

Gotterdamerung... of the Deep State Pandemic gods



Valhalla in flames, in an 1894 depiction by [Max Brückner](#), one of the original set designers for the opera

The "Götterdämmerung" (or Ragnarok if you are a Swedish speaker like me) of the self-appointed Covid gods is escalating towards its fiery end, as the frantic death throes of the Deep State sees it becoming increasingly enmeshed in its lies, fake news and misanthropic self-hatred (and I, for one, won't be sending flowers to their burning Viking ship). Signs of the end?

Here are some indicators that the Deep State vax gods have met their end. First, on June, 2021 it was reported the Association of American Physicians and Surgeons (AAPS), [conducted a survey of 700 physicians](#) and nearly [60% said they were not "fully vaccinated"](#) against COVID. This contrasts with the claim by the American Medical Association that 96% of practicing physicians are fully vaccinated. This was based on 300 respondents. The AAPS survey shows that physician support for the mass injection campaign is far from unanimous. The AAPS survey also showed that 54% of physician respondents were aware of patients suffering a "significant adverse reaction." Of the unvaccinated physicians, 80% said "I believe risk of shots exceeds risk of disease," and 30% said "I already had COVID."

Now, I slept through junior high math class, but even *I* can do *that* kind of math! Someone is lying (hint: probably the same team Fauci is on).

“It is wrong to call a person who declines a shot an ‘anti-vaxxer,’” states AAPS executive director Jane Orient, M.D. “Virtually no physicians are ‘anti-antibiotics’ or ‘anti-surgery,’ whereas all are opposed to treatments that they think are unnecessary, more likely to harm than to benefit an individual patient, or inadequately tested.”

The AAPS survey also showed that 54 percent of physician respondents were aware of patients suffering a “significant adverse reaction.” Of the unvaccinated physicians, [80 percent said “I believe risk of shots exceeds risk of disease,”](#) and 30% said “I already had COVID.” [Other reasons for declining the shot](#) included unknown long-term effects, use of aborted fetal tissue, “it’s experimental,” availability of effective early treatment, and reports of deaths and blood clots. Full story [here](#).

Next, someone (hint: I think we can safely guess it was *not* MAGA people, right?) attempted to *murder a* pastor Artur Pawlowski, who rejected the fake lockdowns in Alberta (this, after he originally escaped communist Poland back in the day) after having the temerity to hold a church service in Calgary without masks... which was just before they did a drug lord-style arrest of him on *the* major highway through the city. The pastor's family and his church have been subject to extensive harassment and criminal activity in the weeks since his dramatic and highly publicized roadside arrest by Calgary police. It started with graffiti and vandalism at Pastor Artur's church (**nope no “hate crime” here!!**). Then it escalated to vandals leaving nails, garbage, and animal feces strewn about the church parking lot. Not long after, a fire was set at Pastor Artur's family home. The following week, he was violently assaulted at a grocery store in front of his young daughter. But it hasn't stopped there. In the latest attack, it appears that someone loosened the lug nuts and slashed a tire on the pastor's family truck, which lost its wheel when a family friend took it out for a wash. Imagine if he had been on the highway doing 62 MPH/100 KMH. Rebel News (nope, not CNN... that would only be if he had been a gay man identifying as a dolphin) spoke to Pastor Artur's wife, Marzena, shortly after the incident to find out what happened - [here's what she had to say](#), full story [here](#).

This was just before after another pastor in Tillsonburg, Ontario went in front of a judge to potentially serve with [SIX years in prison and be fined a quarter million dollars](#) for daring to not wear a mask in church, as well as another pastor in Alberta, where I lived for years, who dared to pastor his congregation, in a freely chosen *private* meeting, *was hunted down with police helicopters* (I know you think I am joking, but I am not... see [here](#)). The Deep State is becoming more and more frantic for a reason.

This all reminds me of another refusenik, Dr. Timothy Ball, formerly of Univ. of Winnipeg, who did a documentary "The Great Global Warming Swindle" (the ugly sister of the Covid swindle. What? Have you already forgotten the [ClimateGate](#) scam??) For his heresy and dedication to science, Ball has received hate mail with such messages as, "If you continue

to speak out, you won't live to see further global warming,” to which he replied – and could just as easily be applied to those objecting to the lockdown - “Global warming (and now Covid) is supposed to be ‘science.’ It's hard to imagine Niels Bohr responding to Albert Einstein's letter questioning quantum mechanics with a statement like: ‘If you continue to speak out, you won't live to see further quantum mechanics...’” Ball then added about the faux religion of Greenism, which applies equally to the Covid cult, “Only a false religion needs hate mail, threats, courts of inquisition and Hollywood movies to sustain it.”

Next, the Mayo Clinic was outed to be in on the scam. The American Inst for Economic Research author [Jon Sanders](#) [wrote on June 4, 2021](#)

Here's what the Mayo Clinic once wanted people to know in its page on "[Herd Immunity and COVID-19](#)" with respect to natural immunity: “[T]hose who survived the 1918 flu (influenza) pandemic were later immune to infection with the H1N1 flu, a subtype of influenza A.” The Mayo Clinic pointed out that H1N1 was during the 2009-10 flu season, which would be 92 years later. That finding attested to just how powerful and long-lived natural immunity could be.

Natural infection

Herd immunity can also be reached when a sufficient number of people in the population have recovered from a disease and have developed antibodies against future infection. For example, those who survived the 1918 flu (influenza) pandemic were later immune to infection with the H1N1 flu, a subtype of influenza A. During the 2009-10 flu season, H1N1 caused the respiratory infection in humans that was commonly referred to as swine flu.

As can be [seen from the Internet Archive](#), however, sometime after April 14 the Mayo Clinic removed that compelling historical aside:

Natural infection

Herd immunity can be reached when enough people in the population have recovered from a disease and have developed protective antibodies against future infection.

The Mayo Clinic also reoriented its page to feature vaccination over “the natural infection method” (method?) and added a section on “the outlook for achieving herd immunity in the U.S.” This new section stated that “it’s not clear if or when the U.S. will achieve herd immunity” but encouraged people nonetheless that “the FDA-authorized COVID-19 vaccines are highly effective at protecting against severe illness requiring hospitalization and death ... allowing people to better be able to live with the virus.”

Why, from people who know better, is there so much interest in downplaying or erasing natural immunity? Of course, you, gentle reader, know the answer.

Truth is... even us poor, unwashed masses are now on to them, even in flyover country. Truth is, this isn't their first cow-dung filled rodeo they have attempted, but it is just as ham-handed as, say, their fake global warming hockey stick.



You know, I got to thinking about previous Covid style gambits, and recalled not only the [Tuskegee syphilis experiments](#), where they gave blacks syphilis and left them untreated; but also - not to be racist- where they also messed with whites in mind control experiments with MKUltra, spraying San Francisco with a simulated bio weapon back in the 1950s (Operation Sea-Spray. Operation Sea-Spray was a 1950 U.S. Navy secret experiment in which *Serratia*

marcescens and *Bacillus globigii* bacteria were sprayed over the San Francisco), and then overseas, including biological “[experiments](#)” in [Guatemala in 1947-8](#) (Nuremburg has *just* gotten over!) (and you might want to even fold in things like Operation Gladio in Italy – although the latter was political, not biological, it still shows the games the state can play, while gas-lighting everyone. Of course, exposing soldiers to radiation was also part of this whole world view. Internationally, you probably remember all about Joseph Mengele, Aktion T-4, etc., but the lesser knowns Japanese Unit 731 (Chinese victims were referred to as “logs”) was similar. The truth is, the sickness – which isn't Covid, but moral sickness – is everywhere around the world. It is, as Solzhenitsyn wrote, that the line between good and evil runs through each of our own *individual* hearts.

And Canadians are getting “P.O’d” now too. Derek Sloan, MP (Hastings-Lennox & Addington) hosted a news conference on Parliament Hill on June 18th, 2021 that included two scientists (University of Guelph and University of Western Ontario) and an Ontario physician that spoke out about the Covid shot and how Covid is being handled within Canada, based on their professional research and experience (32 min + Q&A). Nope, again, not on Youtube, but Bitchute: <https://www.bitchute.com/video/UAtSYQEvP1VO/>



**Amazing isn't it?
No masks, no social distancing, no
healthcare, no isolation, no
quarantining, not staying at home...
Just living their lives as normal,
and there are not dead homeless
everywhere? Weird right?**

Next at bat – and I am not referring to those bats that flew 600 miles from their native cave and apparently landed in some poor schmoe's wonton soup - in their desperation is the “variants” scare. Yes, like many viruses, it continues to mutate. Renowned vaccine developer Geert Vanden Bossche says) it's mutating about every 10 hours. Might this explain why fully vaccinated get Covid still? Are we supposed to get a vaccine every week?

However, these are unlikely to pose significantly differing risk to people with

natural immunity compared to the original, as resistance is primarily based on your T cells, which have been shown to recognize and attack variants that are up to 80% dissimilar. SARS-CoV-2 variants are at most 0.3% dissimilar from the original, which means T cell immunity will easily recognize and protect against them.

The newer Delta variant (or any other variant for that matter? According to Michael Yeadon, Ph.D., a life science researcher and former vice-president and chief scientist of allergy and respiratory research at Pfizer, the answer is a firm “no.” In his interview in a full-length documentary “[Planet Lockdown](#)”, Yeadon explains why. I quote at length due to the significance of this, relative to the next attempt at lockdowns, which is surely coming:

“Basically, everything your government has told you about this virus, everything you need to do to stay safe, is a lie,” Yeadon says. “Every part of it ... None of the key themes that you hear talked about — from asymptomatic transmission to top-up vaccines [i.e., booster shots] — not one of those things is supported by the science. Every piece is cleverly chosen adjacently to something that probably is true, but is itself a lie, and has led people to where we are right now.” When it comes to your susceptibility to variants, mutated versions of SARS-CoV-2, your resilience is not dependent on antibodies as much as it's dependent on your T-cell immunity, also known as cellular immunity. Yeadon explains: *“You've got four or five different arms of the immune system: innate immunity, mucosal, antibody, T-cells and complement[ary systems]. There are all of these different wonderful systems that have integrated, one with another, because it needs to defend you against all sorts of different threats in the environment. What I'm telling you is that the emphasis on antibodies in respect of respiratory viral infections is wrong, and you can establish that quite easily by doing some searching ... I'm not saying antibodies have no role, but they're really not very important. This has been*

proven. There are some people in whom a natural experiment has occurred. They have a defect and they actually don't make antibodies, but they're able to fight off COVID-19, the virus SARS-CoV-2, quite well.

The way they do that is, they have T-cell immunity, cellular immunity. [T-cells] are cells that are trained to detect virus-infected cells and to kill those cells. That's how you defend yourself against a virus. So, all of these mentions of antibody levels, it's just bunk. It is not a good measure of whether or not you're immune. It does give evidence that you've been infected, but their persistence is not important as to whether you've got immunity ... We've known this for decades. We've known about T-cells for decades. They were clearly in my undergraduate textbooks. And we've known about their importance in defending you against respiratory viruses since probably the 1970s, certainly the 1980s ... It's quite normal for RNA viruses like SARS-CoV-2, when it replicates, to make typographical errors. It's got a very good error detection, error correction system so it doesn't make too many typos, but it does make some, and those are called 'variants.' It's really important to know that if you find the variant that's most different from the sequence identified in Wuhan, that variance ... is only 0.3% different from the original sequence.

I'll say it another way. If you find the most different variance, it's 99.7% identical to the original one, and I can assure you ... that amount of difference is absolutely NOT possibly able to represent itself to you as a different virus. [So] when your government scientists tell you that a variant that's 0.3% different from SARS-CoV-2 could masquerade as a new virus and be a threat to your health, you should know, and I'm telling you, they are lying."

Yeadon is saying is that a virus cannot mutate into a version that is so dissimilar from the original that your body cannot identify it. If you have T cell immunity, your immune system will recognize the mutated virus and take care of it, just as it would with the original version of the virus. Mercola notes that earlier in the pandemic, scientists obtained blood from patients who had been sickened with the SARS virus 17 or 18 years ago. SARS-CoV-1, responsible for that SARS outbreak, is only 80% similar to SARS-CoV-2. They wanted to know if the immune systems of these patients would be able to recognize SARS-CoV-2 — which they did. They still had memory T-cells against SARS-CoV-1, and those cells also recognized SARS-CoV-2, despite being only 80% similar. Now, if a 20% difference was not enough to circumvent the immune system of these patients, why should you be concerned with a variant that is at most 0.3% different from the original SARS-CoV-2? And why would we need booster shots for these near-identical variants?

And those forthcoming booster shots? Yeadon has a few words for that, too:

"You should be terrified at this point, as I am, because there's absolutely no possible justification for their manufacture. There's no possible benign interpretation of this. I believe they [the booster shots] are going to be used to damage your health and possibly

kill you. Seriously. I can see no sensible interpretation other than a serious attempt at mass depopulation. This will provide the tools to do it, and plausible deniability. They'll create another story about some sort of biological threat and you'll line up and get your top-up vaccines, and a few months or a year or so later, you'll die of some peculiar inexplicable syndrome. And they won't be able to associate it with the vaccines. That's my belief — that they're lying to you about variants so they can make damaging top-up vaccines that you don't need at all. I think they will be used for malign purposes ...”

Is Yeadon right? Doesn't matter. Either way he will be met with the mantra that the left, like trained one trick ponies, *will always and ever mindlessly parrot*: “conspiracy theory!” (that is, unless it is Russiagate or the lab origin of the virus, where it turns out their cat-calling of “conspiracy” was wrong). But in any event, even if the intent is not malign, the actual effects could still be the same – hundreds of thousands of deaths, all driven by a “madness of crowds/Edward Bernays propaganda” drive that pushes people to commit personal, or national suicide, all over a virus that is, for this under 21, *three to four times LESS LETHAL* than the regular season flu (see Dr. Jay Bhattacharya, earlier in this paper⁰. By any measure could this name calling seem scientific, or even rational?

And after Yeadon there is the 2008 Nobel Prize winner in medicine, virologist Luc Montagnier, who stated: The vaccines don't stop the virus, they “*feed the virus,*” and facilitate its development into stronger and more transmittable variants. These new virus variants will be more resistant to vaccination and may cause more health implications than their “original” versions. In his own words, the vaccine programme is an “*unacceptable mistake.... a scientific error as well as a medical error.*” He further explains that “*there are antibodies, created by the vaccine,*” forcing the virus to “*find another solution*” or die. This is where the variants are created. It is the variants that “*are a production and result from the vaccination.*” The mutation and strengthening of the virus, as [New American recounts the Montagnier interview](#), occurs owing to the phenomenon known as Antibody Dependent Enhancement (ADE). ADE is a mechanism that increases the ability of a virus to enter cells and cause a worsening of the disease. ADE occurs when the antibodies generated during an immune response recognize and bind to a pathogen, but they are unable to prevent infection. Instead, these antibodies act as a “Trojan horse,” allowing the pathogen to get into cells and exacerbate the immune response. In fact, Montagnier [goes so far as to say “there is no hope”](#) for those who have received the shot, and “*they will all die from antibody dependent enhancement... we must prepare to incinerate bodies.*” In this interview, he also states that new infections have exploded *since* the vaccines started and that “*it is the vaccination that is creating the variants.*” Yes, the shots are making it worse. Health Impact News has another story on this topic [here](#), while Mercola discussed how ADE could destroy your immune system in depth [here](#), including delving into whether vaccinated people themselves will be more susceptible to variants [here](#).

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ability to enter and infect your cells, resulting in more severe disease than had you not been vaccinated.

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Also, COVID vaccines possibly may not work for millions with underlying conditions, as The Defender [reported](#) May 19, some experts are questioning the CDC's recommendation that immunocompromised people get vaccinated after new research showed 15% to 80% of people with underlying health disorders and those on immunosuppressive medications mount few, if any, antibodies to COVID vaccines.

Then there was the summer, 2021 "Delta variant" scare. Yet, research by Public Health England (PHE) suggested two doses of [Pfizer's mRNA COVID shot](#) is 88% effective against the Delta variant (remember a 1% death rate has everyone in a tizzy, so why is 88% an acceptable number??), while [AstraZeneca's DNA injection](#) is "supposedly" 60% effective. After a single dose, either of the shots was only 33% protective against symptomatic illness. In other words as the "Delta" Covid is spreading across Europe and the United States, and the "first generation" of Covid vaccines are deemed virtually worthless against it, and One World Health Organization's lackeys is warning of "[reduced efficacy](#)" of the Covid jabs, the truth is the shots are either useless against the variants, or the vaccines are actually creating and spreading illness. .

Truth is, as [vaccine-induced deaths](#) are accelerating from the Covid-19 jabs, the mainstream media is frantically trying to shift blame away from the shot onto the newest virus du jour... which of course may be just a cover story for actual [vaccine deaths](#). The truth is, just like the fake elections of Nov. 2020, where you noticed the left had only one basic trick – the Dominion fake voting machines – similarly, the Deep State types will just re-trot out the same old pony for repeated shows, thinking to public will be too stupid to notice.... Just like they trotted out the same Dominion fake vote legerdemain in state after state in 2020. *Count on this same gambit.* The truth is ,while the Deep State has power and it is *clever*, it has neither intelligence, nor wisdom.

Similarly, Chile, which has one of the highest COVID-jab rates in the world, with 58% of the population having received two doses and 75% having received their first dose, authorities announced a blanket lockdown across the capital of Santiago, June 10, 2021. The lockdown came in response to the highest COVID-19 case numbers since the beginning of the pandemic.¹⁰

More importantly, even if the shot development is innocent, the Deep State is certainly pushing it to help bring about their fasco-Marxist Agenda 2030 Great Reset.



[As Mercola notes](#), but beyond the scope of this already lengthy paper, “the Great Reset is part of a parallel agenda built around [transhumanist ideologies](#), ideas and ideals, where man is merged with machine and biologically controlled through the use of nanotechnology and [digital surveillance.](#)” This, of course, is all predicated on their Malthusian presuppositions and ultimate hatred of, what one of their fellows, behaviourist psychologist BF Skinner, called “man qua man” (real, human man, that is). Rather, it appears the ideal for these transhumanists could well be the roboman illustrated here. If you are a woman looking for a date this Friday, might I suggest you skip this... .ummm... guy.

And all of the above, as we have seen, according to the CDC's own numbers, where Covid has a 99.74% survival rate overall even including the more vulnerable. Why would I take a risk on this vaccine, by admission from the manufacturers, doesn't actually stop infection or transmission, to help me overcome a something that has a .26% chance of killing me)actually in my own personal age range in the 60s it has about a .1% chance of killing me, and .01% chance of killing my kids). And those 500,000 reported deaths from Covid? As we all know by now, they count those that died WITH Covid as dying FROM Covid and even include people that [died in a MOTORCYCLE accident](#). Don't try this scam in jr. high math class, or you will be flunked. Until covid, *all* coronaviruses (common colds) were never listed as the primary cause of death when someone died of heart disease, cancer, diabetes, auto-immune conditions, or any other major co-morbidity.

According to [the CDCs own numbers](#), (scroll down to the section "Comorbidities and other conditions") only 6% of the deaths being attributed to covid are instances where covid seems to be the *only* issue at hand. If [the former CDC director](#) is correct and covid-19 was a lab-enhanced virus (see below), *a .26% death rate is still in line with the viral death rate that circles the planet every year.*

Oh yes. Fauci and six others own patents in the Moderna vax. Don't expect to see *that* on CNN any time soon. Yep, "the cheque's in the mail" – just not for *you*, dear reader. It's always about the money with these frauds. As is coming out now, Fauci is also implicated in the gain of function research, but that is beyond the scope of this paper.

Maybe the above explains all the censorship. Science, which is *supposed* to entertain questions, is being squelched by non-scientist or medically trained folks like Zuckerberg, Gates, et al, and by the sociology majors fake "fact checkers" on Twitter. What has happened to the scientific method of always challenging our assumptions? What happened to lively debate in this country, or at least in Western society? Why does anyone who disagrees with the WHO, or the CDC get censored so heavily? Is the science of public health a religion now, or is science supposed to be about debate? If someone says "the science is settled" that's how I know I'm dealing with someone who is closed minded.

The problem, as noted earlier, if Geert van den Bosshe is right, the covid vaccine may be putting so much pressure on the virus that we are accelerating its ability to mutate and become more deadly, and why the covid vaccines may be creating vaccine-resistant viruses (similar to anti-biotic resistant bacteria), and why, because of previous problems with Antibody Dependent Enhancement, we may be looking at a mass casualty event in the next few months/years. Interview [here](#); Nobel Prize winner in 2008 in medicine and virologist [Luc Montagnier feels similarly](#), stating "*The vaccines don't stop the virus; rather, they do the opposite — they "feed the virus," and facilitate its development into stronger and more transmittable variants. These new virus variants will be more resistant to vaccination and may cause more health implications than their "original" versions. In his own words, the vaccine programme is an "unacceptable mistake.... a scientific error as well as a medical error."* He further explains that "*there are antibodies, created by the vaccine, forcing the virus to find another solution or die.*" This is where the variants are created. In fact, he states it is the variants that "*are a production and result from the vaccination.*" These mutations and strengthening of the virus, as [New American recounts the Montagnier interview](#), occurs owing to the phenomenon known as Antibody Dependent Enhancement (ADE). ADE is a mechanism that increases the ability of a virus to enter cells and cause a worsening of the disease. ADE occurs when the antibodies generated during an immune response recognize and bind to a pathogen, but they are unable to prevent infection. Instead, these antibodies act as a "Trojan horse," allowing

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Pathologist Dr. Roger Hodkinson, educated at Cambridge but now practicing in Canada, in a May 27, 2021, details in full detail how the Covid shots cause massive complications in his interview [here](#) (gee... again not on YouTube for some reason). HOdkinson [says](#) there is “*sufficient evidence in the literature*” to show the spike protein expresses in the placenta and the testes – and could kill unborn babies in current pregnancies and permanently stop men having children.”

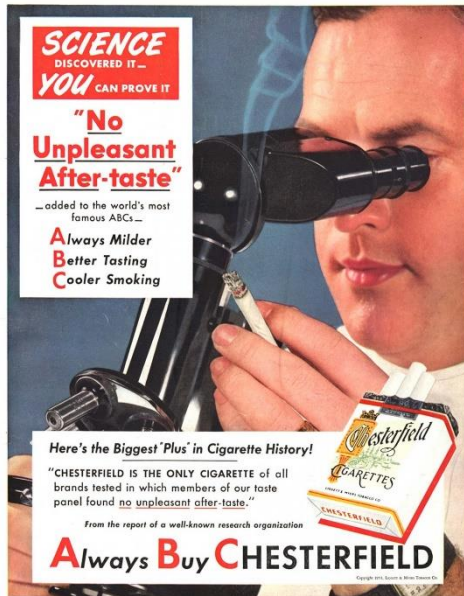
The author of this paper already had Covid. If you aren’t obese, have diabetes, keep your Vit. D over 40 ng/ML, there is really little to worry about. No, you don’t want to get it; but then, I never like to get a nasty flu, though I seem to every year or two. No reason to kill the economy an increase suicides, divorces, alcoholism, opioid use, etc. for a flu. And – importantly – the overall mortality rate *had not changed*, adjusted for population. That means either suddenly hundreds of thousands suddenly stopped dying of heart attacks, cancer etc. last year... or the numbers are being gamed. (In fact, the American Inst for

Economic Research has a full expose of the scam behind deaths from Covid relative to what we saw with the Spanish flu [here](#).)

Disgustingly, the Covid fear mongerers, per a report [here](#), appear to have zero concern that, as of April 2021, rates of alcoholic liver disease have soared 30% in the last year at the University of Michigan's health system, a rise doctors blame on higher amounts of alcohol intake during the pandemic, hospitals including Northwestern University and Harvard University reported 50% increases in admissions for alcoholic liver disease since March 2020 and over the six-month period from April to September 2020, "*hazardous alcohol use and likely dependence increased month by month for those under lockdowns compared to those not under restrictions.*" Speaking with NPR March 16, 2021, University of Michigan liver specialist Dr. Jessica Mellinger said, "*In my conversations with my colleagues at other institutions, everybody is saying the same thing: 'Yep, it's astronomical. It's just gone off the charts.'*" Mellinger said the pandemic "supercharged" already rising rates of liver disease, which are now also showing up in younger populations. "*We're seeing kids in their late 20s and early 30s with a disease that we previously thought was kind of exclusive to middle age,*" she said. Alcoholic liver disease was also up 30% from 2019 to 2020 at Keck Hospital of the University of Southern California, with other hospitals, including Northwestern University and Harvard University, reporting 50% increases in admissions for alcoholic liver disease since March 2020 (see MinnPost February 11, 2021) Doctors' anecdotal reports of patients' increased alcohol usage during the pandemic were confirmed by multiple studies. University of Arizona College of Medicine researchers found that over the six-month period from April to September 2020, "[hazardous alcohol use and likely dependence increased month by month for those under lockdowns compared to those not under restrictions.](#)" They added: "*This increase in harmful alcohol use and related behaviors is likely to have prolonged adverse psychosocial, interpersonal, occupational, and health impacts as the world attempts to recover from the pandemic crisis.*" An editorial published in The Lancet Gastroenterology & Hepatology likewise noted that sales in U.K. alcohol stores increased by 31.4% from the previous month in March 2020 — the month the U.K. went into lockdown. It cited a survey conducted by Alcohol Change UK, [which found that 1 in 5 of those who drank alcohol daily said they had increased the amount they were drinking during the lockdown.](#)

The truth is, as Mercola notes, with the corrupt iatrarachy (medical tyranny) "*Virtually every doctor in Germany took lead roles in the Third Reich's project to eliminate mental defectives, homosexuals, handicapped citizens and Jews. So many hundreds of German physicians participated in Hitler's worst atrocities — including managing mass murder and unspeakable experiments at the death camps — that the allies had to stage separate "Medical Trials" at Nuremberg. Not a single prominent German doctor or medical association raised their voice in opposition to these projects.*" The truth is, as Dr. Riener

Fuellmich has outlined, many of the actions taken by the “Faucists” may be a crime against humanity, as he describes on either [YouTube](#), or once this is banned, [try Bitchute here](#). Dr. Sucharit Bhakdi also discussed the same thing [here about his book](#), Corona False Alarm, co-written by Dr. Karina Rice.



Thinking back to the whitewashing of cigarettes by the same bought and paid for folks in the medical world, the truth is, [as Heallo says](#), the public itself had at least a modicum of intelligence that the iatrarchy didn't think was in them, and, despite the media and some doctors saying there was nothing to see, the public – just like those today questioning the jab today – were “...becoming increasingly worried about the health consequences of cigarettes. They started to refer to cigarettes as coffin nails and started talking about smoker's cough and smoker's hack.” To get around that, for Big Tobacco, “The answer was to use medical research and physicians to show the public that cigarettes were not harmful... The

pages of The New England Journal of Medicine and The Journal of the American Medical Association were home to many tobacco advertisements throughout the 1930s, 1940s and beyond.”

Finally, if it actually those who were vaccinated, and are now shedding spike protein (see earlier in this paper) how do we protect ourselves from those who WERE vaccinated, and may now be shedding? Mercola writes that the vaccine does not classically shed virus particles but it can easily cause people to shed spike proteins, and it is *these spike proteins that may cause just as much damage as the virus*. America's Frontline Doctors discuss this [here](#), noting that “spike proteins resulting from experimental COVID-19 gene therapy vaccines have the capacity to 1.) pass through the “blood-brain barrier” causing neurological damage, 2.) be “shed” by the vaccinated, bringing about sickness in unvaccinated children and adults, and 3.) cause irregular vaginal bleeding in women. Released last week and titled “[Identifying Post-vaccination Complications & Their Causes: an Analysis of Covid-19 Patient Data,](#)” the stated purpose of the document is “to provide additional information for concerned citizens, health experts, and policymakers about adverse events and other post-vaccination issues resulting from the three experimental COVID-19 vaccines currently administered under EUA (emergency use authorization)” by the U.S. Food and Drug Administration (FDA).”

Stephanie Seneff of MIT, cited elsewhere in this paper in her paper *Worse than the Disease*, and she of the FIVE degrees from MIT, states that the spike protein can act as metabolic poison, capable of triggering pathological damage leading to lung damage and heart and brain diseases. She writes:

“In a series of papers, Yuichiro Suzuki in collaboration with other authors presented a strong argument that the spike protein by itself can cause a signaling response in the vasculature with potentially widespread consequences.

These authors observed that, in severe cases of COVID-19, SARS-CoV-2 causes significant morphological changes to the pulmonary vasculature ... Furthermore, they showed that exposure of cultured human pulmonary artery smooth muscle cells to the SARS-CoV-2 spike protein S1 subunit was sufficient to promote cell signaling without the rest of the virus components. Follow-up papers showed that the spike protein S1 subunit suppresses ACE2, causing a condition resembling pulmonary arterial hypertension (PAH), a severe lung disease with very high mortality ... Suzuki et al. (2021) went on to demonstrate experimentally that the S1 component of the SARS-CoV-2 virus, at a low concentration ... activated the MEK/ERK/MAPK signaling pathway to promote cell growth. They speculated that these effects would not be restricted to the lung vasculature. The signaling cascade triggered in the heart vasculature would cause coronary artery disease, and activation in the brain could lead to stroke. Systemic hypertension would also be predicted. They hypothesized that this ability of the spike protein to promote pulmonary arterial hypertension could predispose patients who recover from SARS-CoV-2 to later develop right ventricular heart failure. Furthermore, they suggested that a similar effect could happen in response to the mRNA vaccines, and they warned of potential long-term consequences to both children and adults who received COVID-19 vaccines based on the spike protein. An interesting study by Lei et. al. (2021) found that pseudovirus — spheres decorated with the SARS-CoV-2 S1 protein but lacking any viral DNA in their core — caused inflammation and damage in both the arteries and lungs of mice exposed intratracheally. They then exposed healthy human endothelial cells to the same pseudovirus particles. Binding of these particles to endothelial ACE2 receptors led to mitochondrial damage and fragmentation in those endothelial cells, leading to the characteristic pathological changes in the associated tissue. This study makes it clear that spike protein alone, unassociated with the rest of the viral genome, is sufficient to cause the endothelial damage associated with COVID-19. The implications for vaccines intended to cause cells to manufacture the spike protein are clear and are an obvious cause for concern.”

Seneff speaks for herself on possible unintended consequences of vaccines [here on Mercola](#) – along with how to protect yourself if you have been vaccinated, or to protect yourself from those around you shedding. You can read the transcript [PDF of the interview here](#) if you are pressed for time. She specifically notes that this could become part of your DNA as well, via reverse transcriptase (RNA goes to DNA) where it is now part of *you forever*. The vaccine is “unbelievably unnatural,” she noted, because it has

methyl-pseudouridine in it to keep it “alive” and make sure your body can’t get rid of it. Note that Seneff also states the shot does NOT stay localized in the arm, including it hitting the spleen in particular. Could the above be why the vaxxed are dying at a [THREE times higher rate than others after contracting the Delta variant?](#) Isn’t this what the SARS vaccine that was created over 15 years ago showed us, where the test animals, after being vaccinated and then re-challenged a few months later *all died*. Perhaps this is why cardiologist with 20 years experience [Dr. Richard Fleming has said “Yes, this is a bioweapon” about the covid shot.](#)

Truth is, no one knows what might happen if you instruct your body to continuously make spike proteins against several different types of viruses on a continuous basis, perhaps for years on end, if not the rest of your life. No one knows just how long the cellular instructions remain viable as those studies have never been done. Even worse, they will not be keeping track of who was vaccinated and who wasn’t when people die, making it impossible to pin the blame on the vaccine.

As noted elsewhere, not only is a large body of doctors not getting the shot, a growing list of physicians and scientists are warning that the COVID-19 shots may end up being a form of mass euthanasia, and many predict mass [deaths among the vaccinated](#) to occur within the next several years as their immune function breaks down and cardiovascular damage sets in. The idea that we’re going to add several [gene therapy](#) shots into an annual regimen will only put this on steroids.

Of course, if the vile fake news had not, in their insane hatred of Trump, allowed hydroxychloroquine, Ivermectin, mass use of Vitamin D, [according to Dr. Peter McCullough, early treatment could have prevented up to 85% of COVID-19 deaths.](#) Dr. Harvey Risch, professor of epidemiology at Yale, [also said early on that 75,000 to 100,000 lives could have been saved with hydroxychloroquine use.](#) But, no matter. Better people DIE than Trump get elected. But then, this comports well with the 100 *million* the left murdered last century, doesn’t it? Exaggeration? See [The Black Book of Communism](#), Courtois, et al, published by Harvard University Press, or see also the late Dr. R.J. Rummel, Univ. of Hawaii (tough job, but *someone* has to do it, right?), [here](#).

So, how do we protect ourselves from the real danger – *those who have been vaccinated, where exosomes/spike protein are exhaled by the lungs, after they have been produced by the spleen?* Whether this is possible is still an open question to Seneff, but assuming it is so.... basically, our bodies address this type of insult via autophagy - the process of removal of damaged proteins in your body. The help autophagy try [periodic fasting](#) or [time-restricted eating](#). Autophagy removes damaged proteins. Most people eat more than 12

hours a day. Gradually lowering that to a six- to eight-hour window will radically improve your metabolic flexibility and decrease insulin resistance; autophagy may help digest and remove the spike proteins. Another beneficial practice is [sauna therapy](#), which upregulates heat shock proteins – get it up to 170F; here you will upregulate heat shock proteins, which help refold misfolded proteins or flag to them to be removed. Heat shock proteins work by refolding proteins that are misfolded. They also tag damaged proteins and target them for removal. Also, get rid of [processed vegetable oils](#) (seed oils), which means eliminating virtually all processed foods as they are loaded with them. Seed oils will radically impair mitochondrial energy production, increase oxidative stress and damage your immune system. Seed oils also are likely to contain glyphosate, as it is heavily used on the crops that produce them; eat organic and get rid of as much glyphosate as possible. Obviously, it is important to avoid glyphosate contamination in all your food, which you can minimize by buying only certified organic foods.

Finally, you want to optimize your innate immune system and one of the best ways to do that is to get enough sun exposure, wearing in your bathing suit, to have your vitamin level reach 60 to 80 ng/ml (100 to 150 nmol/l). Do not activate your immune system as much as possible. Seneff also says to try to reduce your glyphosate exposure as much as possible may possibly be a strategy, as the countries where post-vax death rates did not increase were low users of glyphosate. Also a high sulphur diet will help keep your mitochondria and lysosomes healthy, and you can boost your sulfate by taking Epsom salt baths , along with sunlight and organic diet. (Note that she also still feels that we need to confirm whether the Covid disease is truly is the immune over-reaction, or the virus itself – right now she feels that still needs to be verified). In contrast, [according to Dr. Hyung Chun, a Yale cardiologist, does feel](#) the cells *“release inflammatory cytokines that further exacerbate the body’s inflammatory response and lead to the formation of blood clots” and “The ‘inflamed’ endothelium likely contributes not only to worsening outcome in COVID-19, but also is considered to be an important factor contributing to risk of heart attacks and strokes. Individuals with COVID-19 experience a vast number of neurological symptoms, such as headaches, ataxia, impaired consciousness, hallucinations, stroke and cerebral hemorrhage. But autopsy studies have yet to find clear evidence of destructive viral invasion into patients’ brains, pushing researchers to consider alternative explanations of how SARS-CoV-2 causes neurological symptoms...”*

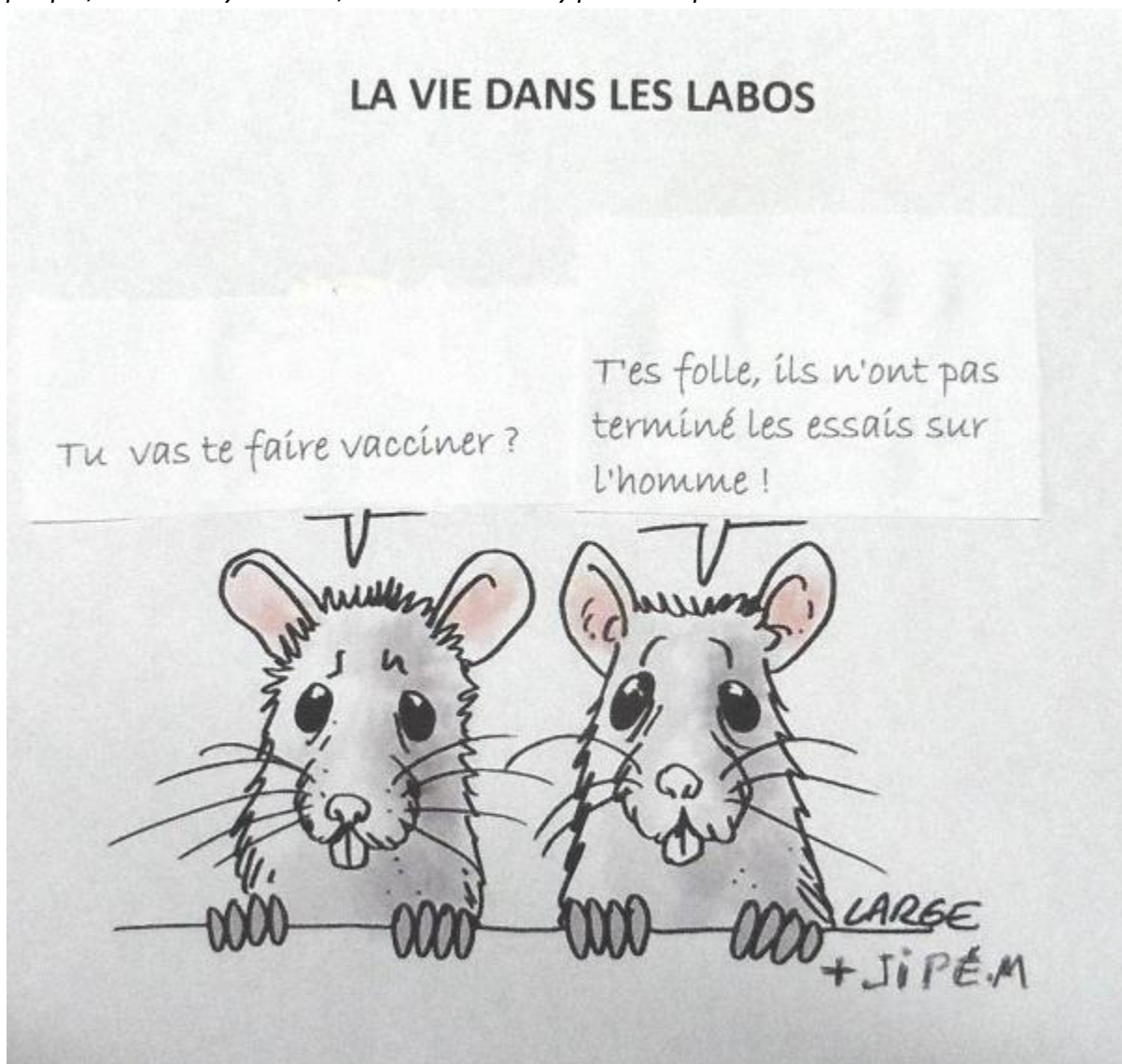
And how do we protect ourselves from the vaccine Stasi at work, when a boss comes and says “Sally, you are an *at will* employee, and we can fire you when we want.” Your response? Write an affidavit saying you will accept the vaccine if the employer can *prove* that this *experimental non-FDA approved gene therapy (not a vaccine)* will not injure or cause me bodily harm, and that the burden placed on you, the employee, during the work day is based on a contact indicating, like a uniform, this is removed at the end of the work day. What are they going to say? Recall, this shot is NOT FDA approved. Ask “Am I legally

your property? The Nuremburg Code says I cannot be forced against my will by reason of threat. That is not a proper working environment, based on threat to my personal body... unless you can prove that this is FDA approved. Am I your property, where you can trespass against my bodily integrity and compromising my health? Will you be letting me go based on this?" And when they state "We can fire you whenever we like," the response is that corporate policy does not, and cannot, trump the integrity of my personhood and bodily integrity. And creating a living testimony rather than affidavit, will allow you to reach into the legal world. This is further outlined at <https://www.sgtreport.com/> For me, personally, knowing this will never be approved by the FDA, I just tell them "Yes, "I'm happy to get the shot – when it becomes FDA approved." What can they say?

And if all of this is not a viral infection, what is causing injury to distant organs associated with COVID-19? One scientist cited from Global Research thinks *"The most likely culprit that has been identified is the COVID-19 spike protein released from the outer shell of the virus into circulation. Research cited below has documented that the viral spike protein is able to initiate a cascade of events that triggers damage to distant organs in COVID-19 patients. Worryingly, several studies have found that the spike proteins alone have the capacity to cause widespread injury throughout the body, without any evidence of virus. What makes this finding so disturbing is that the COVID-19 mRNA vaccines manufactured by Moderna and Pfizer and currently being administered throughout the U.S. program our cells to manufacture this same coronavirus spike protein as a way to trigger our bodies to produce antibodies to the virus."* See also ["Could Spike Protein in Moderna, Pfizer Vaccines Cause Blood Clots, Brain Inflammation and Heart Attacks?"](#) in Global Research)

Let me conclude with the [perspicacious observation by Dr. Mercola](#) (that comports well with the new book [The Emergency State: America's Pursuit of Absolute Security at All Costs](#)) *"The average age of death from COVID-19 is somewhere between 76.9, according to one study, according to U.K. government data cited by Sumption. Either way, this is right around the average age of death from any cause anyway, and therefore not an outrageous threat to public health. Yet, the public willingly relinquishes the freedom to live a normal life, somehow oddly convinced that by trading in their freedom, people at the end of their life will be spared the pain of death. They won't. None of us will. The answer, if we really want to protect the masses, is to educate and promote healthy living at all stages of life. Improving your health through a healthy lifestyle, sunshine, fresh air and real food, is the best way to protect the most people. The inevitabilities of life — which include uncertainty, moment-to-moment risk and the surety of death — demand that we not require people to cease living in order to "save" others from the ramifications of ill health, regardless of their age. It's as inhumane as it is illogical. Rather, the answer, if we really want to protect the masses, is to educate and promote healthy living at all stages of life. Improving your health through a healthy lifestyle, sunshine, fresh air and real food, is the best way to protect the most people. Quarantining and shunning human interaction are probably the worst things*

you can do for yourself and society at large. And let's not go down the road of all the psychological devastation caused by teaching children to fear their own hands, other people, the air they breathe, and that their very presence poses a lethal threat to others."



Mouse No 1: "Are You Going to get Vaccinated",

Mouse No. 2: "Are You Crazy, They Haven't finished the Tests on Humans"