the SV40 virus. Hilleman later admitted (back then on tape) that Merck knew the vaccines were contaminated and continued to dispense them to the public anyway.

Subsequent in vitro studies in the 1960s demonstrated that SV40 caused brain tumors in animals and transformed normal human tissue into cancerous tissue. It was obvious that governing authorities wanted to keep this information under wraps, and so the SV40 scandal disappeared from the public eye for years.

COVID SHOTS AND MYOCARDITIS

A 2022 peer-reviewed analysis of studies on COVID-19 vaccine-induced myocarditis in young males showed that many studies hid an important safety signal by not providing "adequate stratification."

"Many studies lump everyone together to hide a legitimate safety signal," said Vinay Prasad, M.D., M.P.H., co-author of the analysis published last month in the European Journal of Clinical Investigation.

Stratification means isolating the people in a study into groups based on pertinent factors, such as age and sex, according to Prasad, a hematologist-oncologist and professor at the University of California, San Francisco.

By lumping all ages, sexes, dosages and COVID-19 vaccine manufacturers together, researchers *"have been hiding and obscuring very necessary dialogue — which is that our vaccine policies don't have to be the same for a 16-year-old man and an 87-year-old woman,"* Prasad said.

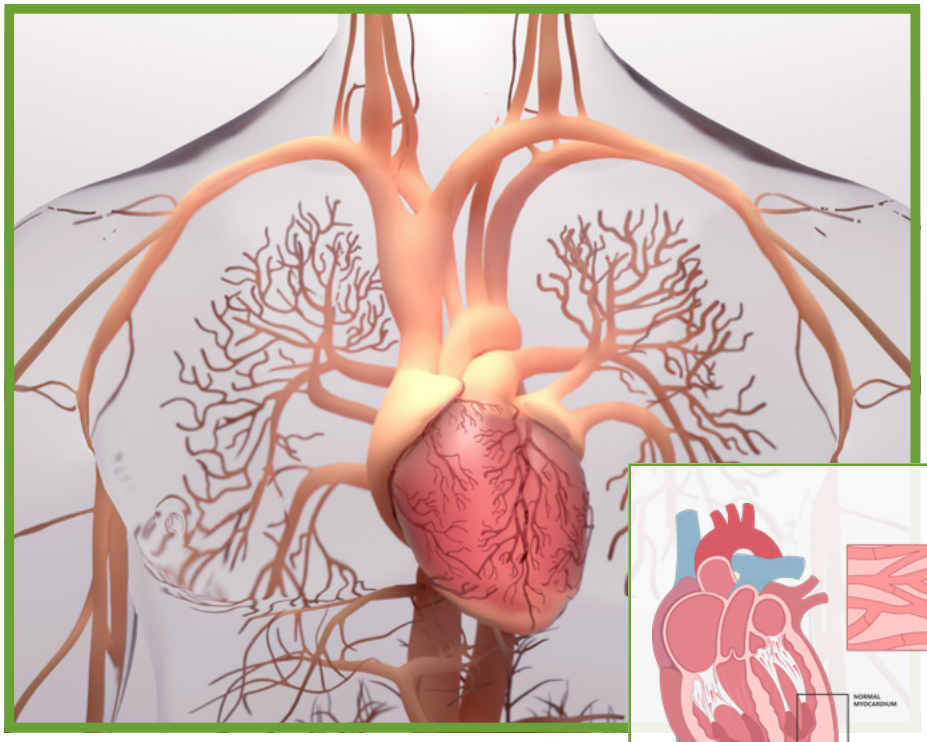
"Stratification is a basic skill for developing meaningful medical statistics," Prasad said. But the systematic review he conducted found that only a quarter of the studies used the four "elementary stratifying variables" (i.e. sex, age, dose number and manufacturer) when reporting the highest risk of myocarditis.

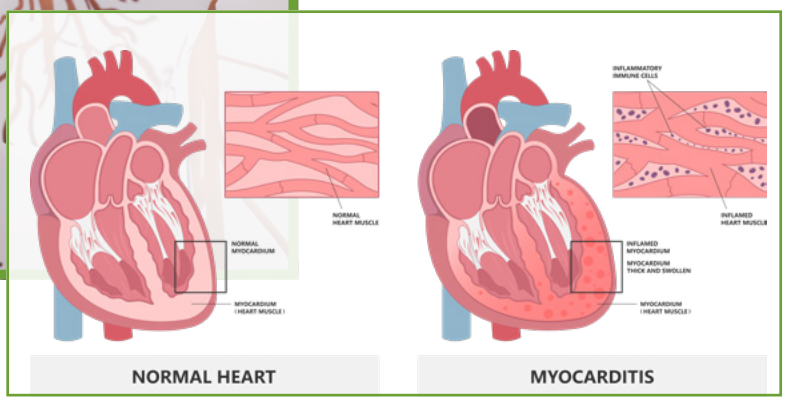
Prasad wrote that the net benefit of vaccination for a woman in her eighties was different from the net benefit of vaccination for a man in his late teens.

"As early as July 2021, with colleagues from mathematics, cardiology, and pediatrics, we worried that dose 2 [of the COVID-19 vaccine] was unfavorable in adolescent boys," Prasad said. *"With emerging data from the UK it was clear that for some products and some doses, myocarditis post vax exceeded myocarditis post illness."*

It turns out that when you look at myocarditis just in the highest-risk demographics —young men who get a second Moderna shot—the risk is substantially higher than when you lump "16-year-old boys with their great grandma."

"This should be obvious," Prasad added.





The inflammation associated with myocarditis can weaken the heart muscle, affecting its ability to pump blood effectively. This can lead to symptoms such as chest pain, fatigue, shortness of breath, rapid or irregular heartbeat, and fluid retention. In severe cases, it can result in heart failure, arrhythmias, or sudden cardiac arrest.

DENGUE VACCINE AND BREAKTHROUGH INFECTIONS

In 2015, the Philippines became the first Asian country to approve Sanofi's dengue vaccine, Dengvaxia. The Philippine Department of Health launched a campaign to introduce the vaccine, during which over 700,000 people received at least one dose. The drug was approved for children aged 9 or older.

But in late 2017, the vaccination program was suspended due to concerns that the vaccine was making the disease worse in some cases. A few days later, Sanofi released a statement reporting concerns that the vaccine could make dengue infection worse in recipients who had not had the disease before. They categorically denied using the Filipino population as "guinea pigs" to test their vaccine.

Receiving a dengue vaccine at an elementary school near Manila.

Photo: Celis/Agence France-Presse — Getty Images

Source: New York Times

https://www.nytimes.com/2017/12/01/world/asia/philippines-dengue-vaccine.html

Sanofi was ordered to stop selling, distributing, or marketing Dengvaxia, but the problems were even worse. After congressional inquiries and criminal charges brought against former President Benigno Aquino III, former Health Secretary Janette Garin, and other officials, The Philippine Department of Justice indicted officials from both Sanofi and the Philippine Health Department.

The DOJ said that at least 10 deaths had been linked to Dengvaxia, even though Sanofi insisted that it was "safe and effective."

MRNA PRESENT IN BREAST MILK OF VACCINATED WOMEN

A 2022 study published on the JAMA network concludes that mRNA from COVID vaccines can be transmitted in small amounts through breast milk. The authors of the study examined 11 "lactating individuals," after getting either the Pfizer or Moderna mRNA shots.

According to the study's authors: "The initial messenger RNA (mRNA) vaccine clinical trials excluded several vulnerable groups, including young children and lactating individuals. **1.** The US Food and Drug Administration deferred the decision to authorize COVID-19 mRNA vaccines for infants younger than 6 months until more data are available because of the potential priming of the children's immune responses that may alter their immunity. **2.** The Centers for Disease Control and Prevention recommends offering the COVID-19 mRNA vaccines to breastfeeding individuals, although the possible passage of vaccine mRNAs in breast milk resulting in infants' exposure at younger than 6 months was not investigated. This study investigated whether the COVID-19 vaccine mRNA can be detected in the expressed breast milk (EBM) of lactating individuals receiving the vaccination within 6 months after delivery."

OF THE LACTATING WOMEN STUDIED, NEARLY HALF WERE FOUND TO HAVE MRNA FROM THE COVID SHOTS IN THEIR BREAST MILK UP TO 45 HOURS AFTER RECEIVING THE JAB.

Of the lactating women studied, nearly half were found to have mRNA from the COVID shots in their breast milk up to 45 hours after receiving the jab. We've discussed the risks of these shots at length. **As it turns out, we may also be poisoning the most vulnerable among us—newborns.**

CHRONIC DISEASE INCREASES WITH MORE CHILDHOOD VACCINES

You may be surprised to learn that many of the serious injuries resulting from vaccines are listed right inside most vaccine package inserts as potential adverse events. The package insert for MMR, for example, lists panniculitis, vasculitis, pancreatitis, diabetes, thrombocytopenia, arthritis, anaphylaxis, encephalitis, serious neurological disorders, aseptic meningitis, pneumonia, Stevens-Johnson syndrome, retinitis, epididymitis, and death as possible adverse effects resulting from the vaccine.

Health authorities know full well that developing children have a higher than normal risk of becoming seriously injured or dying from approved vaccines. This is why a growing number of parents are making the decision to opt-out or minimize the number of vaccines their children receive.

Consider the following statistics and ask yourself: "Could this have anything to do with the burgeoning childhood vaccination schedule?"

- **54% percent of children living in America today have been diagnosed with one or more chronic illness (many of which are listed in vaccine package inserts as possible adverse effects)**
- **One in six children has a learning disability**
- **17% of children are obese**
- **10% of children are asthmatic**
- **30% of the young adult population has a mental illness**
- **One in 68 children has autism–and if current trends continue, one in two children will be autistic by the year 2025**
- **More than 10,000 new cases of childhood cancer are diagnosed every year**

COVID SHOTS OFFICIALLY MORE DANGEROUS THAN COVID

A 2022 study coming from Oxford, Washington, Toronto, Harvard, and John Hopkins Universities, looked at 18-29-year olds boosted with an mRNA vaccine and what they found was this: *"Using CDC and sponsor-reported adverse event data, we find that booster mandates may cause a net expected harm: per COVID-19 hospitalization prevented in previously uninfected young adults, we anticipate 18 to 98 serious adverse events, including 1.7 to 3.0 booster-associated myocarditis cases in males, and 1,373 to 3,234 cases of grade ≥3 reactogenicity which interferes with daily activities."*

To put it another way: **for those below 30 years old, vaccines are more harmful than COVID by a factor of 18-98%.** The study continues:

"Given the high prevalence of post-infection immunity, this risk-benefit profile is even less favorable. University booster mandates are unethical because:

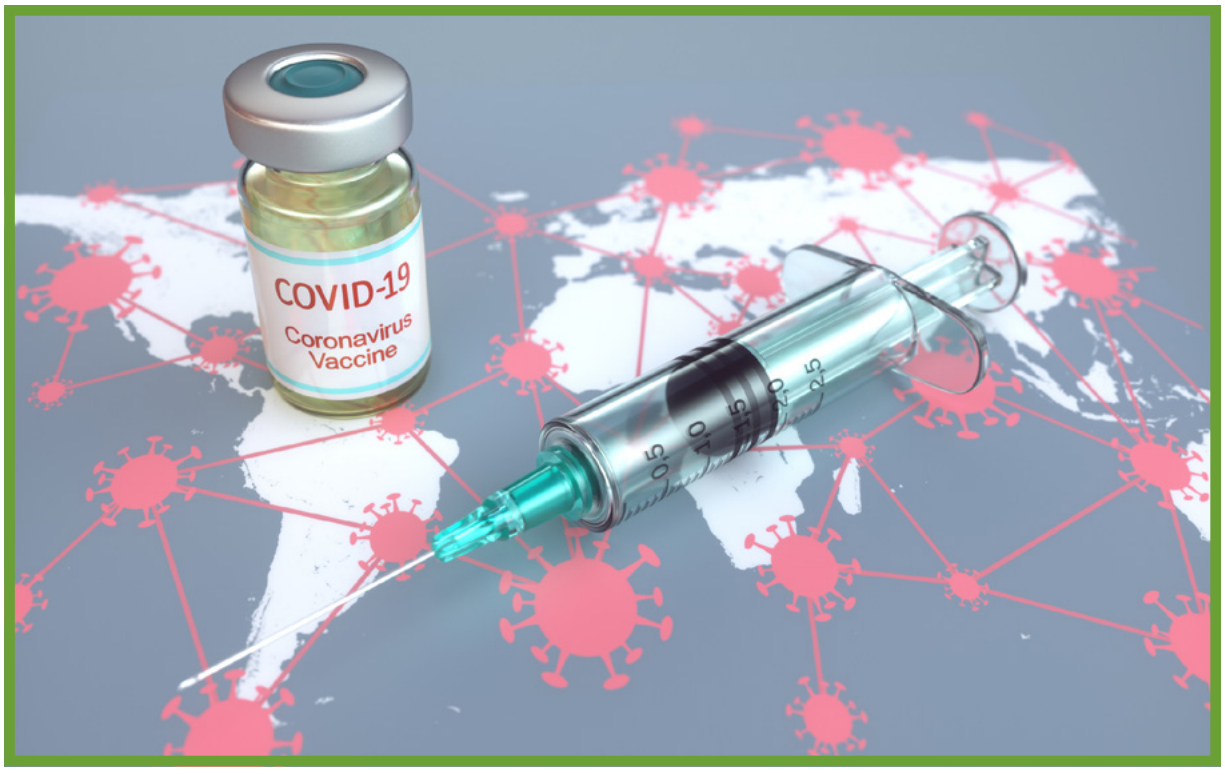
1| **No formal risk-benefit assessment exists for this age group**

2| **Vaccine mandates may result in a net expected harm to individual young people**

3| **Mandates are not proportionate: expected harms are not outweighed by public health benefits given the modest and transient effectiveness of vaccines against transmission**

4| **US mandates violate the reciprocity principle because rare serious vaccine-related harms will not be reliably compensated due to gaps in current vaccine injury schemes**

5| **Mandates create wider social harms. We consider counter-arguments such as a desire for socialization and safety and show that such arguments lack scientific and/or ethical support."**



MORE POLIO VACCINE SCANDALS

In the 1990s, a young Italian pathologist named Dr. Michele Carbone discovered a link between mesothelioma and certain brain, bone, and lymphatic cancers, and the SV40 virus. He tested lung tissue from cancer patients, which revealed the presence of the SV40 virus, and every single one of the hamsters tested with the virus developed mesothelioma and died within seven months.

Carbone published his findings in 1994 in a leading cancer research journal. For the first time, hard evidence showed (and was made public) that the SV40 could cause cancer in humans, and the long-forgotten scandal of the 1960s awakened from its slumber.

In 1996, in an attempt to refute Carbone's research, Dr. Howard Strickler and Dr. Keerti Shah responded with reports saying they could not detect SV40 in human tumors. Interestingly, Merck and Pfizer were paying Shah at the time for consulting, specifically on SV40. Strickler and Shah also both performed their research in pharmaceutical sponsored laboratories.

Later, in 2003, Shah testified before Congress that Strickler compromised a study by interfering with its controls. Strickler had conflicts of interest as he was a consultant/advisory board member for Merck and GlaxoSmithKline.

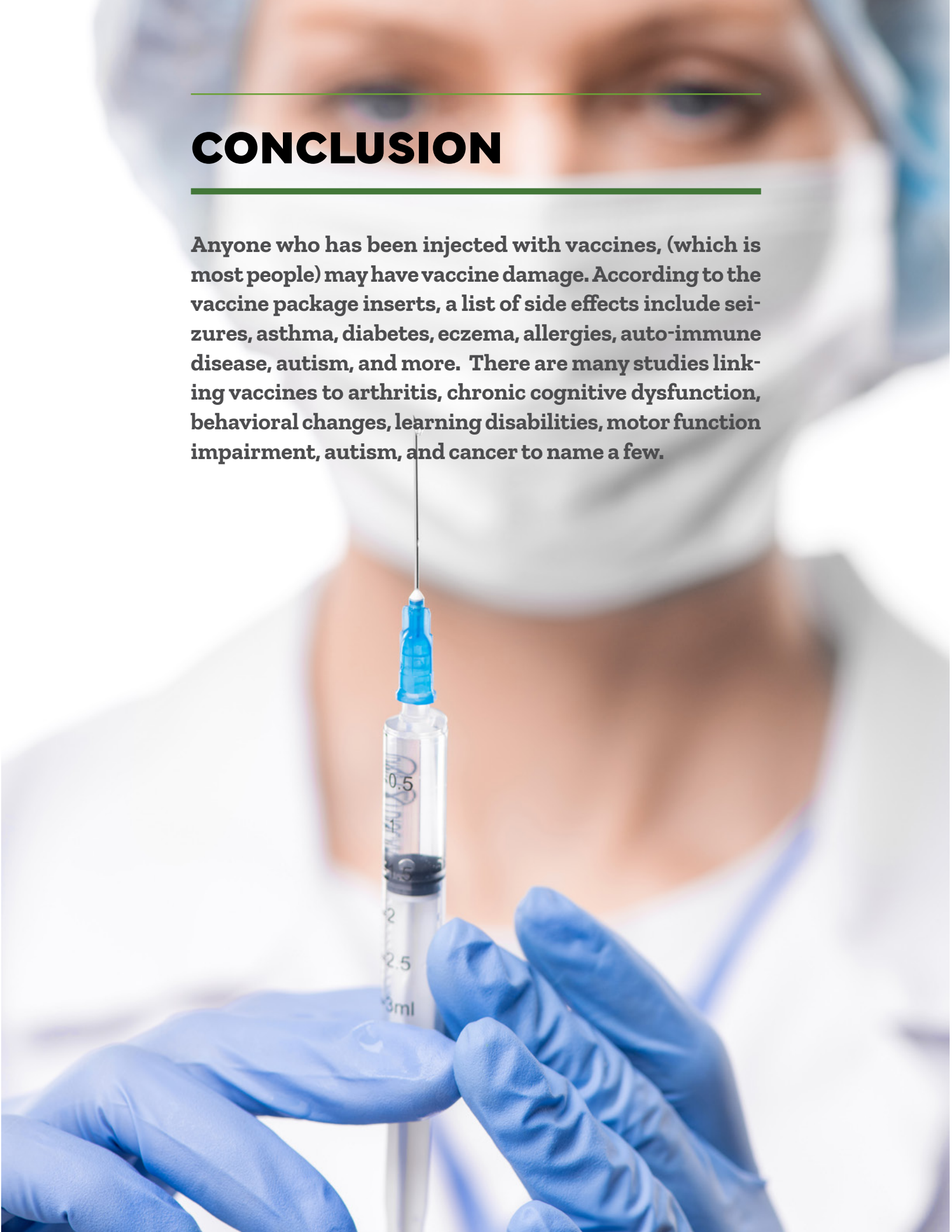
Dr. Michele Carbone, director of the Cancer Research Center of Hawaii, points to an image from a patient with mesothelioma, his research specialization.

Photo: Craig T. Kojima / Ckojima@Staradvertiser.com

Source: https://www.staradvertiser.com/2011/02/11/editorial/name-in-the-news/michele-carbone/

CONCLUSION

Anyone who has been injected with vaccines, (which is most people) may have vaccine damage. According to the vaccine package inserts, a list of side effects include seizures, asthma, diabetes, eczema, allergies, auto-immune disease, autism, and more. There are many studies linking vaccines to arthritis, chronic cognitive dysfunction, behavioral changes, learning disabilities, motor function impairment, autism, and cancer to name a few.



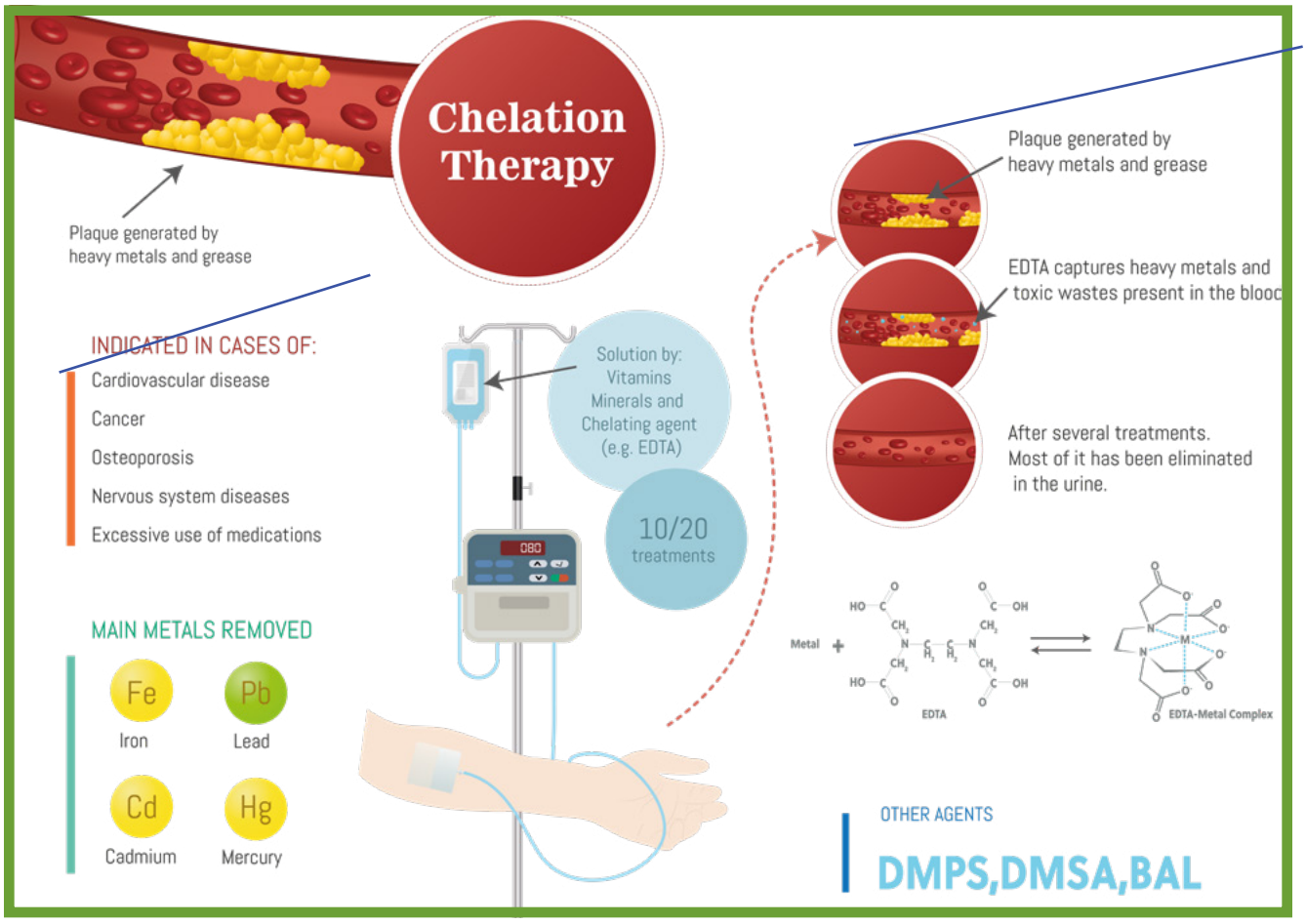
HOW TO MINIMIZE VACCINE DAMAGE

CHELATION THERAPY HELPS REVERSE DAMAGE CAUSED BY VACCINES

One of the most effective ways to rid your body of mercury, aluminum, and various other toxic metals found in vaccines is to undergo comprehensive chelation therapy. Chelating agents act as magnets for toxic metals, pulling them from their hiding places in cellular tissue and delivering them to flushing pathways so they can be removed from the body.

Intravenous chelation therapy is probably the most effective way to remove these metals, but you can also perform oral chelation therapy at home.

Dr. Yoshiaki Omura, MD, a New York-based general practitioner and cardiologist with more than 50 years of experience in his field, accidentally discovered (while treating his patients for eye infections) that cilantro (aka Chinese parsley), is a powerful natural chelator of metals and other neurotoxins.



CILANTRO: NATURE'S REMEDY FOR TOXIC METAL ACCUMULATION

Dr. Dietrich Klinghardt, MD, PhD, from the University of Geneva in Switzerland developed a special chelation protocol that involves consuming a minimum of five grams of cilantro, or about one teaspoon, per day. He found that this protocol effectively removes mercury and other toxic metals from the brain and other bodily tissue in much the same way as intravenous chelation therapy.

Many of the key components of Dr. Klinghardt's protocol are things you should be doing anyway to keep your body toxin-free. His high-protein, mineral-rich, fatty acid-dense, high-fluid program includes doing the following:

- **Supplementing with clean whey protein from cows or goats, since whey contains the nutrient precursors to detoxification agents such as ceruloplasmin, metallothionein, and glutathione.**

- **Supplementing with bioavailable nutrient compounds like selenium, zinc, manganese, germanium, and molybdenum that help block toxins from attaching themselves to binding sites meant for minerals.**

- **Consuming plenty of electrolytes in the form of sodium, potassium, calcium, and magnesium. All of these help draw toxins out of cellular tissue and push them towards the lymphatic and venous systems, from where they can then be eliminated**

- **Consuming plenty of healthy lipids such as EPA- and DHA-rich fish oil, which helps protect the central nervous system from being targeted by fat-soluble metals.**

- **Drinking plenty of clean water daily, which helps flush metals and other toxins from the body so they don't accumulate in the kidneys and other vital organs.**

CHLORELLA AND CHLORELLA GROWTH FACTOR

Another key component to any effective metal detoxification protocol is chlorella. Though harder for some people to digest than cilantro, this freshwater alga has an incredible metal-absorbing capacity due to its mucopolysaccharide membrane, which draws nearly all types of environmental toxins.

Chlorella also helps repair and restore the body's own natural detoxification systems so they can perform better when faced with the onslaught of toxins found in vaccines, our diet, and our environment.

In addition, chlorella contains a variety of lipids, proteins, amino acids, and other nutrients like porphyrins that each serve their own unique purpose in the detoxification process. These nutrients make chlorella an effective immunity booster as well as a digestion enhancer. Both of which are critical in the overall detoxification process.

Dr. Klinghardt recommends starting off with one gram of chlorella three or four times daily for maintenance detoxification as part of your everyday detoxification routine. For more aggressive detoxification following vaccination, he advises taking three grams of chlorella three or four times daily for an entire week, then backing down to the maintenance regimen for two to four weeks.

The best way to do this is in cycles. For example, one week of aggressive detoxification along with cilantro, followed by up to a month of maintenance detoxification before going back to the week-long aggressive detoxification, and so on.

If you wish, you can also take cilantro regularly rather than cycling it for a stronger detoxification effect. Just remember to time your chlorella doses 30 minutes before meals and just before bedtime for optimum results.

If taking dozens of chlorella tablets or many spoonfuls of chlorella every day sounds like too much of a chore, there's also chlorella growth factor (CGF), which is basically a concentrated form of chlorella. This heat-extracted concentrate contains high levels of chlorella peptides, proteins, and other nutrients that make

it a faster and more effective way to detoxify. One tablet of CGF is equivalent to about 20 tablets of chlorella!

National Integrated Health Associates (NIHA) has also developed a comprehensive Neurotoxin Elimination Protocol that builds upon the concepts put forth by Dr. Klinghardt in his chelation protocol. I highly recommend considering this advanced regimen as well if you're looking to deep-clean your body following a mandatory vaccine injection.

OTHER NUTRIENTS FOR POWERFUL DETOXIFICATION

Many people don't know this, but detoxification works best when an array of complimentary detoxifying agents are used in conjunction with one another. Chlorella, cilantro, trace minerals, and vitamins are an excellent way to start your detoxification process. There are also a variety of other foods and nutrients that can help accelerate the process and ensure the thorough and safe removal of vaccine toxins from your body.

APPLE PECTIN (and other pectin) is a type of soluble fiber found in the cell walls of various plants and fruits that helps regulate bowel movements. It reacts with stomach acid to produce substances that bind to toxins and help flush them from the colon.

ACTIVATED CHARCOAL has been used in nearly every corner of the world for thousands of years as a remedy for food poisoning. The adsorption and ionic properties of activated charcoal cause it to attract and bind to toxins for rapid elimination from the body.

ELDERBERRY is an amazing detoxifying food that's both powerful and gentle on the body, which is why many people give it to their children. An immune-boosting panacea, elderberry helps protect cells against viral and pathogenic invaders. It also boosts the body's production of toxin-fighting T-lymphocytes.

ORGANIC SULFUR is an all-in-one elixir for enhanced nutrition and detoxification. Sulfur is a critical cofactor for the other detoxifiers I've covered due to its ability to capture and eliminate nearly every known toxic substance from the body.

OMEGA-3 FISH OIL is rich in eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) which help the body manufacture more peroxisomes, which are necessary for proper metabolism. Peroxisomes are also the most important detoxifying cell organelles in the body. Without them the bloodstream would become overloaded with toxins.

GARLIC contains a unique class of compounds that contain sulfhydryl groups, which capture and remove mercury and other heavy metals from vital organs and cell tissue.

VITAMIN C works in tandem with magnesium to speed up the detoxification process in the bowels, which helps prevent mercury and other toxins from being reabsorbed back into the body through the intestines. Just be careful to dose vitamin C as far away from chlorella as possible, though. Preferably right after you eat a meal.

ROYAL JELLY is particularly beneficial if you or someone you know has recently been vaccinated with an attenuated vaccine containing live virus. Examples of live virus vaccines include MMR, influenza, and DTaP Royal jelly has been shown to have incredible efficacy in fighting more than 130 different infectious agents. Royal jelly is also packed with all eight essential amino acids, and exerts unparalleled immune protection.

SILICA has been scientifically shown to help prevent aluminum from being absorbed through the intestinal tract. Many people consume silica-rich mineral water as a way to ensure that any lingering aluminum is properly flushed from the body.

DANDELION ROOT is a potent lipotropic herb that helps flush fat deposits from the liver to prevent chronic liver congestion. Dandelion root also helps improve the function of the pancreas, stomach, spleen, and kidneys due to its diuretic properties.

WHEATGRASS has an amazing ability to both neutralize toxins and pull them from cell tissue and organs.

SPIRULINA is an alga much like chlorella that's packed with detoxifying vitamins, minerals, amino acids, and fatty acids. Like chlorella, spirulina attracts metals and other toxins for removal from the body.

HOMEOPATHIC ANTIDOTES exist for a wide variety of vaccines including influenza, MMR, and chickenpox. Consulting with a homeopath or naturopathic doctor will give you a clearer understanding of how these work.

MASSAGE is an important part of the detoxification process because it helps get your body's lymphatic system moving. Your lymph nodes act as traps for cell waste, viruses, bacteria, and other toxins—so making sure that they work properly is crucial for staying healthy.

DETOXIFICATION BATHS are another option for drawing toxins out of your body. You can add magnetic clay and essential oils to your bathwater to help draw out toxicants such as mercury, cadmium, aluminum, arsenic, and more. There are also detoxification bath recipes that utilize Epsom salts, baking soda, and apple cider vinegar.

FRENCH GREEN CLAY has been used for thousands of years (mostly in Europe) as an internal detoxification supplement due to its ability to remove toxins and stimulate the immune system. This popular healing clay can also be applied topically to a vaccine injection site to draw toxins out of the skin.

TOXAWAY MICROCURRENT FOOT BATH is part of the Klinghardt Neurotoxin Elimination Protocol, and for good reason. When combined with oral cilantro supplementation, this foot bath help excrete toxins via the lymphatic system and the plantar skin (soles of the feet). They also stimulate both the liver and kidneys to release toxins.

SODIUM BICARBONATE or baking soda is a widely recognized buffering agent for toxins. Many cancer patients are given baking soda during chemotherapy treatments because it helps balance the pH levels of their blood and renders any circulating toxic compounds less harmful

It is much better to support the body through nutrition and natural supplements than to inject harmful pathogens and toxins into it. Eating a diet rich in organic fresh fruits and vegetables along with adequate rest, clean water, sunshine, exercise and minerals will go a long way in keeping the immune system strong and the body running well.

At the end of the day, a strong, healthy, pure, untouched immune system will fight most illnesses, including cancer.

Toxic chemicals have no place inside the human body and the sooner the medical establishment recognizes this, the faster we will see a health progression instead of a continual regression. We must stop adding fuel to the fire with more and more vaccines.

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ABOUT THE AUTHORS

Ty & Charlene Bollinger are devoted Christians, health freedom advocates, health researchers, documentary film producers, and best-selling authors.

After losing several family members to conventional cancer treatments, they set out to learn the truth about cancer and the cancer industry, working together tirelessly to help others to learn the truth that sets them free to live healthy, happy lives.

Ty & Charlene's heartbreak and grief coupled with their firm belief that chemotherapy, radiation, and surgery were NOT the most effective treatments available for cancer patients, led them on a path of discovery.

On their journey, they interviewed cutting-edge scientists, leading alternative doctors, and groundbreaking researchers to learn about hidden alternative cancer treatments. What they uncovered inspired them to create "The Truth About Cancer" and "The Truth About Vaccines" and multiple documentary mini-series (docu-series) including The Quest for The Cures, The Truth About Cancer: A Global Quest, Eastern Medicine: Journey Through Asia, Quest for The Cures [FINAL CHAPTER], The Truth About Pet Cancer, The Truth About Vaccines, and Propaganda Exposed [UNCENSORED].
Ty and Charlene speak frequently at seminars, expos, conferences, and churches.

Their message is clear:
CANCER IS NOT A DEATH SENTENCE. THERE IS ALWAYS HOPE.

Charlene Bollinger

Ty Bollinger