

## FACTS ABOUT COVID-19 & SURROUNDING ISSUES

*The enemy is Big Tech, Big Data, Big Oil, Big Pharma, the medical cartel, and the government totalitarian elements that are trying to oppress us, that are trying to rob us of our liberties ... and all of the freedoms that give dignity to humanity.<sup>1</sup>*

~ Robert F Kennedy, Jr.

This summary presents footnoted information from the CDC, the NIH, many other governmental agencies and other global sources that you can follow up on and verify yourself. When you have the facts and a full picture of what's going on with Covid-19, THEN you are free to make informed decisions about the health and wellbeing of yourself and your loved ones.

### BIG PHARMA & THE “BIG 6” MEDIA CORPORATIONS

Before we talk about Covid and the vaccine, let's get some perspective. The close ties between pharmaceutical companies and media conglomerates are indisputable. Public records clearly show they are essentially owned by the same people.

- Big Pharma and the 90% of mainstream media are both largely owned by two asset management firms: BlackRock and Vanguard Group.
- Vanguard Group and BlackRock own assets worth over \$10 trillion and are the two largest shareholders of GlaxoSmithKline and Pfizer AND they are the top two owners of Time Warner, Comcast, Disney and News Corp, *four of the six media companies that control more than 90% of the U.S. media landscape*, including TV and radio networks, 24-hour news networks, newspapers, publishing companies and gaming industries.<sup>2</sup>

*70% of news divisional revenues during non-election years are coming from pharmaceutical companies.*

~ Robert F. Kennedy, JR. quoting Fox news corporation CEO Roger Ailes<sup>3</sup>

Big Pharma's \$9.6 billion annual advertising budget gives them control over our news and television outlets. These management groups and corporations do not have any concern for the wellbeing of the American people. They are driven by one goal and one goal only: PROFIT and the control of a population that leads to even more profit.

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<sup>1</sup> Robert F. Kennedy address to Vermont Town Hall <https://www.youtube.com/watch?v=j2UJ2oBeya0&t=387s>

<sup>2</sup> <https://childrenshealthdefense.org/defender/blackrock-vanguard-own-big-pharma-media/>

<sup>3</sup> Robert F. Kennedy address to Vermont Town Hall <https://www.youtube.com/watch?v=j2UJ2oBeya0&t=387s>

## THE US GOVERNMENT & BIG PHARMA

“The pharmaceutical industry is a \$1 trillion industry that puts more into government lobbying every year—double oil and gas industries and five times aerospace and defense. Regulatory agencies have become a sock puppet of the industry ... a subsidiary of Big Pharma.”<sup>4</sup>

Even before Covid-19, a new vaccine averaged revenues of about \$1 billion a year for companies, so there is tremendous economic pressure for the CDC to add new vaccines to the schedule ... *and most of the people who sit on the CDC vaccine committees are vaccine industry insiders.* For example, Paul Offit, one of the gurus of the vaccine movement. In 1999 he sat on a vaccine advisory committee that added the rotavirus vaccine to the CDC schedule. Paul Offit owned the patent for the rotavirus vaccine, and he was able to sell that vaccine for \$182 million six years later. He reportedly made \$40 million personally from that transaction.<sup>5</sup>

“In 2008, Daniel R. Levinson, the Inspector General at the HHS (Dept of Health and Human Services) said that ‘up to 97% of the people who sit on those CDC vaccine committees have the same kind of conflict that Offit does’.”<sup>6</sup>

As of September 2021, stories are beginning to surface about Dr. Anthony Fauci’s ties to “gain-of-function” research with bat coronavirus in Wuhan, China, as well as possible financial ties to the development of Modern’s mRNA 1273 vaccine at Fauci’s National Institute of Allergy and Infectious Disease labs (NIAID).<sup>7</sup>

### Origin of Covid-19

According to establishment virologists and gene engineers (who get their money from military biodefense programs, government funding, and Big Pharma), a relatively innocuous and heretofore non-contagious coronavirus quickly mutated into a deadly killer, leaving behind no biological or epidemiological traces whatsoever of its rapid evolution.

Coincidentally, this deadly viral mutation and ensuing epidemic emerged in the exact same densely populated urban neighborhood (600 miles from the nearest bat caves) in Wuhan, China, where a series of controversial genetic engineering experiments involving the weaponization (euphemistically called gain-of-function experimentation) of coronaviruses were being conducted in several badly managed, accident-prone labs.<sup>8</sup>

There’s a ton of info and a paper trail. Suffice to say, it seems various people, including government agencies, had various vested interests ... and here we are.

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<sup>4</sup> Ibid.

<sup>5</sup> Ibid

<sup>6</sup> Ibid.

<sup>7</sup> <https://www.nytimespost.com/steve-hilton-how-does-anthony-fauci-still-have-a-job/>

<sup>8</sup> *The Truth About Covid-19*, Dr. Joesph Mercola, Chelsea Green Publishing, 2021

# COVID -19

(CDC figures):<sup>9 10</sup>

<b>Covid survivability rate</b>	<b>Vaccine survivability rate</b>
<ul style="list-style-type: none"><li>• 99.997 % age 0–19 years</li><li>• 99.98 % age 20–49 years</li><li>• 99.5 % age 50–69 years</li><li>• 94.6 % age 70-plus</li></ul>	<ul style="list-style-type: none"><li>• 98.4% (average)</li></ul>

**In other words:**

**According to the CDC, if you're under age 70**

**YOU STAND MORE RISK OF DYING FROM THE VACCINE THAN COVID.**

## Number of Covid deaths erroneously inflated

As early as August 26, 2020, the CDC released figures that showed that only 6 percent of COVID-19 deaths in the US had COVID-19 listed as the sole cause of death on the death certificate. The remaining 94 percent of “Covid deaths” had an average of 2.6 comorbidities or additional causes of death, including diabetes, obesity, heart disease, lung disease, kidney disease, dementia, and hypertension.<sup>11</sup>

This reporting trend has continued, which means the number of “Covid deaths” relentlessly reported by the CDC and the US media — 679,451 as of September 2021 — are NOT actual Covid deaths, but rather Covid-related deaths.

**Which means, as of September 2021,  
the actual accurate “Covid-only” death toll of  
normally healthy humans is**

**40,767**

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<sup>9</sup> “Covid 19 Planning Scenarios, table 3, scenario 5: current best estimate,” updated September 10, 2020  
[www.CDC.gov/coronavirus/2019ncov/hcp/planning:scenarios.html](http://www.CDC.gov/coronavirus/2019ncov/hcp/planning:scenarios.html)

<sup>10</sup> [https://www.cdc.gov/mmwr/volumes/70/wr/mm7008e3.htm?s\\_cid=mm7008e3\\_w](https://www.cdc.gov/mmwr/volumes/70/wr/mm7008e3.htm?s_cid=mm7008e3_w)

<sup>11</sup> Natasha Anderson and Nexstar Media Wire, “New CDC Report Shows 94% of COVID-19 Deaths in US Had Contributing Conditions,” WFLA, August 30, 2020, <https://www.wfla.com/community/health/coronavirus/new-cdc-report-shows-94-of-covid-19-deaths-in-us-had-underlying-medical-conditions>.

To put this in perspective, a Johns Hopkins study in 2016 found that *more than 250,000 Americans die each year from preventable medical errors*, effectively making modern medicine the third leading cause of death in the US. <sup>12</sup>

To put it simply: People are dying *with* COVID-19 as opposed to dying *from* it.<sup>13</sup> And thousands are dying from medical mismanagement of Covid-19.

Which brings us to another cause of death: **Intubation.**

Clinical studies show that there is no direct evidence attesting to the benefit of intubation and IMV in critically ill Covid-19 patients. On the contrary, a report revealed that of 32 Covid-19 patients who received intubation and IMV support, 31 (97%) died. Non-survivors had more comorbidities than survivors. <sup>14</sup>

It almost never helps, but doctors keep intubating thousands of patients anyway... even though there are highly effective *clinically proven* methods and medicines available for Covid-19 that Big Pharma and Big Media are making sure stay under wraps and out of the public awareness.

## **A PROVEN COVID CURE**

Despite what the mainstream media narrative says, there are several Covid treatments that are safe and effective and already available, from IV vitamin C to homeopathics to fluvoxamine.<sup>15</sup> But here we're going to focus on the most effective mainstream treatment: **Ivermectin**

Ivermectin is an anti-parasitic medicine that is on the World Health Organization's (WHO) list of essential medicines. It has been given 3.7 billion times around the globe with a very few occasional mild side effects. It won the Nobel prize in 2015 for its global and historic impacts in eradicating endemic parasitic infections in many parts of the world.

Currently over 60 clinical trials around the world have proven Ivermectin to be a safe, effective prophylaxis and treatment for Covid-19 and its variants. For example, the study "Ivermectin for Prevention and Treatment of COVID-19 Infection: A Systematic Review, Meta-analysis, and Trial Sequential Analysis to Inform Clinical Guidelines," that was published in the American Journal of Therapeutics: [July/August 2021 - Volume 28 - Issue 4 - p e434-e460](#) shows that Ivermectin has proven to be highly potent against COVID-19.

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<sup>12</sup> Ray Sipherd, "The third leading cause of death in the US most doctors don't want you to know about," CNBC, February 22, 2018, [www.cnbc.com/2018/02/22/medical-errors-third-leading-cause-of-death-in-america.html](http://www.cnbc.com/2018/02/22/medical-errors-third-leading-cause-of-death-in-america.html)

<sup>13</sup> *The Truth About Covid-19: Exposing the Great Reset*, Dr. Joseph Mercola, Chelsea Green Publishing, 2021

<sup>14</sup> Clinical course and risk factors for mortality of adult inpatients with COVID-19 in Wuhan, China: a retrospective cohort study. *Lancet.* 2020;395(10229):1054–1062.

<sup>15</sup> Fluvoxamine: A Review of Its Mechanism of Action and Its Role in COVID-19, [Front Pharmacol.](#) 2021; 12: 652688.

Ivermectin has antiviral and anti-inflammatory properties, and meta-analyses based on 18 randomized controlled treatment trials of Ivermectin in COVID-19 have found large, statistically significant reductions in mortality, time to clinical recovery, and time to viral clearance.<sup>16</sup>

Furthermore, results from numerous controlled prophylaxis trials report significantly reduced risks of contracting COVID-19 with the regular use of Ivermectin.

### **Uttar Pradesh—almost Covid-free because of Ivermectin**

There are examples of Ivermectin governmental distribution campaigns leading to rapid population-wide decreases in morbidity and mortality, indicating that an oral agent effective in all phases of COVID-19 has been identified.



For example, the use of Ivermectin in Uttar Pradesh, the most densely populated state in India, has been nothing short of miraculous. Despite housing a population of 240 million people (roughly 73% of the U.S. population), this northern state has been averaging only 24 cases and 0-2 deaths per day in recent months. Why?

Ivermectin is given free of charge to all citizens by the state. Now, the death rate in Uttar Pradesh is 95/ 1 million people and roughly 1/20 the death rate of the U.S.<sup>17</sup>

### **Why are we not using Ivermectin in the US?**

Why are we hearing almost nothing in the media except negative reports of the dangerous toxic side effects of ingesting the veterinary-approved version of Ivermectin and horror stories of people getting sick after taking the bovine/equine “horse pill?”

MONEY

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[https://journals.lww.com/americantherapeutics/fulltext/2021/06000/review\\_of\\_the\\_emerging\\_evidence\\_demonstrating\\_the.4.aspx](https://journals.lww.com/americantherapeutics/fulltext/2021/06000/review_of_the_emerging_evidence_demonstrating_the.4.aspx)

<sup>17</sup> <https://newsrescue.com/the-undeniable-ivermectin-miracle-indias-240m-populated-largest-state-uttar-pradesh-horowitz/>

Ivermectin is what is called a “repurposed drug.” It was designed to treat parasites. If repurposed to use against Covid, there would be no development of a vaccine, no billions of dollars in grants to the pharmaceutical companies, and no billions upon billions of dollars in vaccine sales.

### **FDA Emergency Use Authorization (EUA)**

We do not hear about Ivermectin and other drugs that can be used to cure Covid-19 because under section 564 as amended by PAHPRA (The Pandemic & All-Hazards Preparedness Reauthorization Act of 2013) the FDA can only authorize the emergency use of an unapproved medical product (such as a new vaccine) *when there are no adequate, approved, and available alternatives*.<sup>18</sup>

If a safe, effective, cheap cure for Covid was available, there would be no need for a vaccine and Big Pharma would lose out on trillions of dollars. So the corporate powers that run the pharmaceutical companies and the media companies make sure you never hear about it. Or if you do hear about it, all you hear about are the dangers involved in taking it.

### **Why are people using veterinary-grade Ivermectin?**

People who desire an alternative to the vaccine and who want to take Ivermectin are being refused its use in hospitals *even when they have a doctor’s prescription* for human-grade Ivermectin. Many major pharmacy chains around the US that are owned by the same corporate interests that run Big Pharma are refusing to fill legitimate prescriptions.

When people are afraid and desperate, and can’t get the medicine that will help them, they do stupid things—like take a horse pill without realizing they need to adjust the dosage according to their weight and size.

## **THE PCR TEST**

### **Former Vice President at Pfizer, Dr. Michael Yeadon:**

“I think the PCR test, at present, is throwing up so many false positives that, in fact, we’re misdiagnosing the cause of the deaths that are being reported.”

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<sup>18</sup> <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/emergency-use-authorization-medical-products-and-related-authorities#footnote6>

## How the PCR test works

The PCR swab collects RNA from your nasal cavity. This RNA is then reverse-transcribed into DNA. Due to its tiny size, it must be amplified to become discernible. Each round of amplification is called a cycle, and the number of amplification cycles used by any given test or lab is called a cycle threshold (CT). The higher the CT, the greater the risk that insignificant sequences of viral DNA end up being magnified to the point that the test reads positive even if your viral load is extremely low or the virus is inactive and poses no threat to you or anyone else.

Several replicated studies, including a September 28, 2020 study in *Clinical Infectious Diseases*, revealed that when you run a PCR test at a CT of 35 or higher, the accuracy drops to 3 percent, resulting in a 97 percent false positive rate. Yet tests recommended by the World Health Organization are set to 45 cycles, and the US Food and Drug Administration and the US Centers for Disease Control and Prevention recommend running PCR tests at a CT of 40.<sup>19 20</sup> Why are we running PCR tests in ever greater numbers when the test is functionally useless?

**Because it gives us an epidemic of false positives  
that drives people into fear and thus into choosing the experimental vaccines  
which they are being told is their only hope.**

**Dr. Kary Mullis won the Nobel Prize in Chemistry in 1993 for the invention of the PCR test** (polymerase chain reaction technique). He says, “The PCR, if you do it well, you can find almost anything in anybody. Those guys have got an agenda which is not what we would like them to have, being that we pay for them to take care of our health in some way. They have a personal kind of agenda. They make up their own rules as they go; they change them when they want to. And they (are smug)—like Tony Fauci does not mind going on television in front of the people who pay his salary and lie directly into the camera.”<sup>21</sup>

**Anthony Fauci admits the PCR test is useless:** “If you get [perform the test at] a cycle threshold of 35 or more...the chances of it being replication-competent [aka accurate] are miniscule...you almost never can culture virus [detect a true positive result] from a 37 threshold cycle...even 36...”<sup>22</sup>

**The CDC admits PCR tests** “May not necessarily indicate the presence of an infectious virus ... or viral pathogens.”<sup>23</sup>

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<sup>19</sup> Rita Jaafar et al., “Correlation Between 3790 Quantitative Polymerase Chain Reaction–Positives Samples and Positive Cell Cultures, Including 1941 Severe Acute Respiratory Syndrome Coronavirus 2 Isolates,” *Clinical Infectious Diseases* ciaa 1491 (September 28, 2020), <https://doi.org/10.1093/cid/ciaa1491>.

<sup>20</sup> Centers for Disease Control and Prevention, “CDC 2019 novel coronavirus RT-PCR diagnostic panel,” July 13, 2020 (PDF) [www.DOI.org/10.2807/1560-7917.ES.2020.25.3.2000045](http://www.DOI.org/10.2807/1560-7917.ES.2020.25.3.2000045)

<sup>21</sup> <https://www.youtube.com/watch?v=ytazSx7W68g>

<sup>22</sup> July 16, 2020, podcast, “This Week In Virology”

<sup>23</sup> “CDC 2019 – novel coronavirus (2019 –nCoV) Real-Time RT-PCR Diagnostic Panel,” [www.fda.gov/media/134922/download](http://www.fda.gov/media/134922/download)

## AFTER MILLIONS OF PCR TESTS CONDUCTED

**CDC announces on 7/21/21  
that it will discontinue use of the PCR test  
as of Dec. 31, 2021**

[https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-Changes\\_CDC\\_RT-PCR\\_SARS-CoV-2\\_Testing\\_1.html](https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-Changes_CDC_RT-PCR_SARS-CoV-2_Testing_1.html)

US citizens were hoodwinked about the PCR tests for over a year as it drove ever-increasing false positives *even as government officials knew the way the test was being conducted as advised by the FDA and CDC rendered it worthless.*

What else are we being hoodwinked about?

## THE VACCINE

**The Latest:** September 16, 2021 – In a Today Show interview, CDC head Dr. Rochelle Walensky admits there's no data that proves a **third shot** of the Moderna or Pfizer vaccines will increase protection against infection. But she and her colleagues have "hope" that a third dose will decrease transmission and infections.<sup>24</sup>

**CNBC reports: Israel's Health Ministry says Pfizer and BioTech's Covid-19 is only 39% effective in Israel where the delta variant is the dominant strain.**

(<https://www.cnn.com/2021/07/23/delta-variant-pfizer-covid-vaccine-39percent->

## The “vaccine” isn't a vaccine

According to the World Health Organization, a vaccine is required to do one of these three things in order to be called a vaccine:

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<sup>24</sup> <https://www.today.com/health/cdc-director-explains-why-covid-19-booster-needed-today-t228695>



- It blocks the transmission of a virus or a pathogen
- It stops someone from getting infected
- It blocks the expression of a pathogen.

Not one of the Covid-19 “vaccine” shots do *any* of these things.

## What it is

The new (experimental) mRNA vaccines use messenger RNA, the genetic material that tells your body how to make proteins. The vaccine is made of mRNA wrapped in a lipid coating that keeps the body from damaging it. The synthetic mRNA in the vaccine is programmed to instruct your cells to produce an unnatural, genetically engineered spike protein. If you are exposed to the real virus later, your body will recognize it and know how to create the anti-bodies to fight it off.<sup>25</sup>

The mRNA vaccine is a brand new technology developed by Dr. Robert Malone, the discoverer of in-vitro and in-vivo RNA transfection and the inventor of mRNA vaccines at the Salk Institute. The internationally renowned research scientist was censored by YouTube for sharing his concerns on the Covid-19 vaccines in a podcast. “[O]ne of my concerns are that the government is not being transparent with us about what those risks are,” says Malone. “And so, I’m of the opinion that people have the right to decide whether to accept a vaccine or not, especially since these are experimental vaccines.”<sup>26</sup>

## VACCINE ISSUES

**An Evidence Review from the Penn Medicine Center for Evidence-based Practice** has concluded:

- There are no specific guidelines for use of messenger RNA (mRNA) vaccines or contraindications to mRNA vaccines.
- No large trials of any mRNA vaccine have been completed yet (unless you count the millions of Americans that have been experimentally vaccinated so far)
- The only evidence on safety of mRNA vaccines comes from small phase I and phase II trials of SARS-CoV-2 vaccines, with follow-up typically less than two months.
- Severe systemic adverse events were reported by up to 10 percent of trial subjects.<sup>27</sup>

### The vaccine does not remain localized

Vaccines are injected into muscle tissue in order to keep the injected substances localized and because muscle tissue is noted for being able to create large numbers of antibodies quickly. However, the *assumption* vaccine developers made that the mRNA in the vaccines would primarily remain in and around the vaccination site have been proven wrong. Data shows the

<sup>25</sup> [https://www.cdc.gov/coronavirus/2019-ncov/downloads/vaccines/COVID-19-mRNA-infographic\\_G\\_508.pdf](https://www.cdc.gov/coronavirus/2019-ncov/downloads/vaccines/COVID-19-mRNA-infographic_G_508.pdf)

<sup>26</sup> <https://www.foxnews.com/media/tucker-carlson-mrna-vaccine-inventor>

<sup>27</sup> <http://www.uphs.upenn.edu/cep/COVID/mRNA%20vaccine%20review%20final.pdf>

mRNA and subsequent spike proteins are widely distributed in the body within hours of injection,<sup>28</sup> *also crossing the blood brain barrier.*<sup>29</sup>

Once in blood circulation, the spike protein binds to platelet receptors and the cells that line your blood vessels. When that happens, it can cause platelets to clump together, resulting in blood clots, and/or causing abnormal bleeding as well as toxic effects leading to cardiovascular and neurological damage as well as reproductive toxicity.

### **Antibody dependent enhancement**

A major concern with the mRNA vaccines (and other vaccines as well), is a phenomenon called antibody-dependent infection enhancement (ADE). In some cases antibodies can *enhance virus entry and replication in cells*, thus increasing rather than stopping infection and replication of a virus.<sup>30</sup>

Data from the study of SARS-CoV and other respiratory viruses suggest that anti-SARS-CoV-2 antibodies could exacerbate COVID-19 through antibody-dependent enhancement (ADE).<sup>31</sup> ADE triggered by the vaccine may be one of the reasons we continue to see a rise of infectivity.

### **Chronic Inflammatory response**

Long-haul COVID increasingly looks like an autoimmune disease where the antibody creation response triggered by the vaccine doesn't know how to switch itself off. Antibodies are continually created that attack the body's own proteins—a hallmark of many autoimmune diseases.

**Immune Thrombocytopenia** (a blood disorder) has emerged as an important complication of COVID-19). In many cases, it emerges after full recovery from the disease, i.e, after the virus has been cleared, suggesting it is an autoimmune phenomenon.<sup>32</sup>

### **Spike Protein Toxicity**

SARS-CoV-2 has serious effects on the vasculature in multiple organs, including the brain vasculature. “The implications for vaccines intended to cause cells to manufacture the spike protein are clear and are an obvious cause for concern.”<sup>33</sup>

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<sup>28</sup> Worse Than the Disease? Reviewing Some Possible Unintended Consequences of the mRNA Vaccines Against COVID-19, Computer Science and International Journal of Vaccine Theory, Practice, and Research 2(1), May 10, 2021 Page | 38

<https://dpbh.nv.gov/uploadedFiles/dpbhgov/content/Boards/BOH/Meetings/2021/SENEFF~1.PDF>

<sup>29</sup> Nat Neurosci. 2021 Mar;24(3):368-378.; <https://pubmed.ncbi.nlm.nih.gov/33328624/>

<sup>30</sup> [Advanced Immunology](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8438590/). 2021 Sep 14; <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8438590/>

<sup>31</sup> Antibody-dependent enhancement and SARS-CoV-2 vaccines and therapies [\*Nature Microbiology\*](#) volume 5, pages1185–1191 (2020)

<sup>32</sup> Op.Cit. <https://dpbh.nv.gov/uploadedFiles/dpbhgov/content/Boards/BOH/Meetings/2021/SENEFF~1.PDF>

<sup>33</sup> Ibid. <https://dpbh.nv.gov/uploadedFiles/dpbhgov/content/Boards/BOH/Meetings/2021/SENEFF~1.PDF>

## **Prion Diseases and Neurodegeneration**

Prion diseases are a collection of neurodegenerative diseases (including Alzheimer's and Parkinson's disease) that are induced through the misfolding of important bodily proteins causing widespread damage to neurons. The best-known prion disease is MADCOW disease. A paper published by J. Bart Classen (2021) proposed that the spike protein in the mRNA vaccines could cause prion-like diseases, in part through its ability to bind to many known proteins and induce their misfolding into potential prions.<sup>34</sup>

## **Emergence of Novel Variants of SARS-CoV-2**

“We can expect continued emergence of more novel strains that are resistant to the antibodies induced by the vaccine, such that the vaccine may quickly become obsolete. Already a published study by researchers from Pfizer has shown that vaccine effectiveness is reduced for many of these variant strains. The evolution of antibody-resistant strains will surely be used to argue for repeated rounds of vaccines every few months, with increasing numbers of viral variants coded into the vaccines. This is an arms race that we will probably lose.”<sup>35</sup>

## **Potential for Permanent Incorporation of Spike Protein Gene into human DNA**

It has been claimed that mRNA-based vaccines are NOT gene therapy and are safer than DNA-vectored vaccines because the RNA cannot become inadvertently incorporated into the human genome. However, it is not at all clear that this is true. The classic model of DNA → RNA → protein is now known to be false. It is now indisputable that there is a large class of viruses called retroviruses that carry genes that reverse transcribe RNA back into complementary DNA (cDNA). In 1975, Howard Temin, Renato Dulbecco, and David Baltimore shared the Nobel Prize in Physiology or Medicine in 1975 for their discovery of reverse transcriptase and its synthesis by retroviruses (such as human immunodeficiency virus (HIV)) to derive DNA from RNA (Temin and Mizutani, 1970, Baltimore, 1970).

Researchers from MIT and Harvard published a disturbing paper in 2021, where they provided strong evidence that the SARS-CoV-2 RNA can be reverse transcribed into DNA and integrated into human DNA (Zhang et al., 2021). They were led to investigate this idea after having observed that many patients continue to test positive for COVID-19 after the virus has already been cleared from their body.<sup>36</sup>

**Dr. Michael Yeadon, Former VP of Pfizer Pharmaceuticals** says “Governments around the world have exaggerated the true risk of the Wuhan coronavirus ... and global crimes against humanity are being perpetrated against a large proportion of the world's population.”

<https://www.lifesitenews.com/news/exclusive-former-pfizer-vp-your-government-is-lying-to-you-in-a-way-that-could-lead-to-your-death/>

<sup>34</sup> Ibid. <https://dpbh.nv.gov/uploadedFiles/dpbhnavgov/content/Boards/BOH/Meetings/2021/SENEFF~1.PDF>

<sup>35</sup> Ibid <https://dpbh.nv.gov/uploadedFiles/dpbhnavgov/content/Boards/BOH/Meetings/2021/SENEFF~1.PDF>

<sup>36</sup> Ibid. <https://dpbh.nv.gov/uploadedFiles/dpbhnavgov/content/Boards/BOH/Meetings/2021/SENEFF~1.PDF>

## VACCINE SIDE EFFECTS

- 77.4% of people taking the vaccine report systemic reactions ranging from mild to severe, including fever, chills, vomiting, diarrhea, joint and muscle pain, convulsions, heart failure, acute disseminated encephalomyelitis, autoimmune diseases, cataplexy, Guillain-Barre syndrome, meningoencephalitis, myocarditis, pericarditis, stroke, seizures, transverse myelitis and anaphylaxis.
- 9.2% of vaccine reactions are serious involving hospitalization
- 1.6% of vaccines administered result in death (CDC figures)<sup>37</sup>

Increasingly disturbing data is arriving daily. Information recently released by the Centers for Disease Control and Prevention (CDC) showed that between Dec. 14, 2020 and Sept. 3, 2021, a total of 675,593 adverse events following COVID vaccines were reported to the governmental Vaccine Adverse Event Reporting System (VAERS). ( <https://vaers.hhs.gov/> )

The data included a total of 14,506 reports of deaths — an increase of 595 over the previous week.<sup>38</sup>

**PLEASE NOTE:** Statistically, fewer than 10% of vaccine injuries are reported to the VAERS system. The number of injured and dead is doubtlessly much higher.

### Rising death toll

Deaths from COVID shots in the US now equal 20 years of recorded deaths for all vaccines ever developed and administered since 2001.

In Scotland, for the period December 8, 2020 to June 11, 2021, the Public Health Department of Scotland recorded a total of 5,520 deaths within 28 days of vaccination. Tables 15 and 16 below provide the observed and expected deaths by age group and vaccine dose number.<sup>39</sup>

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<sup>37</sup> <https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/reactogenicity.html>

<sup>38</sup> <https://www.medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=CAT&EVENTS=ON&VAX=COVID19>

<sup>39</sup> [https://beta.publichealthscotland.scot/media/8183/21-06-23-covid19-publication\\_report.pdf](https://beta.publichealthscotland.scot/media/8183/21-06-23-covid19-publication_report.pdf)

**Table 15: Number of deaths that have occurred within 28 days following a dose 1 COVID-19 vaccination**

Number of days post 1 <sup>st</sup> dose vaccination	Age Group in Years	Observed number of deaths	Expected Number of Deaths	Observed/Expected ratio	95 % Lower Confidence Intervals	95% Upper Confidence Interval
0-27	<50	95	153	0.62	0.51	0.76
0-27	50-69	586	940	0.62	0.57	0.68
0-27	70-79	764	1,239	0.62	0.57	0.66
0-27	80+	1,830	2,598	0.70	0.67	0.74
0-27	All Ages	3,275	4,929	0.66	0.64	0.69

The sum of the breakdowns may not match totals due to rounding

## Public Health Scotland

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**Table 16: Number of deaths that have occurred within 28 days following a dose 2 COVID-19 vaccination**

Number of days post 2 <sup>nd</sup> dose vaccination	Age Group in Years	Observed number of deaths	Expected Number of Deaths	Observed/Expected ratio	95 % Lower Confidence Intervals	95% Upper Confidence Interval
0-27	<50	27	49	0.55	0.37	0.78
0-27	50-69	365	630	0.58	0.52	0.64
0-27	70-79	585	1,052	0.56	0.51	0.60
0-27	80+	1,270	2,057	0.62	0.58	0.65
0-27	All Ages	2,247	3,789	0.59	0.57	0.62

The sum of the breakdowns may not match totals due to rounding

## The vaccinated versus the unvaccinated

Vaccinated people *seem* to have a greater chance of getting Covid than the unvaccinated.

However, in summer 2021, [CDC data](#) found that 74% of those who tested positive for Covid-19 in a Massachusetts analysis had been fully-vaccinated. Equally as troubling for those advocating vaccination-for-all: *four out of five people hospitalized with Covid were fully-vaccinated*. The CDC also admits that "viral load" — indicating how able the human host is to spread Covid-19 — is about the same among the vaccinated and unvaccinated.<sup>40</sup>

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<sup>40</sup> "Outbreak of SARS-CoV-2 Infections, Including COVID-19 Vaccine Breakthrough Infections, Associated with Large Public Gatherings — Barnstable County, Massachusetts, July 2021"; [https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e2.htm?s\\_cid=mm7031e2\\_w](https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e2.htm?s_cid=mm7031e2_w)

These figures continue to be verified, supporting long-held assumptions in the health community that natural immunity is potentially as powerful, if not more so, than vaccine-driven immunization that potentially weakens the body's natural immune system.

However, relentless media attention on the “dangers of the unvaxxed” is driving hysteria and fear, inciting people against one another, dividing communities and families, fostering a regime of unfounded terror that is the foundation of draconian censorship and other radical totalitarian measures that threaten personal liberty and the fabric of democracy itself.

To what end?

## **MONEY & CONTROL**

- Worldwide, billionaires saw their wealth increase by \$3.9 trillion between March 18 and December 31, 2020. Meanwhile, between 200 million to 500 million people have fallen into poverty during 2020. (<https://www.oxfam.org/en/research/inequality-virus>)
- The US has lost 20.6 million jobs since mid-March, resulting in an unemployment rate of 14.7%, a level not seen since the Great Depression in the 1930s. (Center for Infectious Disease Research and Policy <https://www.cidrap.umn.edu/news-perspective/2020/05/us-job-losses-due-covid-19-highest-great-depression>)
- As of June 9, 2021, Harvard University's The Tracker showed there were 37.5% fewer small businesses open nationwide compared with January 2020 (<https://www.wral.com/fact-check-how-many-small-businesses-closed-during-the-pandemic/19718216/>)

Analyses shows that the emotional costs of the pandemic are much higher for the poor and vulnerable than they are for the rich, heightening deep pre-existing inequities in well-being in the U.S and many other countries. There have been steep declines in reported well-being, more worry, sadness, loneliness, and anger, more drug overdoses and deaths, more mental and behavioral issues and more suicides, especially among minorities, young adults and people with low incomes. <sup>41</sup>

But what the hell. At least Big Pharma shareholders have their assets covered.

## **PHARMACEUTICAL COMPANIES GIVEN IMMUNITY FROM LIABILITY**

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<sup>41</sup> <https://www.brookings.edu/research/the-human-costs-of-the-pandemic-is-it-time-to-prioritize-well-being/>

Effective March 27, 2020, the Secretary of the United States Department of Health & Human Services (HHS), Alex M. Azar III issued a “Declaration pursuant to section 319F-3 of the Public Health Service Act to provide liability immunity for activities related to medical countermeasures against COVID-19.” (85 FR 15198.) It provides that those that “prescribe, administer, deliver, distribute or dispense” and the “manufacturers [and] distributors” of “any vaccine, used to treat, ... prevent or mitigate COVID-19” shall enjoy “liability immunity,” including, “from suit and liability under Federal and State law with respect to all claims for loss caused by, arising out of, relating to, or resulting from the administration to or the use by an individual of a [COVID-19 vaccine].” (*Id.*; 42 U.S.C. § 247d-6d.)

**Prior to his current position, Secretary Azar was a senior executive for Eli Lilly & Co. from 2007 to 2017, a major pharmaceutical company.**

<https://www.federalregister.gov/documents/2020/04/15/2020-08040/amendment-to-declaration-under-the-public-readiness-and-emergency-preparedness-act-for-medical>

## **RESOURCES**

You can find effective and affordable Covid-19 treatments and therapies at:

**America’s Front Line Doctors:**

<https://americasfrontlinedoctors.org/treatments/how-do-i-get-covid-19-medication/>

**[www.MyFreeDoctor.com](http://www.MyFreeDoctor.com)**

**Lawyers who help fight vaccine mandates:**

<https://fightthemandates.godaddysites.com>