

THE GULAG VAXIPELIGO

Part 6 in an on-going series on the greatest scam this side of the Crab Nebula

“What it meant to be a loyal Soviet citizen was to say what you’re supposed to say, to read what you’re permitted to read, and to vote the way you’re supposed to vote, and to know it was all a lie.”

Human rights activist and Soviet dissident [Natan Sharansky](#),



Following hard on section 5, let’s start right out of the gate with yet *more* problems. The CDC’s “clinical considerations” update followed a May 24 report from Advisory Committee on Immunization Practices (ACIP)’s COVID-19 Vaccine Safety Technical (VaST) Work Group, which found “a higher number of observed than expected myocarditis/pericarditis cases in 16- to 24-year-olds” in Vaccine Adverse Event Reporting System (VAERS) data.

Dr. Seneff, also following Part 5, is also concerned about injecting fragmented RNA in the commercially prepared shots, rather than what was found in the pristine trial shots, as well as whether the spike protein could possibly act as a prion (think Alzheimers, Parkinsons, ALS, etc.). [Mercola says about this](#) “Disturbingly, the spike protein produced by COVID-19 vaccines — due to the modifications made to the synthetic mRNA that delivers the instructions to the cell for what protein to make — may make it more of a prion than the spike protein in the actual virus, and a more effective one.”

And [Natural Health 365](#) tells us more about yet more the vax dangers;

“Children’s Health Defense recently reported that as of April 9, 2021, there have been 56,869 reported adverse events following the COVID shot, “including 2,342 deaths and 7,971 serious injuries between Dec. 14, 2020, and April 1, 2021.” More recently (April 13), the CDC announced on their website that reported deaths since December 2020 have climbed to 3,005. Of course, mainstream media, pro-jab healthcare providers, and public health officials are quick to dismiss these reported adverse events, citing that just because these events are reported doesn’t prove they were caused by the COVID injection. This is true and important to keep in mind. However, it should be noted that the U.S. Food and Drug Administration (FDA) stated in a December 2020 briefing document on the Pfizer COVID jab that there is “currently insufficient data to make conclusions about the safety of the vaccine in subpopulations such as children less than 16 years of age, pregnant and lactating individuals, and immunocompromised individuals.” It would follow, then, that the reports of adverse events in VAERS should be thoroughly investigated and contribute to data clarifying the true safety of these experimental drugs. And yes, even the FDA itself nods to the value of VAERS when it calls for the continued use of “active and passive safety surveillance” of these drugs. So, should we really be so dismissive of these thousands of reported events?”

[Natural Health 365 also reported further concerns](#) about the vaccine safety relative to issues like blood clots, where in April *“the U.S. Food and Drug Administration (FDA) and U.S. Centers for Disease Control and Prevention (CDC) urged states to temporarily withhold giving the Janssen COVID injection due to concerning reports of blood clots.”*

Judy Mikovits, who, while she may be right or wrong, has undergone a massive amount of character assassination by the fake news, also worries that *reproductive harm* might eventuate, in that the spike protein antibodies attack they syncytium (yeah, I didn’t know what that was either. [Here’s a quick help](#)).

British biochemist *Chris Woolams, founder of the UK’s largest cancer charity website, adds* *“The Pfizer and Moderna vaccines actually scare me. These are a completely new type of vaccine, an mRNA vaccine. Do I want to be a guinea pig from a new type of, never-before-used, vaccine which is being trialled on something as deadly as a Coronavirus? ... And Facebook taking posts down saying there’s no evidence of a connection, to me is rather like claiming there is no proven connection between someone in a car crash dying 24 hours later of a brain haemorrhage.”*

A MedPage article, by [Kristina Fiore, Director of Enterprise](#) & Investigative Reporting, MedPage Today, on June 10, 2021 entitled [Myocarditis and COVID Vaccines: Where Do We Stand?](#) discussed the issue with hearts, reporting *“In early June, the CDC issued a note to healthcare providers raising awareness of myocarditis and pericarditis after vaccination, particularly in younger males. That guidance stated that, since April, there’s been an increase in reports of myocarditis and pericarditis after getting the Pfizer or Moderna vaccines, but that there hasn’t been a similar reporting pattern following the Johnson & Johnson vaccine... In VAERS data, there were 475 reports of the condition in people age 30 and under, 226 of which have met the CDC’s working case definition. Preliminary data suggest that most patients (at least 81%) made a full*

recovery” and “Israeli health regulators said last week that the small number of myocarditis cases seen mainly among men ages 16 to 30 were likely linked to Pfizer's vaccine.” Also, In early May, the European Medicines Agency's Pharmacovigilance Risk Assessment Committee (PRAC) said it was [investigating reports of myocarditis and pericarditis](#) among people who received Pfizer's vaccine. The agency recommended an initial evaluation “considering an ECG, troponin level, and inflammatory markers such as C-reactive protein and erythrocyte sedimentation rate.” Not to be outdone, the Fiore report tells us the American Academy of Pediatrics has also published in its journal *Pediatrics* a “[prepublication review](#)” series of seven male patients ages 14 to 19 who developed symptomatic myocarditis 2 to 4 days after the second dose of the Pfizer vaccine. Thankfully, all experienced rapid resolution of their symptoms – but what of the future? In an [accompanying commentary](#), Sean O'Leary, MD, MPH, of the University of Colorado in Aurora, and Yvonne Maldonado, MD, of Stanford University, wrote that while the authors “are quick to point out that a causal relationship between vaccination and myocarditis has not been established, the temporal association of these cases with vaccination as well as the striking similarity in the clinical and laboratory presentations raise the possibility for such a relationship.

Moving over to the pandemic from the statistics perspective, Jeff Thomas from the Doug Casey newsletter details the fake nature of the pandemic statistics perfectly, noting “A.M.A. and/or CDC/NCHS annual All-Cause death statistics and both sources offer up a very different of the Covid ‘crisis.’ Death counts increase ~ 1%/year, about the same as population increases. If there had been no coronavirus, we might have expected an all-cause death count of about 2,883,386 in 2020 was 2,916,492, an increase from the norm of 33,106, not 400,000. “Based upon a total population of 330,849,169, if every single one of these additional deaths was due to covid-19, this would mean a death rate of .01%. This death rate is clearly not in keeping with a pandemic. But it is, in fact, very much in keeping with a standard flu season rate. The only way that the coronavirus could be responsible for 400,000 deaths in the US in 2020 would be if at least 367,000 people conveniently ceased dying of other causes, such as heart failure, car crashes and cancer.”

In just the first four months of usage, the COVID-19 vaccines have killed more people *than all available vaccines combined* from mid-1997 until the end of 2013 — a period of 15.5 years (note that each year, 165 million Americans get the flu shot, let alone all other types of vaccines, such as shingle, tetanus, etc., and as of April 23, 2021, VAERS had also received 12,618 reports of serious adverse events. In total, 118,902 adverse event reports had been filed, and by May 21, 2021, there [4,406 deaths reported to VAERS](#) after a COVID injection – meaning that over only six months, already more than the [2,149 deaths recorded from 1997-2013](#) from all other vaccines combined. Since VAERS [only captures between 1-10% of all incidents](#), the true death toll could be as many as 440,600. [BMJ says the number is less than 10%](#), an investigation by US Dept. of Health and Human Services said perhaps only 1% - see [here](#) or [here](#). Regarding VAERS [only catching 1% of vaccine injuries](#), as they say “Close enough for government work!” See also [here](#) for a report on yet another of the 1% reported issue. Truth is, most people don’t know the system exists, let alone having the time or interest to report issues. The [BMJ concurs with the above, noting that, at most, only 10% of vaccine injuries are ever reported](#). That means that ten,

perhaps even 100 times more vaccine issues have occurred than reported, possibly as high as 1.2 million. In the real world, Moderna's COVID-19 vaccine [induced adverse reactions in 'more than half' of trial participants](#). Sweden reported over 1% adverse reactions as well [here](#). As noted, for every reported adverse reaction how many unreported adverse reactions are there? This writer's guess is somewhere between 2 and 5 at least. That means in Sweden, the adverse reactions totaled more like 2% – 5%.

Other reports tell us Moderna and Pfizer both acknowledged that their vaccine [could cause symptoms similar to COVID-19](#); that twenty volunteers [suffered serious reactions to Johnson & Johnson's Covid-19 vaccine](#) during its phase 1/2a trials; that the AstraZeneca vaccine trial [was suspended after a participant experienced an adverse reaction](#) known as transverse myelitis; that [two participants and four controls died in](#) Pfizer vaccine trials and [4 volunteers developed Bell's Palsy \(facial paralysis\)](#) after taking Pfizer Covid-19 shot. All part of a day's work, I guess, for the junior Unit 731s. Not familiar with Japanese Unit 731? You may want to bone up on it: see <https://unit731.org/>; now that has come here. (And don't think the US is lilly-white. Not only the Tuskegee experiments, where they gave blacks syphilis and left them untreated; and not to be racist, where they messed with whites in mind control experiments with MKUltra, spraying San Francisco with a simulated bio weapon back in the 1950s, and then overseas, including biological "experiments" in Guatemala (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).

And speaking of Europe, the European Medicines Agency, [EudraVigilance](#), is a database reporting suspected adverse drug reaction reports. Of the four top Covid inoculations, [12,184 Europeans died, with 1,196,190](#) adverse effects as of May 22, 2021. During an interview, Dr. Peter McCullough [told journalist Alex Newman](#), "These figures would have merited an investigation by federal health authorities." In another interview, McCullough added "*It's stunning. By this time, we should be using the Harvard protocol, the Emory protocol. How about Hopkins? I'll take any one of them ... We seem to somehow have developed a uniform game plan ... to do nothing to help patients with COVID-19, passively allow as much suffering hospitalization and death as possible, create enormous amounts of fear in our society, and then be prepared for mass vaccination.*" Patrick Coffin also does an extensive interview with McCullough [here](#) (47 min.)

Note that the AstraZeneca and J&J shots use viral vectors, while the other two use nanolipid coated mRNA. While the latter may be possibly better, they cause other problems, says Judy Mikovits: "As mentioned, it's an adenovirus vector expressing the protein. So, the HIV, the XMRV envelope, the syncytin, the HERV-W envelope and the ACE2 are already being expressed in the vector. With respect to the RNA component, it's less dangerous because you're not going to see much of the mechanisms we've been talking about. But these adenovirus vector protein-producing vaccines are grown in an aborted fetal tissue cell line, so now you've got human syncytin [in there]. You've got 8% of the human genome of another human. So, again, looking at the communication that has to regulate your Type I interferon response, it's going to give you autoimmunity. In immunocompromised people, it's going to continue to express and that will

give you a live infection, and you already have your firetrucks fighting another [infection]. You can't fight a war on three fronts. I say, 'You only need one shot because it's the most toxic.' It's the most toxic in that sense. We have many mechanisms to degrade RNA, and we can restore methylation machinery. It's a nightmare, but I believe our immune system can break it [the synthetic vaccine mRNA] down."

Mikovits believes the vector-based DNA vaccines (AstraZeneca and Johnson & Johnson) are the most dangerous for those with chronic Lyme disease or any inflammatory disease associated with an abnormal host immune response, such as shingles, viral infections or cancer, women who have already received the Gardasil vaccine (as this may predispose them to problems with the lipid nanoparticle), and those with Parkinson's or Huntington-like diseases; for kids, it's the mRNA vax, as *"their immune systems are growing, growing, growing, growing. You introduce or you turn on a fire, what happens? All the stem cells that are important for growing that say, 'OK, all is calm in the immune system, go build bone, go build brain cells, go do the pruning with the macrophages.' You can't have your macrophages clearing all the viruses. And yes, reverse transcriptase is 'on,' it's expressed in telomeres. You're growing. That's the whole idea of everything. All the brakes are off. Same thing in pregnancy. That's why we don't do anything in pregnancy because you've got to stay unmethylated in order to respond to your environment, that endogenous genome of the virome. That's your Type I interferon responses. You don't want myelopoiesis, you want embryonic development. We're going to see things like Down syndrome ... Rett syndrome. Rett syndrome, that's inappropriate DNA methylation in little girls. So, for the kids, the worst thing in the world is the RNA vaccines."*

Tucker Carlson speculated on his May 5, 2021 show that in just four months, these vaccines may have killed more than ALL vaccines combined from 1997 thru 2013. In 1976, the U.S. government vaccinated an estimated 45 million people against pandemic swine flu, yet cancelled it when just 53 people died. Of course that was back before Obamacare architect Ezekiel "[Why I Hope to Die at 75](#)" Emanuel's misanthropic vision took over America.

Moving over to the excess deaths statistics, researcher Thomas Di Ferdinando, in reviewing the extraordinary increase in claimed death count, has on the excess deaths issue – of which there has been none - states, *"Without those added deaths, there would be no evidence of a Covid pandemic. This triangulation of facts: essentially no excess deaths beyond the normal annual background count; absolutely NO relationship between Covid "confirmed" cases and Covid "confirmed" deaths; and the mysterious, last-minute dump of 268,259 all-cause deaths into the 2020 end-of-year all-cause death totals; completely demolish any pretext of their having been a 2020 viral pandemic, whether caused by a novel coronavirus or by anything else and that therefore there is no rational reason to be putting masks on children, isolating elders, destroying businesses, locking down populations and shattering the public trust."* Here are the specifics, per the CDC:

Year 2017: 2,818,503 Americans died

Year 2018: 2,839,205 deaths (20,702 more than the previous year 2017)

Year 2019: 2,855,000 deaths (16,300 more than the previous year 2018)

Then Year 2020: 2,913,144 deaths (57,641 more than the previous year 2019)

We are told COVID is responsible for 400,000+ deaths. So the question becomes: How many people died of COVID and how many died (of other causes) WITH COVID?

In fact, as of March 31st, 2021, there had been [a 6000% Increase in Reported Vaccine Deaths 1st Quarter 2021 Compared to 1st Quarter 2020](#) with some even going so far as to call them "[biological weapons of mass destruction.](#)" Same date, the EU had [6,662 DEAD 299,065 Injuries in the European Database of Adverse Drug Reactions for COVID-19 "Vaccines"](#)

Dr. Henry Ealy, who in the fall of 2020 co-authored a paper in Science, Public Health Policy and the Law, titled, "[COVID-19 Data Collection, Comorbidity & Federal Law: A Historical Retrospective,](#)" later re-examined the CDC data in April 2021 and further verified that stats were being doctored, which details how the U.S. Centers for Disease Control and Prevention has enabled the corruption of case- and fatality-reporting data in violation of federal law. See "[COVID-19: CDC Violates Federal Law to Enable Corruption of Fatality-Reporting Data.](#)" Some of the in-your-face gambits:

- Over-reporting of fatalities enabled by a March 2020 change in how cause of death is reported on death certificates. Rather than listing COVID-19 as a contributing cause in cases where people died from other underlying conditions, it was to be listed as the primary cause.
- As of August 23, 2020, the CDC reported 161,392 fatalities caused by COVID-19. Had the long-standing, original guidelines for death reporting been used, there would have only been 9,684 total fatalities due to COVID-19
- The CDC violated federal law, as the Paperwork Reduction Act requires data collection and publication to be overseen by the Office of Management and Budget. Proposed changes must be published in the Federal Register and be open to public comment. None of these transparency rules were followed

Of course, in 1976 when the US vaccinate 45 million against the swine flu, the entire programme was cancelled after just 53 deaths. But that, of course, did not have a political agenda pushing it along with the likes of Bill Gates and his ilk. In fact, five months after the vaccination push, as noted above, over 10,000 in the U.S. and European Union had already died after getting the shots. Just a tad more than 53, right?

Not quite the scam of [Neil Ferguson's 1.5 million British Covid deaths](#), but still pretty good! Perhaps this should be investigated by a court of law. Except that we are no longer a nation of laws, but rather of big money, fake votes, a political hack judiciary, a "pharmatocracy," and a Goebbelian media. [But then I guess that's what happens when the world trusts its health and economy to an adulterer who violated his own lockdown rules to see his mistress... right?](#) And as

Columbia University stats expert John Fund writes, the real scandal about Ferguson – who was the locomotive that got the Covid train running – is this; [Why did anyone ever listen to this guy Ferguson to begin with?](#) See the Columbia University article [here](#). The truth is, 94% of COVID-19 deaths could also be [attributed to other causes](#). The 94% of people who died with COVID-19 had an average of **4 additional conditions** that could have directly contributed to their death, per the CDC, and [PCR-tests inflated COVID-19 case numbers](#) with an extremely high level of false positives.

And of course, by now, most informed people know that the excessively high cycle thresholds (CTs) when processing the results from those getting the PCR (polymerase chain reaction test, invented by the late Nobel Chemistry Prize winner Kary Banks Mullis, who died Aug. 2019 before Covid started) tests has misrepresented the number actually with the virus. Mercola has a good analysis of the issue [here](#). Setting it to 40 , or even 45 and WHO originally set it to, is results in a lot of false positives – in fact, it results in a staggering 97% false positives per [Clinical Infectious Diseases September 28, 2020; ciaa1491!](#). Thankfully, fake president Joe Biden, elected with fake votes, changed the fake CT threshold on Jan. 20, the day of inauguration, the magically lower the number of Covid cases! So, just like Obama magically stopping the ocean from rising upon election (by the way, his new house at 79 Turkeyland Dr., Edgartown, MA on ultra-rich, ultra-white Martha's Vineyard is, per [whatsmyelevation.com](#), a whopping *three feet* above sea level), Biden stopped the Covid scamdemic in its tracks. Amazing stuff, no?

And note that Mullis said that by using certain protocols for the PCR test, scientists can come up with results they want, stating "[...with PCR, if you do it well, you can find almost anything in anybody.](#)" But note that, per [Fullfact.org](#), the reality, as always, is more nuanced - PCR tests do work, but " there are limitations in detecting the specific levels from a sample using PCR testing." Note that I am always suspicious, as you should be too, of "fact checkers" – particularly if they are on Facebook. Always keep in mind the Roman satirist Juvenal's dictum, *Quis custodiet ipsos custodes?*" (Who will watch the guards?) Even the PCR test used as a diagnostic tool is problematic, as shown in the [Corman-Drosten review](#), headed by former Pfizer chief scientist Dr. Michael Eaton. The test was developed before a viral isolate was available, which means we don't even know if it's detecting the actual SARS-CoV-2 virus. On top of that, health agencies instructed labs to use excessive amplification cycles, known to result in massive numbers of false positives.

And all of this sturm und drang with vaccines and fake number of deaths for what? You can STILL get the virus. You can still spread it. In fact, [already in April 2021, the CDC itself said that 5,800 fully vaccinated Americans have contracted COVID-19, with 74 dead.](#) The noninstitutionalized infection fatality ratio for all age groups is 0.26%, and if under 40, its 0.01%. Symptoms should be lessened, but than again the vaccine may kill you, or leave you with any number of other maladies, and may, in the future, make you extremely susceptible to another kind of Covid that comes out (see Mercola's [COVID-19 mRNA Shots Are Legally Not Vaccines, COVID-19 'Vaccines' Are Gene Therapy](#) and [How COVID-19 'Vaccines' May Destroy the Lives of Millions.](#)) Meanwhile, the lethality rate of COVID-19 vaccines is somewhere between

0.0024% and 0.0028%, assuming all deaths are reported to the Vaccine Adverse Event Reporting System (VAERS), which is doubtful.

And of course, the vaccine *is* killing people. Just a one story, out of untold numbers: [Man in drive-thru vaccine line has a seizure... and then the next man over collapses, too](#) . But you can do your own search for these types of stories at your leisure.

And of course, Covid is not “novel.” Pandemics Data & Analytics (PANDA), co-founder by Nick Hudson, [tells us](#): “The reality is that the coronavirus is a very close relative, not even a separate subspecies, a very close relative of the 2003 SARS virus. There are seven related coronaviruses known to cause disease in humans, probably many others, and four of them are in general circulation. Annual, global circulation. So the naming of this disease is terribly inconsistent. This is really a rose by any name, SARS. A variant of SARS. It’s not novel. [One study](#) even found that 81% of people not exposed to SARS-CoV-2...were still able to mount an immune response against it, which “suggests at least some built-in immune protection from SARS-CoV-2 ...” As evidence, Hudson cites the early case of the Diamond Princess cruise ship, where, of 3,711 passengers and crew (presumably all exposed) 712 (19.2%) tested positive, 46.5% were asymptomatic when tested. Of those showing symptoms, only 9.7% required intensive care and 1.3% (nine) died. [See here for the CDC report.](#)

Another concern is asymptomatic spread. That is, be very, very afraid of that human next to you! A [JAMA Network Open study later found](#), in December 2020, that asymptomatic transmission is not a primary driver of infection within households, and [a study in Nature Communications](#) also found “there was no evidence of transmission from asymptomatic positive persons to traced close contacts.” And before the World Economic Forum found Covid a way to make political and economic hay, originally, WHO wrote that during an influenza pandemic, quarantine of exposed individuals, entry and exit screening and border closure are “not recommended in any circumstance,” and a 2021 study published in the [European Journal of Clinical Investigation found no significant benefits](#) on COVID-19 case growth in regions using more restrictive nonpharmaceutical interventions (NPIs) such as mandatory stay-at-home and business closure orders. Nick Hudson’s PANDA [also found “no relationship between lockdowns and COVID-19 deaths per million people. The disease followed a trajectory of linear decline regardless of whether or not lockdowns were imposed.”](#)

Now here is a question: In Haiti, one of the world's poorest countries, even the ever-PC [NPR tells us](#) they don't wear masks, they don't social distance, zero vaccines have been given, and yet almost nobody is dying from Covid. By the end of April, only 254 deaths had been attributed to Covid – or 22 per million – all with almost ZERO masking, social distancing, massive crowds, *and at report time had not administered a single vaccine.* Haiti’s Covid commission, closed its Covid units last fall “due to lack of patients” *And yes, they did do testing.* The NPR story quoting Dr. Bill Pape, the country’s equivalent of Dr. Fauci, tells us “*the country has pretty much gone back to the way life was pre-pandemic. Schools are open. Thousands of people packed the northern coastal Port-de-Paix for Carnival in February. Most people don't wear a mask,*” he says. Not only have outdoor markets reopened; they were never completely closed. Sheltering in

place and working from home are luxuries most Haitians can't afford. As the poorest country in the Western Hemisphere, Haitians on average earn less than \$2,000 per year according to the U.N. And most, Pape says, have gone back to work, "because if they don't work, they don't eat, their family doesn't eat," he says. Concern about the pandemic is so minimal that this April, when the World Health Organization-led COVAX program offered Haiti a shipment of AstraZeneca COVID-19 vaccines, the government rejected it. Some suggestions for the low rate is that the average age in Haiti is 23, open air homes, or that deaths are so common it was not really noticed. Maybe. But shouldn't this be examined?

Yet another concern that has been brought up is that mRNA vaccines could provoke prion disease ([Creutzfeldt Jakobs Disease, or CJD](#); also known as Mad Cow Disease). If you want to review this issue, Technocracy News has a great primer [here](#). In short prions are pathologically misfolded proteins, which might then cause nearby proteins to also get misfolded incorrectly. I won't go into details, but basically the Covid spike shell has a region that has a protein sequence the resembles these "bad" prions. The vaccine churns out proteins that resemble this Covid shell by using the ribosomes to synthesize these spike proteins and create immunity. Issue is if this somehow gets "mucked up" in translation and start synthesizing prions. Is this possible? J. Bart Classen, MD in the journal Microbiology and Infectious Disease, called Covid 19 RNA Based Vaccines and the Risk of Prion Disease says yes. This report also tells us that "Vaccines have been found to cause a host of chronic, late developing adverse events. Some adverse events like type 1 diabetes may not occur until 3-4 years after a vaccine is administered." Another study, examines the issue of prion (think "mad cow disease," mor in humans Creutzfeldt-Jakob disease) entitled [Deadly Prion Brain Diseases & Experimental mRNA Covid-19 Vaccines: Study Finds Plausible Link](#) also explores this issue at a possibility, as does [an article by Janet Phelan](#), reviewing an article published in the journal Microbiology and Infectious Diseases, in an article entitled [Covid-19 RNA Based Vaccines and the Risk of Prion Disease](#).

The article [Science Journals Support Claim that Pfizer Covid Vaccine May Cause Deadly Neurodegenerative Disease](#) points out:

"A recent article published in the scientific journal Microbiology and Infectious Diseases makes the claim that the mRNA Pfizer Covid vaccine may contain prions which cause deadly neurodegenerative disease, sometimes called 'Creutzfeldt-Jakob' or 'Mad Cow' disease. The article, titled '[COVID-19 RNA Based Vaccines and the Risk of Prion Disease](#),' was published in January of 2021 and has been studiously ignored by major media, which has focused its efforts on encouraging individuals to take the jab....The paper goes on to state that 'The folding of TDP-43 and FUS into their pathologic prion conformations is known to cause ALS, front temporal lobar degeneration, Alzheimer's disease and other neurological degenerative diseases.' In other words, the Pfizer mRNA vaccine may have the capability of turning brains to mush."

Interestingly, in searching for details on this, the usual scam google search showed up their also usual algorithm based propagandists stating this was impossible. This indeed may be so, and I suspect it is, so won't spend any more time on this, but the reader will have to forgive me if I have just a tad of skepticism from all the fake news fact checkers. As one example of nay-sayers, see this article in [Science Based Medicine](#) . But last I checked, science was supposed to

be skeptical and inquiring... not the usual ignorance displayed by the politically correct fake news that wants to squelch any inquiry. Classen may well be wrong, but these anti-science leftists are even MORE wrong in that they don't even get what science *is* – viz, *inquiry*. I assume this prion issue won't be an issue.... at least hope so!

Would you like it to get worse? I can help you there! Turns out that vaccine makers have destroyed vaccine safety studies, making it almost impossible to assess long term safety. And as of April 1, 2021, VAERS had received 56,869 adverse events after the shot, including 7,971 serious injuries and 2,342 deaths. Of those deaths, 28% occurred within 48 hours of vaccination. The youngest person to die was 18 years old. In a JAMA article (JAMA 2021;325(10):918-921) Moncref Slaoui, Ph.D., chief scientific adviser for Operation Warp Speed says "it's very important that we unblind the trial at once and offer the placebo group vaccines" because trial participants "should be rewarded" for their participation. Mercola then asks: *"All of these statements violate the very basics of what a safety trial needs, which is a control group against which you can compare the effects of the drug or vaccine in question over the long term. I find it inconceivable that unblinding is even a consideration at this point, seeing how the core studies have not even concluded yet. The only purpose of this unblinding is to conceal the fraud that these vaccines are safe... So, before the initial studies are even completed, vaccine makers and regulatory agencies are now deciding to forgo long-term safety evaluations altogether by giving placebo recipients the real McCoy, and so-called bioethicists are actually supporting this madness."* [The BMJ has the same concern:](#) *"Although the FDA has granted the vaccines emergency use authorization, to get full license approval two years of follow-up data are needed. The data are now likely to be scanty and less reliable given that the trials are effectively being unblinded."* Mercola then asks:

"Vaccine mandates are being justified on the premise that the benefit to the community supersedes the risk of individual harm. In other words, it's OK if some people are harmed by the vaccine because the overall benefit to society is more important. Yet here they're saying that participants in the control groups are being harmed by not getting the vaccine, so therefore vaccine makers have an obligation to give it to them before the long-term studies are completed. This is the complete opposite argument used for mandatory vaccination. If we are to accept the "greater good" justification for vaccination, then people who agree to participate in a study, and end up getting a placebo, need to roll the dice and potentially sacrifice their health "for the greater good." Here, the greater good is the study itself, the results of which are of crucial importance for public health decisions. Without this data, we will never know whether the vaccines work in the long term and/or what their side effects are. If an individual in the control group gets COVID-19, then that's the price of scientific participation for the greater good of society, just as when a vaccinated person gets harmed, that's considered an acceptable price for creating vaccine-induced herd immunity. Put another way, when it comes to mandating vaccines, harm to the individual is acceptable, but when it comes to doing proper safety studies, all of a sudden, harm to the individual is not acceptable, and protecting the controls is more important than protecting the integrity of the research. The fact

that they're this inconsistent in their "ethics" could be viewed as proof positive that public health isn't even a remote concern."

But, as Dr. Steven Goodman, associate dean of clinical and translational research at Stanford University, says in [JAMA](#):

"By unblinding trial participants, 'you lose a valid comparison group. There will be this sense, and it will be sort of true, that the study is over.' Unlike, say, a highly effective cancer drug, 'the vaccine is not literally a life-and-death issue today and tomorrow' for most trial participants, Goodman said. So, he noted, those running COVID-19 vaccine trials shouldn't feel obligated to unblind participants and vaccinate placebo recipients right away. Doing so implies 'you can just blow up the trial' on the basis of promising preliminary results, establishing 'an ethical model for future trials that we maybe don't want to set,' Goodman said."



So... now we have a new precedent where vaccine and drug studies are “completed” without control group. “Follow the science?” OK. This is science?? An if we are “following the science,” then *why* did former CDC director Robert Redfield receive *death threats* after coming to think the virus came out of a lab, not zoonotic See [DailyMail](#), [Fox](#), or the [UK's Sun](#) (most of the bought and paid for US fake news ignored this, of course.) This reminds me of a global warming skeptic out of Univ. of Winnipeg, Dr. Tim Ball has received hate mail and death threat,

like Redfield, with such messages as, "If you continue to speak out, you won't live to see further global warming..." Both faux global warming and Covid research is supposed to be about "science." Really? Writes Ball: ***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...'*** and then added it is “Only a false religion needs hate mail, threats, courts of inquisition and Hollywood movies to sustain it.”
<http://www.humanevents.com/article.php?id=19927>).

Oh, and did I mention [TrialSite News reports](#) that [Pfizer](#) documents submitted to the European Medicines Agency [EMA] reveal the *company “did not follow industry-standard quality management practices during preclinical toxicology studies ... as key studies did not meet good laboratory practice (GLP).”*

Finally, neither reproductive toxicity nor genotoxicity (DNA mutation) studies were performed, both of which are considered critical when developing a new drug or vaccine for human use. The problems now surfacing matter greatly, as they significantly alter the risk-benefit analysis underlying the vaccines’ emergency use authorization. As reported by TrialSite News article above: *“Recently, there has been speculation regarding potential safety signals associated with COVID-19 mRNA vaccines. Many different unusual, prolonged, or delayed reactions have been*

reported, and often these are more pronounced after the second shot. Women have reported changes in menstruation after taking mRNA vaccines. Problems with blood clotting (coagulation) — which are also common during COVID-19 disease — are also reported. In the case of the Pfizer COVID mRNA vaccine, these newly revealed documents raise additional questions about both the genotoxicity and reproductive toxicity risks of this product. Standard studies designed to assess these risks were not performed in compliance with accepted empirical research standards. Furthermore, in key studies designed to test whether the vaccine remains near the injection site or travels throughout the body, Pfizer did not even use the commercial vaccine (BNT162b2) but instead relied on a 'surrogate' mRNA producing the luciferase protein. These new disclosures seem to indicate that the U.S. and other governments are conducting a massive vaccination program with an incompletely characterized experimental vaccine. It is certainly understandable why the vaccine was rushed into use as an experimental product under emergency use authority, but these new findings suggest that routine quality testing issues were overlooked in the rush to authorize use. People are now receiving injections with an mRNA gene therapy-based vaccine, which produces the SARS-CoV-2 spike protein in their cells, and the vaccine may be also delivering the mRNA and producing spike protein in unintended organs and tissues (which may include ovaries).” In fact, in the first post-mortem study of a patient vaccinated against SARS-Cov2, [reported in June 2021 on the Hal Turner show](#), as well as in the *International Journal of Infectious Diseases*, published [in Science Direct](#), they reported “viral RNA was found in every organ of the body.” In other words, the vaccine did not stop the virus from entering every organ in the body – which means the spike proteins did as well. There are antibodies that the vaccine creates, but that’s immaterial in that it is the spike S1 protein doing the damage. If correct, everyone getting the shot will eventually have adverse effects, in that the spike proteins will bind to the ACE2 receptors all over the body. With viral RNA in every organ after vaccine, either a.) the vaccine doesn’t work at all, or b.) the virus is enjoying Antibody Dependent Enhancement, meaning the virus will spread faster in those vaccinated. In this case, if you read the report at the link above, basically the patient got the vaccine, which in turn got him hospitalized with ulcerative colitis due to blood clots, then during his hospitalization he got infected by an asymptomatic hospital roommate, the vaccine either didn’t protect him, or made it worse, and died 4 days later.

As the famed physicist Richard Feynman wrote in his work in *Six Easy Pieces: Essentials of Physics*: “There is a popular misconception that science is an impersonal, dispassionate, and thoroughly objective enterprise. Whereas most other human activities are dominated by fashions, fads and personalities, science is supposed to be constrained by agreed rules of procedure and rigorous tests. It is the results that count, not the people who produce them. This is, of course, manifest nonsense. Science is a people driven activity like all human endeavour, and just as subject to fashion and whim. In this case, fashion is set not so much by choice of subject matter, but the way scientists think about the world.” And, unfortunately, there is one way to think about the world - the politically correct way. Or think of the not-so-brilliant Richard Parncutt, professor of music at Graz Univ. in Austria. This “Einstein” opposes the death penalty for mass murderers, but once called for the execution of “influential climate deniers.” No word from our mad doktor how, in his deluded world, a climate denier – whose philosophy

supposedly leads to mass death – differs from “regular” mass murderers like Fauci and his ilk, but either way, even Redfield has now fallen afoul of the new fasco-Marxism woke-atollahs.

And if you dare go against the new version of Soviet Lamarkianism, you are figuratively or literally starving, shunned and alone, under the modern day leftist Robespierres. Just ask well-regarded climatologists Patrick Michaels in Virginia, David Legates in Delaware, George Taylor in Oregon or Dr. David Stooksbury of Georgia – all politically ousted for their politically “inconvenient” views on faux global warming. If only we would follow standard scientific procedure!

And the wokeatollahs are just getting their fat lady – or should I say “pound challenged” – in their woke version of a burqa, warmed up... which we will discuss in the next section.