

Vaccination is a Sin

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Many attribute the practice of vaccination to the quack doctor Edward Jenner.¹ The very word vaccine is from the Latin word for cow. Jenner pulled a trick. He renamed cowpox *variolae vaccinae*, from which we get the word vaccine. Jenner called the cowpox that he injected into humans *variolae vaccinae*. His theory was that it would make them immune from smallpox. Cowpox is a disease of cows' udders and has no relation to smallpox, except they both have the suffix "pox" in their names. Indeed, *variolae vaccinae*, which means smallpox of the cow, is a made-up disease. There is a disease called cowpox and a disease called smallpox, but there is no such disease as smallpox of the cow.² Jenner was running a medical scam.

The vaccine practice also involved using *variolae* (i.e., smallpox) as the inoculating antigen. But that practice was no more successful than using cowpox. Jenner was intimately aware of the ineffectiveness of both cowpox and smallpox vaccines. Thomas Morgan writes in his book, *Medical Delusions*, that "Jenner soon discovered that vaccination did not give immunity from smallpox, including some who had been vaccinated by himself and had died from it."³ Eleanor McBean explains that "[i]t was not long ... before Jenner's cowpox vaccinations were followed by death and disease, and that practice was also branded as dangerous and deadly."⁴ But Jenner convinced the world his cowpox vaccine worked because he lied about its efficacy and safety. Jenner's unceasing promotion of the practice and subsequent government funding of his research led to compulsory vaccination in England in 1853, unsurprisingly bringing death and disease to the population.⁵ The smallpox vaccine was proven to be unsafe and ineffective. Morgan summarizes the fraudulent foundations of vaccines.

From its inception until the present day, the vaccination scheme has been an endless record of lies, deception, fraud, juggling statistics, and falsifying death certificates in order to preserve vaccination from reproach and to secure its continuation. . . and all this after more than a century of terrible experience, which has demonstrated that vaccination has killed more than smallpox, besides crippling and disfiguring millions more.⁶

But those inconvenient historical details are ignored today. While "routine vaccination against smallpox among the general public was stopped ... the U.S. government has stockpiled enough smallpox vaccine to vaccinate everyone who would need it if a smallpox outbreak were to occur."⁷ And the smallpox vaccine is still being administered on a case-by-case basis today. The Mayo Clinic reveals some of the risks of the smallpox vaccine and states that "the risks of the vaccine outweigh the benefits for most people."⁸

The ACAM2000 vaccine uses a live virus that's like smallpox, but less harmful. It can sometimes cause serious side effects, such as infections in the heart or brain. That's why the vaccine is not given to everyone. Unless there is a smallpox outbreak, **the risks of the**

vaccine outweigh the benefits for most people.⁹

A little-known fact is that the ineffective and dangerous practice of vaccination did not actually start with Edward Jenner; it can be traced to Dhanwantari (1,500 B.C.), who was considered the Vedic Father of Medicine.¹⁰ The practice of injecting vaccines is founded on a Hindu religious superstition. Vaccination is a religious practice that has been proven to be medically ineffective and harmful.¹¹

The Hindu religion is a heathen religion. God commands us to have nothing to do with heathen practices. “And have no fellowship with the unfruitful works of darkness, but rather reprove them.” Ephesians 5:11. We are called on to avoid such practices. “Beware lest any man spoil you through philosophy and vain deceit, after the tradition of men, after the rudiments of the world, and not after Christ.” Colossians 2:8.

Christians have nothing religiously in common with Hindus. We are not to practice their heathen religion that masquerades under the guise of medicine. Christians are to separate themselves from the religious practices of heathens. “Be ye not unequally yoked together with unbelievers: for what fellowship hath righteousness with unrighteousness? and what communion hath light with darkness? And what concord hath Christ with Belial? or what part hath he that believeth with an infidel? And what agreement hath the temple of God with idols? for ye are the temple of the living God; as God hath said, I will dwell in them, and walk in them; and I will be their God, and they shall be my people. Wherefore come out from among them, and be ye separate, saith the Lord, and touch not the unclean thing; and I will receive you, And will be a Father unto you, and ye shall be my sons and daughters, saith the Lord Almighty.” (2 Corinthians 6:14-18)

Vaccines are “usually administered through needle injections.”¹² Vaccine active ingredients are typically viruses or bacteria.¹³ They are commonly called antigens. An antigen is defined as “a substance that enters the body and starts a process that can cause disease.”¹⁴ The injected antigen is usually attenuated or inactivated to reduce the risk of disease. The theory behind vaccines promoted to the public is to “stimulate a person's immune system to produce immunity to a specific disease, protecting the person from that disease.”¹⁵ In addition to the antigens, vaccines contain an adjuvant, which is intended to stimulate the immune response of the person. Adjuvants are typically heavy metals like mercury or aluminum, which are neurotoxic.¹⁶ Many contaminants find their way into the vaccines from the manufacturing process, including, but not limited to, antibiotics, formaldehyde, and aborted fetal tissue.¹⁷

Vaccination is a strange medical practice where instead of the doctor trying to cure a person of a disease to make him well again, the doctor purposely infects a well person with a disease in the hope that his reaction to the infection will be less than it would otherwise be if he had contracted the disease through the environment. Vaccination is not without risk. There can be dire consequences to the practice. There are side effects to vaccination that the medical community calls adverse events that can range from soreness in the injection site to fever, paralysis, and even death. The expectation, which is often not realized, is that the vaccinated person will develop an immunity to the disease and

be thus protected from future infection. Unlike natural immunity from a disease contracted from the environment, which is typically lifelong, the immunity from vaccination, if it is present at all, is fleeting, requiring booster shots.

Vaccines are not given as therapeutic medicine to treat a person who is ill with a disease. Vaccines are given to people who are well. To get vaccinated is to take on a spirit of fear and reliance on man rather than God.

But when Jesus heard that, he said unto them, They that be whole need not a physician, but they that are sick.” (Matthew 9:12)

For God has not given us a spirit of fear, but of power and of love and of a sound mind” (2 Timothy 1:7).

Christians are religiously bound to care for their bodies as they are the temple of the Holy Spirit.

Know ye not that ye are the temple of God, and that the Spirit of God dwelleth in you? If any man defile the temple of God, him shall God destroy; for the temple of God is holy, which temple ye are. (1 Corinthians 3:16-17)

What? know ye not that your body is the temple of the Holy Ghost which is in you, which ye have of God, and ye are not your own? For ye are bought with a price: therefore glorify God in your body, and in your spirit, which are God’s. (1 Corinthians 6:19-20)

It is the wish of God that we prosper in our physical health. “Beloved, I wish above all things that thou mayest prosper and be in health, even as thy soul prospereth.” 3 John 1:2. Vaccines are detrimental to health, and thus, it would violate God’s command to be vaccinated. It is an established scientific fact that vaccines cause allergies and other ailments.

Food Allergies

Vinu Arumugham, in an article written for the Journal of Developing Drugs, reveals that “Nobel Laureate Charles Richet demonstrated over a hundred years ago that injecting a protein into animals or humans causes immune system sensitization to that protein.”¹⁸ What does that mean for the person receiving the vaccine? Arumugham explains that “[s]ubsequent exposure to the protein can result in allergic reactions or anaphylaxis.”¹⁹ Thus, food proteins injected into a person through a vaccine can have the effect of causing a subsequent allergic reaction by that person who subsequently eats food that contains the food proteins in the vaccine.

That means that vaccines can cause food allergies. Arumugham reveals that this scientific

fact of vaccine-induced allergies “has since been demonstrated over and over again in humans and animal models.”²⁰ Vaccines contain food proteins derived from chicken eggs, casein, gelatin, soy, agar, etc. Those ingredients sound innocent enough. And if they were eaten they would not be harmful and, indeed, would be nutritious. But when those same ingredients are injected into a human body, in a significant number of cases, a person develops an allergic reaction or even anaphylaxis to that food protein.

The allergic reaction is caused because accompanying the food protein is an adjuvant whose purpose is to stimulate the body's immune response to the antigen. The problem is that the stimulated immune response is not limited to the antigen. The body also develops an immune response to the food proteins in the vaccine. The stimulated immune response to the food protein causes an allergic reaction to the food when consumed.

For example, casein is a phosphoprotein derived from milk. Trace amounts of casein are often found in vaccines. Indeed, the DTaP children’s vaccine is cultured using bovine casein as a medium. There has been an explosion of people who have developed allergies to milk. According to the American College of Allergy, Asthma, and Immunology, “cow’s milk is the most common food allergy in children under the age of 5.”²¹ It is probable that milk allergies in young children are a direct result of the stimulated immune response to the bovine casein in the DTaP vaccine.

Aluminum Adjuvant

Vaccines contain adjuvants that are designed to stimulate the immune response to the antigen in the vaccine. A common adjuvant is aluminum.²² Indeed, the CDC lists aluminum, aluminum hydroxide, aluminum phosphate, aluminum sulfate, or aluminum hydroxyphosphate sulfate as ingredients in 27 vaccines.²³ Aluminum is a dangerous neurotoxin and carcinogen. Research has established that “[t]he adverse neurologic, hematopoietic, skeletal, respiratory, immunologic, and other effects associated with excessive aluminum (Al) exposures are well known.”²⁴

Research has proven that the neurological effects of aluminum include “impairment on neurobehavioral tests for psychomotor and cognitive performance and an increased incidence of subjective neurological symptoms.”²⁵ Indeed, “studies clearly identify the nervous system as the most sensitive target of aluminum toxicity.”²⁶ In studies involving “intramuscular administration of aluminum hydroxide or aluminum phosphate vaccine adjuvants in rabbits, increased levels of aluminum were found in the kidney, spleen, liver, heart, lymph nodes, and brain (in decreasing order of aluminum concentration).”²⁷

Mercury

On or about 1999, the U.S. Food and Drug Administration (FDA) determined that mercury in vaccines, in the form of thimerosal, exceeded FDA guidelines for mercury exposure. Mercury is a known neurotoxin. The mercury safety standards were determined by measuring methylmercury. But the mercury in thimerosal metabolizes in the body as ethylmercury. The FDA had no safety

guidelines for ethylmercury. The FDA did not know what to do, so they correctly required vaccine companies to reduce or eliminate the use of thimerosal in vaccines. The CDC identifies thimerosal as a preservative. It is still being used in vaccines. While thimerosal has been removed from childhood vaccines, according to the CDC, it remains an ingredient in influenza, tetanus, and Diphtheria vaccines.²⁸

Polyethylene Glycol

Both the Moderna and the Pfizer/BionTech COVID-19 mRNA vaccines contain lipids, which have polyethylene glycol as part of the lipid ingredients.²⁹ PEG has been proven to cause hypersensitivity reactions.³⁰ A hypersensitivity reaction is an exaggerated or inappropriate immune response that can include anaphylaxis.³¹ “The Anaphylaxis is a medical emergency because it can lead to an acute, life-threatening respiratory failure.”³² Indeed, as of March 5, 2021, “at least 1,689 recipients of the Pfizer and Moderna injections have reported anaphylactic or serious allergic reactions.”³³ The anaphylaxis was predictable. Prior research documented the detrimental effects of PEG on drug delivery. On September 25, 2020, Robert Kennedy, Jr., warned the FDA and NIH about the dangers of PEG in the (at that time) proposed mRNA vaccines.³⁴ No action was taken by the FDA, NIH, Moderna, or Pfizer to mitigate the risk inherent in the mRNA vaccine PEG excipients.

Polysorbate 80

Polysorbate 80 is an excipient contained in the Johnson & Johnson (aka Janssen) COVID-19 vaccine.³⁵ It is also an ingredient in the following vaccines: DtaP-IPV, Hep B influenza Meningococcal, Pneumococcal, Rotavirus, Tdap, Shingles.³⁶ Polysorbate 80 has been proven to cause hypersensitivity reactions.³⁷ A hypersensitivity reaction is a type of exaggerated or inappropriate immune response that can include anaphylaxis.³⁸ “The Anaphylaxis is a medical emergency because it can lead to an acute, life-threatening respiratory failure.”³⁹ Indeed, CNBC reported that “[t]wo trial participants suffered severe allergic reactions shortly after getting Johnson & Johnson’s Covid-19 vaccine.”⁴⁰

Aborted Fetal Tissue Used in Making Vaccines

Vaccines often contain aborted fetal tissue, and those that do not contain aborted fetal tissue are often developed using aborted fetal tissues. For example, Dr. Brianne Barker, associate professor of biology at Drew University, explains that “in order to make the [Johnson and Johnson COVID-19] vaccine, the scientists give PerC6 [fetal] cells DNA so that they can make the parts of the virus and build that molecular machine—basically the PerC6 [fetal] cells are the factories that make the vaccine for us.”⁴¹ The PERC6 fetal cells are allegedly later filtered out of the J&J COVID-19 vaccine before it is put into vials for injection.⁴² Pfizer/BioNTech and Moderna used the HEK293 fetal cell lines in their testing stages for their COVID-19 vaccines.⁴³

The HEK293 fetal line derived from an elective abortion in the 1970s is routinely used to produce proteins and cultivate viruses.⁴⁴ HEK is an acronym for human embryonic kidney cells.

The WI-38 fetal line was derived from fetal tissues harvested from an elective abortion in the 1960s to generate attenuated viruses.⁴⁵

The MRC-5 fetal line was derived from fetal lung tissues harvested from an elective abortion in 1966. The abortion records indicate that it was taken from a 14-week male fetus removed for psychiatric reasons from a 27-year-old woman with a genetically normal family history. MRC-5 is used to generate attenuated viruses.⁴⁶

The origin of PER.C6 fetal line is documented through direct testimony before the Food and Drug Administration's Vaccines and Related Biological Products Advisory Committee from Dr. Alex Van Der Eb, who stated: "So I isolated retina [cells] from a fetus, from a healthy fetus as far as could be seen, of 18 weeks old. There was nothing special in the family history, or the pregnancy was completely normal up to 18 weeks, and it turned out to be a socially indicated abortus, abortus provocatus, and that was simply because the woman wanted to get rid of the fetus."⁴⁷ The PER.C6 fetal line is currently used in the research and development of vaccines.

Abortion is the sin of unjustifiable homicide. God states that we are living souls from the moment of conception in the womb.

For thou hast possessed my reins: thou hast covered me in my mother's womb. I will praise thee; for I am fearfully and wonderfully made: marvellous are thy works; and that my soul knoweth right well. (Psalms 139:13-14)

Listen, O isles, unto me; and hearken, ye people, from far; The LORD hath called me from the womb; from the bowels of my mother hath he made mention of my name. (Isaiah 49:1)

Indeed, we are ordained to be living souls by God before our conception in our mothers' wombs. God forms us in the womb.

Before I formed thee in the belly I knew thee; and before thou camest forth out of the womb I sanctified thee, and I ordained thee a prophet unto the nations. (Jeremiah 1:5)

God is the creator of all things, including the creator of each man in his mother's womb.

As thou knowest not what is the way of the spirit, nor how the bones do grow in the womb of her that is with child: even so thou knowest not the works of God who maketh all. (Ecclesiastes 11:5)

God of the Lord of all, both born and unborn.

I was cast upon thee from the womb: thou *art* my God from my mother's belly. (Psalms 22:10)

Fetuses in the womb are sentient. We see that in Luke when, Elizabeth was greeted by Mary, who was pregnant with Jesus. John the Baptist, who was unborn and in Elizabeth's womb jumped for joy upon hearing the Mary's greeting.

And it came to pass, that, when Elisabeth heard the salutation of Mary, the babe leaped in her womb; and Elisabeth was filled with the Holy Ghost: (Luke 1:41)

God hates the shedding of innocent blood.

These six things doth the LORD hate: yea, seven are an abomination unto him: A proud look, a lying tongue, and **hands that shed innocent blood**, An heart that deviseth wicked imaginations, feet that be swift in running to mischief, A false witness that speaketh lies, and he that soweth discord among brethren. (Proverbs 6:16-19)

The Holy Bible states that God elected Jacob as the heir to the promise. God elected Jacob before he was born.

That is, They which are the children of the flesh, these are not the children of God: but the children of the promise are counted for the seed. For this is the word of promise, At this time will I come, and Sara shall have a son. And not only this; but when Rebecca also had conceived by one, even by our father Isaac; (For the children being not yet born, neither having done any good or evil, that the purpose of God according to election might stand, not of works, but of him that calleth;) It was said unto her, The elder shall serve the younger. As it is written, Jacob have I loved, but Esau have I hated. (Romans 9:8-13)

Notice also what God states about Jacob and Esau. God elected Jacob before they were born and before either he or Esau had done any good or evil. That means that children who are aborted have not done any evil. There is no justification for their death; they are innocent. The killers are culpable, and those who encourage and abet them in their deadly scheme are accomplices in that sin. Unless they repent and turn in faith to Jesus Christ, they will be punished by God accordingly. *See* Matthew 25:31-46; Romans 2:3-9; 2 Corinthians 5:10; Revelation 20:11-15.

Abortion is homicide. God has commanded that we shall not kill one another. "Thou shalt not kill." (Exodus 20:13)

Vaccines are Unavoidably Unsafe

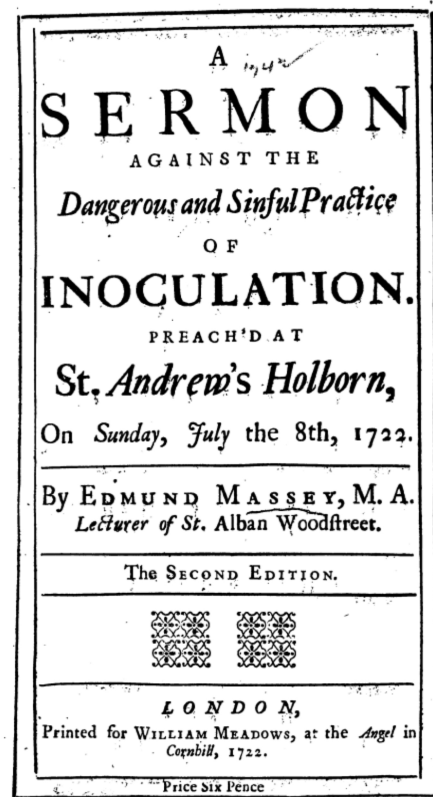
The dangers of vaccines are inherent in the practice and cannot be avoided. Vaccines have been acknowledged by the U.S. Supreme Court and the U.S. Congress to be unavoidably unsafe. Congress passed the National Vaccine Injury Act (NVIA) of 1986, granting pharmaceutical companies immunity for injuries caused by the vaccines they manufactured. As explained by the U.S. Supreme Court in *Bruesewitz v. Wyeth*⁴⁸, the reason for that protection is that Congress deemed vaccines to be unavoidably unsafe;⁴⁹ thus no manufacturer would make a vaccine if they had to suffer the liability for injuries they would unavoidably cause.⁵⁰

Mary S. Holland explains the issue: “The success of the national vaccine program has come at a cost. Some children are permanently disabled or die from their vaccine exposures. ... Between 1980 and 1986, people who claimed vaccine injury brought over three billion dollars of damages claims to U.S. civil courts against vaccine manufacturers.”⁵¹

In response to the litigation that held them accountable for the injuries caused by their vaccines, the vaccine manufacturers lobbied Congress, and in 1986 they were able to get the NVIA law passed. That law protected them from civil liability for injuries caused by vaccines that they manufactured.

The underlying legal reasoning of Congress for the 1986 NVIA law was a concept borrowed from the Restatement of Torts law that vaccines were “unavoidably unsafe.” Holland explains that “[t]he Restatement describes all vaccines as ‘unavoidably unsafe’ products and implicitly recommended that manufacturers not be liable for injuries if doctors administered them properly.”⁵²

In his 1722 pamphlet, “A Sermon Against the Dangerous and Sinful Practice of Inoculation,” Edmund Massey explains that vaccination is a sin. Notice that Massey’s sermon was in 1722. That was 27 years before Edward Jenner was born. That is proof that the practice of administering disease into the blood of healthy persons did not start with Edward Jenner. The word vaccine had not yet been coined in the medical community when Massey gave his 1722 sermon. Massey called the practice of contaminating the blood of healthy people with disease inoculation. It was not until 1798 that Jenner published his fraudulent report and coined the term *variolae vaccinae* from which we get the word, vaccine. Massey’s sermon reveals that inoculation (i.e., vaccination) is a heathen religious practice masquerading as a medical procedure. Massey explains that the Holy Bible reveals that all diseases are under the sovereign control of God. Disease is brought upon men for one of two



reasons: 1) to try our faith, and 2) to punish our sin. Indeed, God explains his sovereignty over all good and evil. “I form the light, and create darkness: I make peace, and create evil: I the LORD do all these things.” (Isaiah 45:7) God uses disease and hardship to correct his elect.

Behold, happy is the man whom God correcteth: therefore despise not thou the chastening of the Almighty: For he maketh sore, and bindeth up: he woundeth, and his hands make whole.” (Job 5:17-18)

The Bible reveals that God sometimes delegates his power to bring disease in rare occasions. For example, in Job, God permitted Satan to strike Job with a noisome disease that caused boils from head to toe. Job 2:4-7. Notice how God gave Satan permission to strike Job with disease.

And Satan answered the LORD, and said, Skin for skin, yea, all that a man hath will he give for his life. But put forth thine hand now, and touch his bone and his flesh, and he will curse thee to thy face. And the LORD said unto Satan, Behold, he is in thine hand; but save his life. So went Satan forth from the presence of the LORD, and smote Job with sore boils from the sole of his foot unto his crown. (Job 2:4-7)

Edmund Massey opines that Job’s disease was brought about by some form of infusion of a toxin similar to the practice of vaccination.

The silence of scripture hath given interpreters occasion of guessing at the distemper, which the Devil here inflicted upon Job. But among them all, it appears not certainly what it was. I will therefore desire to give an opinion, equally I think true, with any that hath yet been taken notice of. It is this, That the Devil by some venomous Infusion into the Body of Job, might raise his blood to such a ferment, as threw out a confluence of inflammatory pustules all over him, from head to Foot. That is, his distemper might be what is now incident to most men, and perhaps conveyed to him by some such way as that of inoculation.⁵³

Massey explains the motive of Satan in striking Job with the terrible disease.

The tempter's aim was still the same as before; to make his patient let go his Integrity, throw off his dependance upon Almighty God, and renounce that allegiance which is justly due to him, as creator and governor of the world.⁵⁴

The attack on Job was unusual because God delegated his power over disease to Satan. That disease was not to punish Job for sin but to test (and prove) Job’s faithfulness to God. Massey

explains:

Our Text indeed ascribes Job's distemper to the power of the Devil; but the foregoing verse shows that power to have been delegated to him, and limited by Almighty God, who alone being omnipotent, the powers that be, whether natural or Political, must all be derived from him [God]. 'Tis true, he has communicated several parts of his sovereignty to the sons of men, but still the exercise of it will ultimately be resolved into his permission. And it is as true, that there are several branches of authority, which he [God] has reserved to himself, in displaying of which, he acts upon prerogative, and without human intervention. I choose to instance in the infliction of diseases, which I will attempt to prove are utterly unlawful to be inflicted, by any who profess themselves Christians.⁵⁵

The usual course is that disease is brought on directly from God. Paul offers us another example where God sent “the messenger of Satan to buffet” him by striking Paul with thorn of pain of some kind in his side. God did this to keep Paul humble. Paul explained that it was part of God’s plan to make him weak in the flesh so that he would be strong in the spirit.

And lest I should be exalted above measure through the abundance of the revelations, there was given to me a thorn in the flesh, the messenger of Satan to buffet me, lest I should be exalted above measure. For this thing I besought the Lord thrice, that it might depart from me. And he said unto me, My grace is sufficient for thee: for my strength is made perfect in weakness. Most gladly therefore will I rather glory in my infirmities, that the power of Christ may rest upon me. Therefore I take pleasure in infirmities, in reproaches, in necessities, in persecutions, in distresses for Christ’s sake: for when I am weak, then am I strong. (2 Corinthians 12:7-10)

Another reason for God to bring disease is to punish a person for his sin. The malady is thought to flow from the actions of the natural laws set in place by God.

For he that eateth and drinketh unworthily, eateth and drinketh damnation to himself, not discerning the Lord’s body. **For this cause many are weak and sickly among you, and many sleep.** (1 Corinthians 11:29-30)

And likewise also the men, leaving the natural use of the woman, burned in their lust one toward another; men with men working that which is unseemly, and **receiving in themselves that recompence of their error which was meet.** (Romans 1:27)

Be not deceived; God is not mocked: **for whatsoever a man soweth, that shall he also reap. For he that soweth to his flesh shall of the flesh reap corruption;** but he that soweth to the Spirit shall of the Spirit reap life everlasting. Galatians 6:7-8

All elect Christians are the spiritual seed of Jesus Christ. Galatians 3:16, 29. Nonetheless, if we transgress his commandments, he will correct us. One of the means of correction is through disease. But his correction of us does not affect the eternal promise of salvation.

Also I will make him my firstborn, higher than the kings of the earth. My mercy will I keep for him for evermore, and my covenant shall stand fast with him. **His seed also will I make to endure for ever, and his throne as the days of heaven. If his children forsake my law, and walk not in my judgments; If they break my statutes, and keep not my commandments; Then will I visit their transgression with the rod, and their iniquity with stripes.** Nevertheless my lovingkindness will I not utterly take from him, nor suffer my faithfulness to fail. My covenant will I not break, nor alter the thing that is gone out of my lips. (Psalms 89:27-34)

But if we make the Lord our refuge and fortress, he will deliver us from disease. We are not to fear the pestilence by night.

I will say of the LORD, He is my refuge and my fortress: my God; in him will I trust. **Surely he shall deliver thee from the snare of the fowler, and from the noisome pestilence.** He shall cover thee with his feathers, and under his wings shalt thou trust: his truth shall be thy shield and buckler. Thou shalt not be afraid for the terror by night; nor for the arrow that flieth by day; **Nor for the pestilence that walketh in darkness;** nor for the destruction that wasteth at noonday. (Psalms 91:2-6)

If we keep his commandments and take refuge in the Lord, no evil plague of disease will come near us.

Because thou hast made the LORD, which is my refuge, even the most High, thy habitation; **There shall no evil befall thee, neither shall any plague come nigh thy dwelling.** For he shall give his angels charge over thee, to keep thee in all thy ways. (Psalms 91:9-11)

To take a vaccine is to eschew the promises of God and put trust in man. Vaccination implicitly encourages sin by promising that there will be no consequential disease. People are

beguiled by the devil's promise of immunity from future diseases. But the disease comes anyway because Vaccines come with a promise that cannot be delivered. Often the disease comes from the vaccine itself. Vaccination is a sin. Those suffering from vaccine-induced disease should repent, humble themselves before God, and call on his mercy.

Massey calls vaccination a diabolical practice that promotes vice and immorality by giving people the false hope of sin without consequences by assuring them that through injection with an antigen, they will be protected from future illness. Rather than live a clean and moral life, they can now throw caution to the wind and live it up since they are immune from the consequences of their sin.

Remembering then our text, I shall not scruple to call that a diabolical operation, which usurps an authority founded neither in the laws of nature or religion, which tends in this case to anticipate and banish providence out of the world, and promotes the increase of vice and immorality.⁵⁶

With that in mind, it is clear that we should not purposely cause disease through vaccination. Disease is an evil that is under the control of God, and for man to usurp that power is a sin. It is a sin to do what is solely in the province of God. It is a sin to cause disease. Disease brings death, and making someone ill that could lead to his death is a violation of the commandment of God. "Thou shalt not kill." Exodus 20:13.

Sincere Christian beliefs are founded on the Holy Bible. The Bible says: "For the life of the flesh is in the blood..." Leviticus 17:11, and "... the life of all flesh; the blood of it is for the life thereof." Leviticus 17:14. Therefore, in order to preserve the life of one's flesh, one must keep one's blood unpolluted from foreign proteins, antigens, adjuvants, and other pollutants typically found in vaccines.

Eustace Mullins reveals in his book, *Murder by Injection*, that Dr. W. B. Clarke wrote that "Cancer was practically unknown until compulsory vaccination with cowpox vaccine began to be introduced. I have had to deal with a least two hundred cases of cancer, and I never saw a case of cancer in an unvaccinated person."⁵⁷ In a speech elaborating on Dr. Clarke's statement Mullins stated:

Other doctors have said the same thing, that vaccination is really a time bomb within the human system that can go off five years, ten years, 40 years after you have the vaccinatin you could have the time bomb go off, you could have a stroke, a heart attack because it's always there in your system, you never get rid of it. And, apparently, it's always an alien force in your physique.⁵⁸

The process of death begins with poisoning through vaccination. For example, the explosion

in deadly cancers is primarily caused by vaccination. All one needs to hear is that he has been diagnosed with cancer to understand that death is near. With some cancers, the death rate is 90%.⁵⁹ The barbarous practices of surgery, chemotherapy, and radiation offer little succor other than the hope of delaying the fast-approaching date of death. Certainly, there are persons who have “beat cancer,” but there is a significant plurality who succumb to the disease. Dr. Dennis Turnbull, who had studied cancer for 30 years declared: "I have no hesitation in stating that in my judgement the most frequent disposing condition for cancerous development is infused into the blood by vaccination and re-vaccination."⁶⁰ Dr. Forbes Laurie, late Medical Director of the Metropolitan Cancer Hospital (London), said: "I am thoroughly convinced that the increase of cancer is due to vaccination."⁶¹ Dr. Robert Bell, the famous cancer specialist of the British Cancer Hospital, stated: "The chief, if not the sole cause of the monstrous increase in cancer has been vaccination."⁶²

Dr. Herbert Snow, Surgeon of the London Cancer Hospital, had this to say: "I am convinced that some 80 per cent of these cancer deaths are caused by the inoculations or vaccinations they have undergone. These are well-known to cause grave and permanent disease of the heart also."⁶³ Regarding the heart, in the book, *Murder by Injection*, Eustace Mullins reveals that Dr. Snow stated: "In recent years many men and women in the prime of life have dropped dead suddenly, often after attending a feast or a banquet. I am convinced that some eighty per cent of these deaths are caused by the inoculation or vaccination they have undergone. They are well known to cause grave and permanent disease to the heart."⁶⁴

If some in the medical community know vaccinations cause grave and permanent disease to the heart, why does the public not rise up against vaccination? Dr. Snow explained that the public is kept ignorant of the dangers because “[t]he coroner always hushes it up as 'natural causes.'”⁶⁵ The medical community has a cult of secrecy regarding the causal link between vaccination and deadly diseases.

It seems that Dr. Snow’s 80% vaccine causal rate for heart disease and cancer might be an understatement. A recent study points the needle of causation closer to 100%. That study compared the health of a group of 1,482 unvaccinated persons to the national statistics on the health of vaccinated persons.⁶⁶ The study revealed that 48% of the vaccinated adults had some form of heart disease, compared to zero percent (0%) of the unvaccinated adults.⁶⁷ Six percent (6%) of the vaccinated adults had cancer compared to zero percent (0%) of the unvaccinated adults.⁶⁸ That study is not widely publicized, and most do not know about it. The secrecy cult in the medical establishment will ensure that it stays that way. In his book, *Cancer and Vaccination*, Esculapius says:

No candid and scientific inquirer who has read the works of such authorities as Doctors Creighton, Crookshank and Scott Tebb, can be surprised that an alarming increase in cancer is now evident. Those who adopt the brutal practice of calf-lymph vaccination are but too surely sowing the wind which they must inevitably reap as the whirlwind, a whirlwind of corruption, disease and national

deterioration. Where the so-called, human lymph is employed, syphilis, leprosy and tuberculosis follow in its train; and wherever calf-lymph is used, tuberculosis and cancer spread like a conflagration.⁶⁹

Sir Thomas Paget (M.D.), tells us that "the progress of vaccine infection in the blood shows us that a permanent morbid condition is established; in the tissues themselves, it is also established by this specific poison."⁷⁰ Dr. Benchetrit states that serums and vaccines "are principally responsible for the increase of those two really dangerous diseases, cancer and heart disease."⁷¹ Dr. F. P. Millard, prominent Osteopath of Toronto and President of the National League for Prevention of Spinal Curvature says: "Abolish vaccination, and you will cut the cancer death-rate in half."⁷²

Cancer is just one of the many diseases spread by vaccination. Eleanor McBean states that "[w]herever an honest survey is made after a vaccination campaign it is noticed that there is always a marked increase in disease."⁷³ Thomas Morgan, in his *Medical Delusions* reports a survey that was made of the city of Youngstown, Ohio, after a general vaccination order of school children. "It was found that nearly all the cases of scarlet fever, measles and diphtheria had been recently vaccinated. What is true of this city is true everywhere, and any close observer can satisfy himself in this direction."⁷⁴ In or about 1955, Eleanor McBean took up Morgan's challenge and checked the Los Angeles Health Index for 1954. She found that the total number of cases of 48 diseases recorded in the index, including but not limited to chickenpox, scarlet fever, measles, mumps, and syphilis, more than doubled after the annual June 1954 vaccine campaign.⁷⁵ Dr. Peebles, (world renowned researcher and authority on vaccination) stated in his book on Compulsory Vaccination:

We shall never stamp out smallpox, cancer, consumption, or leprosy, so long as we continue to STAMP THEM IN through the idiotic and vicious practice of vaccination. The Germans endeavored to stamp out syphilis by stamping it in with syphilized vaccine. They have abandoned that practice now and in time they will abandon vaccination altogether.⁷⁶ (emphasis in original)

A 2018 human research study of the efficacy and safety of influenza vaccines "did not observe that influenza vaccination significantly reduced overall hazard of influenza."⁷⁷ In addition, the study found that the hazard of acute respiratory illness (ARI) caused by non-influenza respiratory pathogens was higher in vaccinated individuals compared to unvaccinated individuals.⁷⁸

A 2013 animal research study found that the influenza vaccine caused vaccine-associated enhanced respiratory disease (VAERD), wherein the animals ended up with enhanced influenza (pH1N1) infection.⁷⁹ "Vaccinating pigs with whole inactivated H1N2 (human-like) virus vaccine (WIV-H1N2) resulted in enhanced pneumonia and disease after pH1N1 infection."⁸⁰

Causing disease in someone violates the great commandment that "as ye would that men should do to you, do ye also to them likewise." Luke 6:31. Massey explains:

The Holy Scriptures give us frequent instances of God's giving power unto men to heal diseases; and by his blessing a power is still continued. But that one was ever granted to inflict diseases, will I think hardly appear; unless in the case of Moses with the Egyptians, and Elisha with his servant Gehazi. But both these cases were miraculous, and of God's own immediate appointment, to vindicate the honour of his servants the prophets, and for the punishment of sacrilege and idolatry, and cannot be drawn into precedent by any not invested with the same character and authority. Men may, and have invented wracks and tortures for each other, but no man, let his Crimes be what they will, was ever yet condemned to an immediate sickness, or sentenced to lie languishing in a fever, for want of a sufficient authority, which no body but a present set of adventurous practitioners have of late pretended to assume.⁸¹

It is a sin for man to kill another man. Matthew 19:18. But it is not a sin for God to kill a man. In like manner, it is a sin for a man to bring about disease in another through vaccination, but it is not sin for God to bring about disease in another.

See now that I, even I, am he, and there is no god with me: **I kill, and I make alive; I wound, and I heal:** neither is there any that can deliver out of my hand. Deuteronomy 32:39.

Indeed, God sent disease among the Egyptians and killed the firstborn of each Egyptian household.

He [God] made a way to his anger; he spared not their soul from death, but gave their life over to the **pestilence**; And **smote all the firstborn in Egypt**; the chief of their strength in the tabernacles of Ham. (Psalms 78:50-51)

Massey explains that disease is within the sovereign authority of God. It is not for man to usurp that authority and inject antigens to cause disease through vaccination in the hope that later the person will develop an immunity to the pathogen.

It will easily be granted, therefore, that such a procedure, for want of a competent authority, is unlawful. That if diseases, as beforementioned, are sent unto us for the trial of our faith, or the punishment of our sins; He alone to whom our faith must approve itself, and our sins are manifest, has properly the power of inflicting them.⁸²

God is sovereign. "All things were made by him; and without him was not any thing made

that was made.” John 1:3 “And he is before all things, and by him all things consist.” (Colossians 1:17) Indeed, God knows the end from the beginning.

According as he hath chosen us in him before the foundation of the world, that we should be holy and without blame before him in love: Having predestinated us unto the adoption of children by Jesus Christ to himself, according to the good pleasure of his will. (Ephesians 1:4-5)

Indeed, God can use evil for good ends. But don't get it twisted. What is permissible for God is not permissible for man. God is omnipotent; he knows the end from the beginning. Man is not omnipotent; man has no way of being sure that a good end will result from his evil means. While with God, good ends justify evil means, with man, good ends can never justify evil means. Man cannot commit the evil sin of injecting a vaccine containing harmful antigens, toxic adjuvants, and noxious contaminants to infect a person with a disease to accomplish the supposed good end of creating a theoretical future immunity from that disease. Indeed, the death and disease from vaccines testify to the error of man working to have the ends justify the means.

God's crucifixion of Jesus Christ illustrates how, with God, the ends justify the means. God used evil means for good ends. The crucifixion of Jesus Christ was a torturous death, but God used that evil for good; it is the means through which Jesus Christ atoned for the sins of his elect. And it was all orchestrated by God.

Judas betrayed Jesus as prophesied by God hundreds of years earlier. Jesus stated, while praying to God the Father: “While I was with them in the world, I kept them in thy name: those that thou gavest me I have kept, and **none of them is lost, but the son of perdition; that the scripture might be fulfilled.**” (John 17:12)

The betrayal of Jesus by Judas was planned by God. In Jeremiah we read a prophecy written approximately 600 years before the betrayal of Jesus by Judas: “Yea, mine own familiar friend, in whom I trusted, which did eat of my bread, hath lifted up his heel against me.” (Psalms 41:9 AV) Jesus, referring to the prophecy in Jeremiah, told the apostles: “I speak not of you all: I know whom I have chosen: but that the scripture may be fulfilled, He that eateth bread with me hath lifted up his heel against me.” (John 13:18)

Jesus knew Judas would betray him: “For he knew who should betray him; therefore said he, Ye are not all clean.” (John 13:11) Judas had no more a free will in the matter than a pencil has a free will to write. Judas, like the pencil, was an instrument completely under God's control.

God did not leave our salvation to the chance that Judas might not betray Jesus. God is love. 1 John 4:8. It would be the very antithesis of love to leave our salvation to chance. God is not a gambler.

Judas was preordained by God to betray Jesus. Judas had no choice in the matter. God predicted what Judas would do hundreds of years before he did it and then predicted it to his apostles moments before it happened. Jesus then personally gave Judas orders to hurry up and betray him. Judas could not resist the will of God.

Jesus answered, He it is, to whom I shall give a sop, when I have dipped it. And when he had dipped the sop, he gave *it* to Judas Iscariot, the son of Simon. And after the sop Satan entered into him. Then said Jesus unto him, That thou doest, do quickly. (John 13:26-27)

Not only did Judas not have a free will to choose whether to betray Jesus, but every single act of Herod, Pontius Pilate, the Jews, and the Romans was preordained and orchestrated by the sovereign God of Heaven. "For of a truth against thy holy child Jesus, whom thou hast anointed, both Herod, and Pontius Pilate, with the Gentiles, and the people of Israel, were gathered together, **For to do whatsoever thy hand and thy counsel determined before to be done.**" (Acts 4:27-28) In fact, God orders the steps of all men and controls their very tongue. "The preparations of the heart in man, and the answer of the tongue are from the Lord." Prov. 16:1.

While God may do evil so that good may come of it, man may not do that same thing. Man cannot do evil (cause disease) in order that some good may come of it. That is the theory of vaccination. The ends cannot justify the means. We are forbidden to do evil in order to obtain some good end. Bad means corrupt the intended good. "And not rather, (as we be slanderously reported, and as some affirm that we say,) Let us do evil, that good may come? whose damnation is just." (Romans 3:8) Indeed, "whatsoever is not of faith is sin." (Romans 14:23)

A person is injected with a pathogen on the theory that the recipient's body will become immune to the disease. Even if that theory were correct, it would be a sin to inject a person with an antigen to cause an immune response. That is to "do evil that good may come." That is a sin. See Romans 14:23. But the good that is expected is a phantom; the medical theory of vaccination is fallacious. Job explains: "But ye are forgers of lies, ye are all physicians of no value." (Job 13:4)

The gospel message is that those who have saving faith and are thus justified will live by that faith. Their faith is a living faith, not a dead faith. "For therein is the righteousness of God revealed from faith to faith: as it is written, The just shall live by faith." Romans 1:17. See also Galatians 3:11. Indeed, God has a warning for those who purport to believe but who do not live by faith. "Now the just shall live by faith: but if any man draw back, my soul shall have no pleasure in him." (Hebrews 10:38) "Not every one that saith unto me, Lord, Lord, shall enter into the kingdom of heaven; but he that doeth the will of my Father which is in heaven." (Matthew 7:21) Faith brings obedience. It is special obedience wrought by God through faith that God imparts in the believer. "But now is made manifest, and by the scriptures of the prophets, according to the commandment of the everlasting God, made known to all nations for the obedience of faith." (Romans 16:26) We are called on to have nothing to do with evil. We are to avoid even the appearance of evil. We are

to “abstain from all appearance of evil.” 1 Thessalonians 5:22. Indeed, we are to reprove evil. “And have no fellowship with the unfruitful works of darkness, but rather reprove them.” (Ephesians 5:11) Vaccination is an unfruitful work of darkness forged by lies. Christians are duty-bound to reprove the evil practice.

The Mythical Safety and Efficacy of Vaccines

Vaccines are largely ineffective and unsafe. Indeed, it is an established medical fact that the COVID-19 vaccines not only do not prevent illness, they cause illness. Please be mindful that the COVID-19 vaccines were authorized because they **purportedly prevented infection and the spread of the disease**. **Dr. Hilary Marston of the National Institute of Allergy and Infectious Disease at the NIH**, gave a presentation during an October 22, 2020 meeting of the Vaccines and Related Biological Products Advisory Committee.⁸³ That meeting was before the issuance of the EUAs for the COVID-19 vaccines. During her presentation, she explained that the primary endpoint for all COVID-19 vaccine studies was to prevent COVID-19. Below is one of her slides where it states: **“Primary Endpoint: Prevention of symptomatic COVID-19 disease (PCR confirmed).”**⁸⁴

Dr. Peter McCullough, M.D., gave an informative presentation at the 2022 United Healthcare Summit.⁸⁵ Dr. McCullough is an American cardiologist. He was vice chief of internal medicine at Baylor University Medical Center and a professor at Texas A&M University. He is editor-in-chief of the journals *Reviews in Cardiovascular Medicine* and *Cardiorenal Medicine*. He is one of the most highly respected and published cardiologists in the U.S.

He was once one of the most published and cited authors in the medical community. Since he has come out explaining the dangers of the COVID-19 vaccines, Baylor and Texas A&M have cut ties with him. [He has had his research revealing the dangers of the COVID-19 vaccines suddenly unpublished and deleted.](#)

During his presentation, Dr. McCullough mentioned the sweeping research by the World Council For Health (WCH). I decided to check his claims about the WCH research findings. I discovered that he was correct. My research took me beyond the WCH findings. It includes some surprising facts and evidence, which will be shocking to some, about the COVID-19 vaccines.

The World Council For Health (WCH) extensively studied the world databases on the COVID-19 vaccine injuries. The WCH for health studied the WHO VigiAccess, CDC VAERS, EudraVigilance, and UK Yellow Card Scheme to determine whether the COVID-19 vaccines are safe.⁸⁶ On June 11, 2022, the WCH announced its results. The WCH found that the databases revealed more than 40,000 deaths linked to the COVID-19 vaccines and called for an immediate recall of those vaccines.⁸⁷

Those reported deaths are just the tip of the proverbial iceberg. Dr. Katrina Lindley explains the deficiency in the reports:

[S]uch systems of passive surveillance result in significantly fewer ADR [adverse drug reaction] reports than active surveillance reporting. As a result, the actual number of adverse events that occurred in temporal relation to Covid-19 injections is likely to be much higher than revealed by the available official data.⁸⁸

The under-reporting in the databases is quite significant. Indeed, it is exponential. For example, because the VAERS database relies on passive reporting, it suffers from a systemic flaw known to HHS. That flaw is that the VAERS database under-reports the vaccine adverse events by a factor of 100. A Harvard study of the VAERS database that HHS commissioned revealed that “fewer than 1% of vaccine adverse events are reported.”⁸⁹ That statistical finding in the Harvard study has been confirmed to be accurate in a subsequent scientific study.⁹⁰

The adverse events listed in VAERS have not been clinically proven to have been caused by the listed vaccine. But we can reasonably infer that those who died within 48 hours of the onset of illness after the vaccination died from the vaccine. Megan Redshaw determined that 41% of those reported in VAERS as having died from a COVID-19 vaccine did so after becoming ill within 48 hours of the injection.⁹¹ We will consider that temporal proximity as establishing a reasonable belief that the COVID-19 vaccines were the cause of the deaths.

VAERS reported that of July 15, 2022, there were 29,635 deaths attributed to COVID-19. 41% of 29,635 is 12,150. Thus, one can reasonably conclude there is probable cause to believe that 12,150 persons died from the COVID-19 vaccine. Understanding that the VAERS system only reports 1% of the actual deaths, we find that the deaths from the COVID-19 vaccines are 1,215,000 people as of July 15, 2022.

Similar numbers were arrived at by other researchers. VAERS is a database that reports adverse events associated with vaccines. The appearance of an adverse event in the database does not prove that the vaccine caused the adverse event. Because the VAERS database reports correlation and does not prove causation, we are left to extrapolate causation from the numbers reported in the VAERS database. Researchers led by Dr. Scott McLachlan, Ph.D., determined that the vaccine caused 86% of deaths reported in VAERS.⁹² Dr. Jessica Rose, Ph.D., and her team of researchers studied the U.S. VAERS database and determined that VAERS underreported adverse events, including deaths, from the COVID-19 vaccines by a factor of 41. That means the actual adverse events, including deaths, associated with the COVID-19 vaccines are 41 times greater than reported in the VAERS system.⁹³

Dr. Rose is a Canadian researcher with a Bachelor Degree in Applied Mathematics and a Master's degree in Immunology from Memorial University of Newfoundland. She also holds a Ph.D. in Computational Biology from Bar Ilan University and two Post Doctoral degrees: one in Molecular Biology from the Hebrew University of Jerusalem and one in Biochemistry from the Technion Institute of Technology.

Assuming the VAERS system underreports adverse events by 41-fold, and the COVID-19 vaccine caused 86% of the deaths reported in VAERS, we can determine the actual number of deaths caused by the COVID-19 vaccines.⁹⁴ As of September 23, 2022, the VAERS database reported that 31,214 persons died after being vaccinated with a COVID-19 vaccine. Although the U.S. Government keeps the VAERS database, it also includes deaths from COVID-19 vaccinations in other countries. Approximately 50% of the deaths reported in VAERS are from other countries. That means approximately 15,000 persons died in the U.S. alone from COVID-19 vaccines.

We will start with the 15,000 U.S. figure. Multiplying that figure by 41 we arrive at 615,000. But only 86% of that number can be said to have died from the vaccine. Multiplying 615,000 by .86, we arrive at a final figure of 528,900 as the number of persons who died from the COVID-19 vaccines in the U.S. as of September 23, 2022. If we apply that formula to the total of U.S. and overseas reported deaths in VAERS, we arrive at a figure of 1.1 million deaths caused by the COVID-19 vaccines as of September 23, 2022.

President Biden's claim that "[t]he vaccines are safe, highly effective,"⁹⁵ is provably false. The CDC and the vaccine manufacturers are on record admitting that the COVID-19 vaccines do not prevent the spread of COVID-19. Indeed, before the EUA authorization by the FDA of the Pfizer-BioNtech vaccine, the Daily Mail reported that on or before December 4, 2020, "Pfizer CEO [Albert Bourla] admits he is 'not certain' their COVID-19 shot will prevent vaccinated people from spreading the virus."⁹⁶

Moderna Chief Medical Officer Tal Zaks is on record saying that the Moderna vaccine can prevent someone from getting sick from COVID-19 but that there is no evidence that it can prevent someone receiving the vaccine from carrying the virus and infecting others. Before the FDA issuance of the EUA for the Moderna vaccine, on or before November 23, 2020, Zaks stated: "our results show that this vaccine can prevent you from being sick, it can prevent you from being severely sick. They do not show that it prevents you from potentially carrying this virus transiently and infecting others."⁹⁷

There are many anecdotal examples of fully vaccinated persons being subsequently infected with COVID-19. For example, it was reported by COVID Legal USA on March 12, 2021, that there was a COVID-19 infection outbreak at the Cottonwoods Care Centre retirement facility in Kelowna, British Columbia, even though 82% of the residents were fully vaccinated. Eight out of the twelve COVID-19 confirmed cases were fully vaccinated persons.⁹⁸ That means that 66% of confirmed COVID-19 cases were from those who were fully vaccinated.

Because it became clear early on that the COVID-19 vaccines did not prevent the spread of COVID-19, the CDC found it necessary to issue a press release on March 8, 2021, saying that fully vaccinated Americans must "continue to take these COVID-19 precautions when in public."⁹⁹ That included wearing masks, staying six feet apart from other people, and avoiding large crowds.

Indeed, the COVID-19 infection rate for vaccinated persons has gotten so out of hand that

on July 27, 2021, the CDC had to change its guidance because of the alleged spreading of COVID-19 by vaccinated persons. NBC News reported:

The Centers for Disease Control and Prevention issued new guidance on Tuesday recommending indoor mask use in areas with high transmission rates after new data suggested fully **vaccinated individuals are not just contracting Covid-19 but could potentially infect others.**

CDC Director Rochelle Walensky said recent studies had shown that those **vaccinated individuals who do become infected with Covid have just as much viral load as the unvaccinated, making it possible for them to spread the virus to others.** Based on that finding, Walensky said the CDC is also recommending that all school children wear masks in the fall.¹⁰⁰ (emphasis added)

Emily Kopp, writing for Roll Call, reported that a confidential congressional briefing revealed that “[t]here are 35,000 symptomatic breakthrough cases each weeks.” Kopp concluded that vaccinated persons can be “superspreaders” of COVID-19.

The newly released report showing that vaccinated people can still be superspreaders drove the recent decision by the CDC to once again recommend masks for vaccinated people indoors where case counts are high or substantial.¹⁰¹

On August 6, 2021, the CDC published a report that 346 out of out of 469 COVID-19 cases (74%) in a breakout in Barnstable County, Massachusetts, were of people who were fully vaccinated.¹⁰² The COVID-19 vaccines are proving to be ineffective in preventing infection.

Dr. Nina Pierpont (MD, Ph.D.), has a BA in biology from Yale University, MA and Ph.D. in population biology/evolutionary biology/ecology from Princeton University, and MD from Johns Hopkins University School of Medicine. Dr. Pierpont has been a Clinical Assistant Professor of Pediatrics at Columbia University’s College of Physicians & Surgeons. She is currently in private practice in upstate New York, specializing in behavioral medicine. Dr. Pierpont reviewed the available data, principally from three scientific studies, and concluded that COVID-19 vaccine mandates have no justification because “current vaccines do not prevent transmission of SARS-CoV-2.”¹⁰³

Pfizer CEO Albert Bourla, in his attempt to sell the public on their COVID-19 vaccine booster during a news interview, let the cat out of the bag by stating: “We know that two doses of the vaccine offers very limited protection if any.”¹⁰⁴ When Pfizer realized the implications of that admission, it immediately filed a copyright claim on that interview and took steps to purge it from the internet. I was able to track down the video of the interview at the Instagram link found in the

endnote.¹⁰⁵

99% of the University of California football team and staff were fully vaccinated.¹⁰⁶ There are approximately 143 players and staff on that team.¹⁰⁷ But on November 13, 2021, it was announced that the team had to cancel its upcoming football game with USC because 47 players and staff members on the University of California football team had tested positive for COVID-19. Many of them were symptomatic for COVID-19, which is why the entire team was tested. That is a 33% COVID-19 infection rate for a single group of fully vaccinated persons. The COVID-19 vaccines are not just ineffective; it seems that the vaccines are driving the infection. It is more likely that the players and coaches are suffering from antibody-dependent enhancement caused by the vaccine.

Indeed, COVID-19 vaccinations are detrimental to the USA's counter-drug mission. For example, on December 25, 2021, Carol Rosenberg and Aishvarya Kavi reported for *The New York Times* that the USS Milwaukee was supposed to deploy to intercept drug traffickers in the Caribbean, but the ship could not do so because of a Covid-19 outbreak onboard the ship.¹⁰⁸ The 105-man crew of the vessel was 100% vaccinated against COVID-19. That is a clear example that the COVID-19 vaccines are ineffective in preventing COVID-19. What was really going on aboard the ship likely was that the sailors were suffering from antibody-dependent enhancement (ADE) caused by the vaccines themselves. The vaccines were making the sailors sick. Oddly, the USS Milwaukee incident comes on the heels of active-duty troops in the Army and Navy being fired because they refused to get vaccinated under President Biden's vaccination mandate for the armed services. Perfectly healthy soldiers and sailors were relieved of duty for exercising their rights to refuse to take experimental vaccines that have now been demonstrated to be both unsafe and ineffective. All the while, the readiness of the armed services is being detrimentally impacted by the growing occurrence of ADE among the soldiers and sailors caused by the mandated vaccines.

On November 10, 2021, U.S. District Court Judge T. Kent Wetherell, II, issued an opinion wherein he denied a request from a plaintiff for a preliminary injunction. He ruled against the doctor requesting a religious exemption. Nonetheless, in the course of rendering his opinion, the judge ruled:

[T]he evidence I have shows the vaccine is “leaky” and “nonsterilizing” in that **it does not prevent transmission of the virus, nor does it protect vaccinated persons from contracting the virus.** ... [T]he evidence before the court from plaintiff's medical experts suggest **that vaccinated persons actually transmit the virus at a higher rate than unvaccinated.** ... [T]he vaccines are unnecessary for persons who have previously had COVID because **natural immunity provides equivalent or greater protection against severe infection than the vaccines.** ... [T]he irrefutable evidence in this case shows that vaccines simply do not accomplish the purpose of the policy that it's aimed at achieving; that is, “keeping everyone safer,” because, again, **they do not protect people from**

contracting the virus, nor do they prevent people from getting the virus.¹⁰⁹ (emphasis added)

So prevalent were the breakthrough cases of COVID-19 that the CDC announced that beginning on May 1, 2021, it would no longer monitor or report any breakthrough cases that did not result in hospitalization or death.¹¹⁰ The CDC and its pharmaceutical overlords could not allow people to use official government statistics to prove that the COVID-19 vaccines are ineffective.

U.S. Senator for Massachusetts, Edward Markey, saw through the CDC's subterfuge. In an official letter of inquiry he demanded to know why the CDC would no longer continue to monitor the breakthrough cases.¹¹¹ Senator Markey noted the obvious fact that breakthrough cases are a good measure of COVID-19 vaccine effectiveness. He said that 43.4 of the new COVID-19 infections in Massachusetts were among those who were vaccinated. Notably, Senator Markey asked the CDC: "Is the effectiveness of COVID-19 vaccines decreasing in light of these breakthrough cases?" The answer is clear. Indeed, the evident affirmative answer to that question is why the CDC decided to stop reporting breakthrough COVID-19 cases. The CDC's decision not to report COVID-19 breakthrough cases among the vaccinated population was indicative of a conspiracy between it and the pharmaceutical companies to coverup of the ineffectiveness of the COVID-19 vaccines.

The United Kingdom Office for National Statistics (ONS), has published data on deaths by vaccination status.¹¹² The ONS data started from the beginning of April 2022 through the end of May 2022. Between April 1, 2022, and May 31, 2022, 4,647 of the 4,935 total deaths from COVID-19 during that period were among the vaccinated population. That means that 94% of the COVID-19 deaths in the UK during April and May 2022 were among those vaccinated against COVID-19. The statistics revealed another shocking detail. It seems that the more shots, the more deadly the vaccines are. Those who received three COVID-19 shots accounted for 4,215 of the 4,647 total deaths among the vaccinated population. That means that those that received three COVID-19 shots accounted for 90% of the vaccinated COVID-19 deaths during April and May 2022.

The State of Vermont has had a very similar experience to that of England. The Vermont Daily Chronicle reported that 76% of COVID-19 deaths in the State of Vermont during September 2021 were of persons who had received COVID-19 vaccinations.¹¹³ Yet, the State of Vermont Department of Public Health claims that "[v]accines are the best tool we have to protect ourselves against COVID-19, especially from severe illness, hospitalization and death."¹¹⁴

In Antwerp, Belgium, 100% of the hospitalized "COVID cases" are fully vaccinated persons. The Hall Turn Radio Show reported that "CEOs and medical directors of Antwerp hospitals met this week and the mood was worrying. They're having another COVID outbreak, but this time, ALL the patients . . . are fully vaccinated."¹¹⁵

Data from the government health authorities in Scotland showed that the fully COVID-19 vaccinated accounted for 89% of COVID-19 deaths, whilst also accounting for 77% of COVID-19 hospitalizations, and 65% of alleged COVID-19 cases from October 9 through November 5, 2021.¹¹⁶

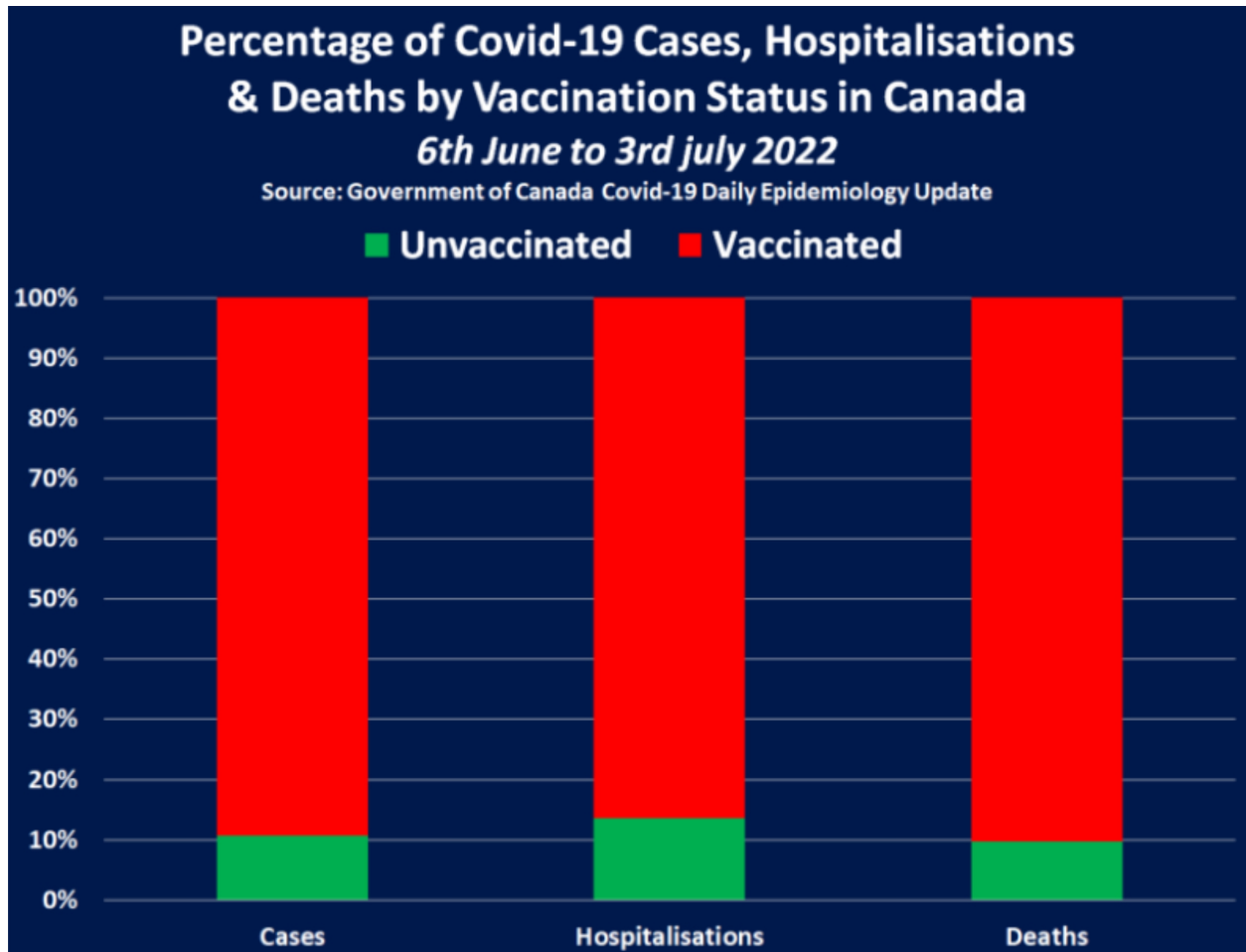
According to the data from Public Health Scotland, for December 18, 2021, to January 14, 2022, the COVID-19 case rate was 2.5 times greater for those who received two COVID-19 vaccinations than those who were unvaccinated.¹¹⁷ Over that same period, there was a 5% greater hospitalization rate for those who had received two COVID-19 vaccines than those who were unvaccinated.¹¹⁸ From December 11, 2021, to January 7, 2022, there was a 55% greater mortality rate from COVID-19 for those who received two doses of the COVID-19 vaccine compared to those who were unvaccinated.¹¹⁹

The Expose news site reported on the government statistics from Canada¹²⁰ showing that the vaccinated population of Canada account for 89% of all COVID-19 cases, 86% of all COVID-19 hospitalizations, and 90% of all COVID-19 deaths.

COVID-19 Cases in Canada: Between June 6, 2022 and July 3, 2022 in Canada, “the unvaccinated population accounted for just 11% of Covid-19 cases ... whilst **the vaccinated population accounted for 89%**, 74% of which were among the triple and quadruple jabbed.”¹²¹

COVID-19 Hospitalizations in Canada: Between June 6, 2022 and July 3, 2022 in Canada, “the unvaccinated population accounted for just 14% of Covid-19 hospitalisations ... month, whilst **the vaccinated population accounted for 86%**, 75% of which were among the triple and quadruple jabbed.”¹²²

COVID-19 Deaths in Canada: Between June 6, 2022 and July 3, 2022 in Canada, “the unvaccinated population accounted for just 10% of Covid-19 deaths ... whilst **the vaccinated population accounted for 90%**, 87% of which were among the triple and quadruple jabbed.”¹²³



That manifest danger from the COVID-19 vaccines is in the face of evidence that the COVID-19 vaccines are ineffective. There is study,¹²⁴ after study,¹²⁵ after study,¹²⁶ after study¹²⁷ proving that vaccinated individuals can still test positive for COVID-19 and manifest illnesses associated with COVID-19. The United Kingdom Health Security Agency COVID-19 Vaccine Surveillance Report published on October 21, 2021, reveals that “[i]n individuals aged greater than 30, the rate of a positive COVID-19 test is higher in vaccinated individuals compared to unvaccinated.”¹²⁸ The method used by the vaccine makers for reporting the efficacy of the COVID-19 vaccines (relative risk reduction) is to subtract the percentage of infected vaccinated persons from the percentage of infected unvaccinated persons and divide that number by the percentage of infected unvaccinated persons (U-V/U). Using that formula, and applying it to the UK government data, this author calculated that the actual effectiveness of the COVID-19 vaccines in the real world is minus-64%.¹²⁹ That means that a vaccinated person is 64% more likely to catch COVID-19 than an unvaccinated person.¹³⁰ That calculation of minus-64% COVID-19 vaccine efficacy was from the

official reported data of the UK Health Security Agency.¹³¹

In October 2021, the U.S. FDA issued an EUA for a COVID-19 vaccine for children five years and older, and the U.S. CDC recommended that EUA COVID-19 vaccine for those children. On March 8, 2022, Florida State Surgeon General Joseph Ladpapo, M.D., Ph.D., contradicted the U.S. CDC and officially recommended against giving the COVID-19 vaccine to healthy children 5 to 17 years old.¹³² He made that recommendation based on the limited risk that COVID-19 posed to the young compared to the “higher than anticipated severe adverse events occurred among those receiving the COVID-19 vaccine” in clinical trials.¹³³ He revealed the troubling fact that the COVID-19 vaccines have no long-term immunity benefit. They don’t work as advertised. Dr. Ladpapo explained that a “study conducted out of New York determined that COVID-19 vaccine efficacy declined 84%, from 68% to 12%, over a span of two months for children aged 5 to 11.”¹³⁴ He further stated that the “same study determined that COVID-19 vaccine efficacy declined 40%, from 85% to 51%, over a span of two months for adolescents ages 12 to 17.”¹³⁵ Despite that evidence, in June 2022, the FDA authorized a COVID-19 vaccine for children older than six months, and the U.S. CDC recommended that vaccine for those children.¹³⁶

After pushing millions to get vaccinated, the CDC has now implicitly acknowledged that vaccines do not have any beneficial effect on preventing the infection or spread of COVID-19. On September 23, 2022, the CDC guidance was updated to note that **“vaccination status is no longer used to inform source control, screening testing, or post-exposure recommendations.”**¹³⁷

The CDC and the vaccine makers understood from the beginning that the COVID-19 mRNA vaccines were ineffective in protecting persons from COVID-19. As the ineffectiveness of the COVID-19 injections in providing immunity was becoming increasingly clear, the CDC realized that the injections did not meet the definition of a vaccine. Indeed, in a Motion for a Preliminary Injunction against HHS filed on July 19, 2021, the plaintiffs alleged:

[T]he “Pfizer-BioNTech COVID-19 Vaccine” and the “Moderna COVID-19 Vaccine” do not meet the CDC’s own definitions. They do not stimulate the body to produce immunity from a disease. They are a synthetic fragment of nucleic acid embedded in a fat carrier that is introduced into human cells, not for the purpose of inducing immunity from infection with the SARS-CoV-2 virus, and not to block further transmission of the virus, but in order to lessen the symptoms of COVID-19. No published, peer-reviewed studies prove that the “Pfizer-BioNTech COVID-19 Vaccine” and the “Moderna COVID-19 Vaccine” confer immunity or stop transmission.¹³⁸

The lawyers for HHS realized that the plaintiffs were correct. They advised their clients at the HHS component agency, the CDC, that they needed to fix that problem. So many of the laws protecting pharmaceutical companies from liability required that their injections be vaccines. They needed to change the very definition of a vaccine to include an injection that is ineffective in

producing immunity to the disease.

The CDC defines immunity as “[p]rotection from an infectious disease. If you are immune to a disease, you can be exposed to it without becoming infected.”¹³⁹ So far, so good. Up until September 2021, the CDC's definition of “vaccine” was “[a] product that stimulates a person's immune system to produce immunity to a specific disease, protecting the person from that disease.”¹⁴⁰ So it was understood by all before September 2021 that a vaccine “stimulates a person's immune system to produce immunity.” And immunity means “[p]rotection from an infectious disease. If you are immune to a disease, you can be exposed to it without becoming infected.”

But in September 2021, that all changed. The CDC changed the definition of vaccine to mean instead “[a] preparation that is used to stimulate the body's immune response against diseases.”¹⁴¹ Now, the definition of a vaccine includes a vaccine that merely “stimulates the body’s immune response” without actually producing any protection from disease. Now, a vaccine can be ineffective in providing any protection in preventing infection; it only needs to stimulate the body’s immune response regardless of whether that stimulation is effective in protecting against disease.

In an email response to a news inquiry, a spokesman for the CDC stated: “while there have been slight changes in wording over time to the definition of ‘vaccine’ on the CDC’s website, those haven’t impacted the overall definition. ... The previous definition...could be interpreted to mean that vaccines were 100% effective, which has never been the case for any vaccine, so the current definition is more transparent.”¹⁴²

The real reason for the changed definition is that since the mRNA vaccines have been such a spectacular failure, a change in the definition was necessary to account for that failure. For the CDC to claim that changing the meaning of vaccine from “stimulates a person's immune system to produce immunity” to “stimulate the body's immune response against diseases” is only a slight change that does not impact the definition is dissimulation of the first order.

If the new definition was not a change, then why do it? There is a world of difference between producing immunity and simply responding to a disease. Under the new definition, the body’s response could be, and as we have seen with the mRNA vaccines, has been, ineffective in fighting off the disease. Before the definition change, a vaccine was required to offer immunity from the disease; now, all that is needed is for the vaccine to prompt the body’s immune system to respond to the disease. Indeed, the body could respond to the disease with a cytokine storm (a.k.a., antibody-dependent enhancement), which may kill the patient, as we have seen with mRNA COVID-19 vaccines. Now, the ineffectiveness of vaccines is built into the definition.

A vaccinated person is statistically more likely to be infected with CIVID-19 than an unvaccinated person. What is the cause of this statistical phenomenon that a vaccinated person is more likely to catch COVID-19? The UK Health Security Agency data shows that the COVID-19 vaccine efficacy drops at a steady 5% average rate per week.¹⁴³ One would think that fact would only indicate that the vaccine is losing efficacy, ultimately dropping to zero. But that is not the case. The

hard data from the UK government indicates that, in fact, the 5% loss of efficacy actually continues past zero. What that means is that the vaccine increases the likelihood of COVID-19.

The UK Health Security Agency COVID-19 data indicates that the COVID-19 vaccines have not merely lost their efficiency; they damage and suppress the immune system. Over time, a vaccinated person is less able to fight off infection and ends up hospitalized. They test positive for COVID-19 and are labeled a breakthrough COVID case. In fact, they are likely a case of antibody-dependent enhancement (ADE), wherein they are ill not because the vaccine did not work but because the vaccine worked to make them sick.

It is not that the vaccines are ineffective that is the reason for the COVID-19 infections among the vaccinated; the vaccines drive an illness called antibody dependent enhancement (ADE). ADE is being reported as COVID-19 because the patients are testing positive for COVID-19. Renowned virologist and Nobel Prize Laureate Prof. Luc Montagnier explained that the so-called breakthrough COVID-19 infections being suffered by the fully vaccinated persons are infections caused by the COVID-19 vaccines.¹⁴⁴ Dr. Montagnier said that the high rate of COVID-19 infections among the fully vaccinated population is due to antibody-dependent enhancement (ADE).

In an April 30, 2021 report filed with the FDA, Pfizer acknowledged that vaccine-associated enhanced disease (VAED) and vaccine-associated enhanced respiratory disease (VAERD) were listed as “Important Potential Risk[s]” of the COVID-19 vaccines.¹⁴⁵ Pfizer noted that the VAED may go unreported as such because the patient suffering VAED will usually be presented as having “severe or unusual manifestations of COVID-19.”¹⁴⁶ Thus the announced “breakthrough” cases of COVID-19 are likely not COVID-19 cases but are rather cases of VAED, otherwise known by the acronym ADE, caused by the COVID-19 vaccines themselves.

Dr. Robert Malone, M.D., M.S., the inventor of the mRNA technology used by Pfizer-BioNTech and Moderna in their COVID-19 vaccines, states that the COVID-19 vaccines are causing ADE. Dr. Malone indicates that the scientific evidence is becoming increasingly clear that the COVID-19 vaccines are causing the virus to replicate at higher levels than would be the case in the absence of the vaccination.¹⁴⁷ He said that this phenomenon of ADE was predictable because ADE has happened in every coronavirus study ever conducted. He said the data indicates that as the immune response from the COVID-19 vaccines wanes after six months, the ADE is kicking in, and we see the result with increased hospitalizations. The hospitalizations are not from breakthrough infections in those vaccinated but rather from ADE brought on by the vaccine itself. The ADE causes the virus to replicate more efficiently than it would otherwise. Dr. Malone further states that those in the vaccinated population are generating the delta variant of COVID-19 due to the COVID-19 vaccine.

One research study explained:

There are also immunopathological complications associated with the SARS-CoV and MERS-CoV vaccines that require addressing and

further optimization. One adverse effect is the induction of antibody-dependent enhancement (ADE) effect, which is usually caused by vaccine-induced suboptimal antibodies that facilitates viral entry into host cells.¹⁴⁸

A study was conducted by Timothy Cardozo of the Department of Biochemistry and Molecular Pharmacology, NYU Langone Health, New York, and Ronald Veazey of the Division of Comparative Pathology, Department of Pathology and Laboratory Medicine, Tulane University School of Medicine, Tulane National Primate Research Center. The scientists determined in their research that the COVID-19 vaccines caused an increase in the risk of more severe diseases caused through ADE. They concluded that recipients of COVID-19 vaccines should be warned about all the dangers of ADE before being vaccinated. The scientists determined that the COVID-19 vaccines worsen COVID-19 disease via antibody-dependent enhancement (ADE). They were concerned that the dangers are kept secret in clinical trial protocols and consent forms.¹⁴⁹

Many other researchers have determined that the COVID-19 vaccines pose a clear danger of ADE. In another study, the researchers concluded:

Antibody-based drugs and vaccines against severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) are being expedited through preclinical and clinical development. 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).¹⁵⁰

Another researcher pleaded for caution in the administration of the COVID-19 vaccine:

[B]ecause ADE of disease cannot be reliably predicted after either vaccination or treatment with antibodies-regardless of what virus is the causative agent-it will be essential to depend on careful analysis of safety in humans as immune interventions for COVID-19 move forward.¹⁵¹

Sadly, the researcher's warning was not heeded. A massive study involving vaccine data from hundreds of countries proves that the COVID-19 vaccines have caused a significant increase in total cases and deaths associated with COVID-19.¹⁵² The study proves that the COVID-19 vaccines are not only ineffective, but they are driving illness and death. The study showed that the COVID-19 vaccines have caused a whopping 38% more COVID-19 cases and an even more astonishing 31% increase in deaths from COVID-19 in the United States.¹⁵³ But that is only the tip of the iceberg because many patients suffering ADE may not test positive for COVID-19. They still suffer the consequences of the ailments caused by the vaccine-induced ADE.

The American Liberty Report revealed that "more than 18 million people were injured so

badly by their first COVID shot from Pfizer or Moderna that they had to go to the hospital. That's according to the CDC's own internal data, which a court just ordered the federal agency to release to a watchdog group."¹⁵⁴ The CDC started a vaccine monitoring program using a software application called V-safe at the beginning of the COVID-19 vaccine rollout in December of 2020. Ten million people downloaded the V-safe app on their cell phones. Those people then reported adverse events from the COVID-19 vaccines through the V-safe app. The CDC received the data and tracked it for the first 18 months until July 2022. Strangely, the CDC never published the data.

You would think that the data showed that the COVID-19 vaccines were safe, since CDC's main webpage about the mRNA COVID-19 vaccines says, to this day, "COVID-19 vaccines are safe, effective and free."¹⁵⁵ Indeed, that is what the CDC has been saying all along. But that was not true, and the CDC knew it. A court ordered the CDC to release its V-safe data. It showed that there were 800,000 receiving medical care out of 10 million people.¹⁵⁶ That translates to an 8% medical care rate. Approximately 73% of those seeking medical care needed to visit urgent care, the emergency room, or be hospitalized. Extrapolating to the population of 230 million people who received the vaccine in the U.S., we find that 18 million of them received medical care for injuries caused by the COVID-19 vaccines.

Myocarditis

Peter McCullough, M.D., and Dr. Jessica Rose, Ph.D., researched the sudden appearance of myocarditis in young people. Dr. McCullough is a highly-published world-renowned cardiologist, and Dr. Rose is a Canadian researcher with a Bachelor's Degree in Applied Mathematics and a Master's degree in Immunology from Memorial University of Newfoundland. She also holds a Ph.D. in Computational Biology from Bar Ilan University and two Post Doctoral degrees: one in Molecular Biology from the Hebrew University of Jerusalem and one in Biochemistry from the Technion Institute of Technology. Drs. McCullough and Rose determined that the COVID-19 vaccines caused myocarditis. While their study focused on young people, their conclusions also apply to the population as a whole. The McCullough & Rose report revealed the following startling facts.

Within 8 weeks of the public offering of COVID-19 products to the 12-15-year-old age group, **we found 19 times the expected number of myocarditis cases in the vaccination volunteers over background myocarditis rates for this age group.**¹⁵⁷

Their report labeled the myocarditis caused by the vaccines "COVID-19-Injection-Related Myocarditis (CIRM);" the report concluded:

Thus, due to both the problems of under-reporting and the known lag in report processing, this analysis reveals a strong signal from the VAERS data that the risk of suffering CIRM [COVID-19-Injection-Related Myocarditis] – especially males is unacceptably high. Again, children are not a high-risk group for

COVID-19 respiratory illness, and yet they are the high-risk group for CIRM.¹⁵⁸

The McCullough & Rose report caused quite a stir in the medical community. After the preliminary draft of their report was peer-reviewed and approved for publication, it was posted by the publisher on its NIH website. Shortly thereafter, the publisher, Elsevier, without giving a reason, suddenly withdrew the publication. Dr. McCullough is reportedly pursuing legal action against Elsevier for its unlawful actions.

In its guidance dated October 4, 2022, the U.S. CDC recommended COVID-19 vaccines for all persons over six months old.¹⁵⁹ On October 7, 2022, Dr. Ladpapo, M.D., Ph.D., in his capacity as Florida Surgeon General, contradicted the U.S. CDC and announced that the risks of COVID-19 vaccines outweigh the benefits for 18 to 39-year-old males. He came to that conclusion based on a scientific study of the mortality risk of the COVID-19 vaccines. That study “found there is an 84% increase in the relative incidence of cardiac-related death among males 18-39 years old within 28 days following mRNA vaccination.”¹⁶⁰

Sudden Adult Death Syndrome

The ADE suffered by vaccine recipients is causing them to unexpectedly die in large numbers. The sudden deaths of young people in the prime of health cannot be ignored. The prevalence of those deaths is forcing the hand of the media to report on them. But the mass media is trying to conceal the cause of the sudden deaths of thousands of young people by labeling the deaths “sudden adult death syndrome (SADS). It is sometimes also called “sudden arrhythmic death syndrome (SADS). The medical establishment and the media engage in all sorts of conjecture, including blaming the sudden premature deaths on a genetic condition.¹⁶¹ But they do not ever mention the elephant in the room, the COVID-19 vaccines, as a suspected cause for the deaths. Ethan Huff, writing for Natural News, explains:

In an attempt to explain away the rash of deaths occurring in otherwise healthy-seeming adults who got “vaccinated” for the Wuhan coronavirus (COVID-19), the medical establishment has coined a new term called “Sudden Adult Death Syndrome,” or SADS, that it is pretending appeared out of nowhere with no explanation.¹⁶²

Much like Sudden Infant Death Syndrome (SIDS), which was also made up out of thin air to explain away infant deaths caused by vaccines, SADS is being called a “mystery” condition that could strike anyone at any time for no apparent reason.¹⁶³

It is quite strange that the apparent culprits, the COVID-19 vaccines, are not even mentioned in the major media. They report the sudden premature deaths and essentially leave the readers to guess why young people are keeling over dead in the prime of their lives. Ethan Huff explains the

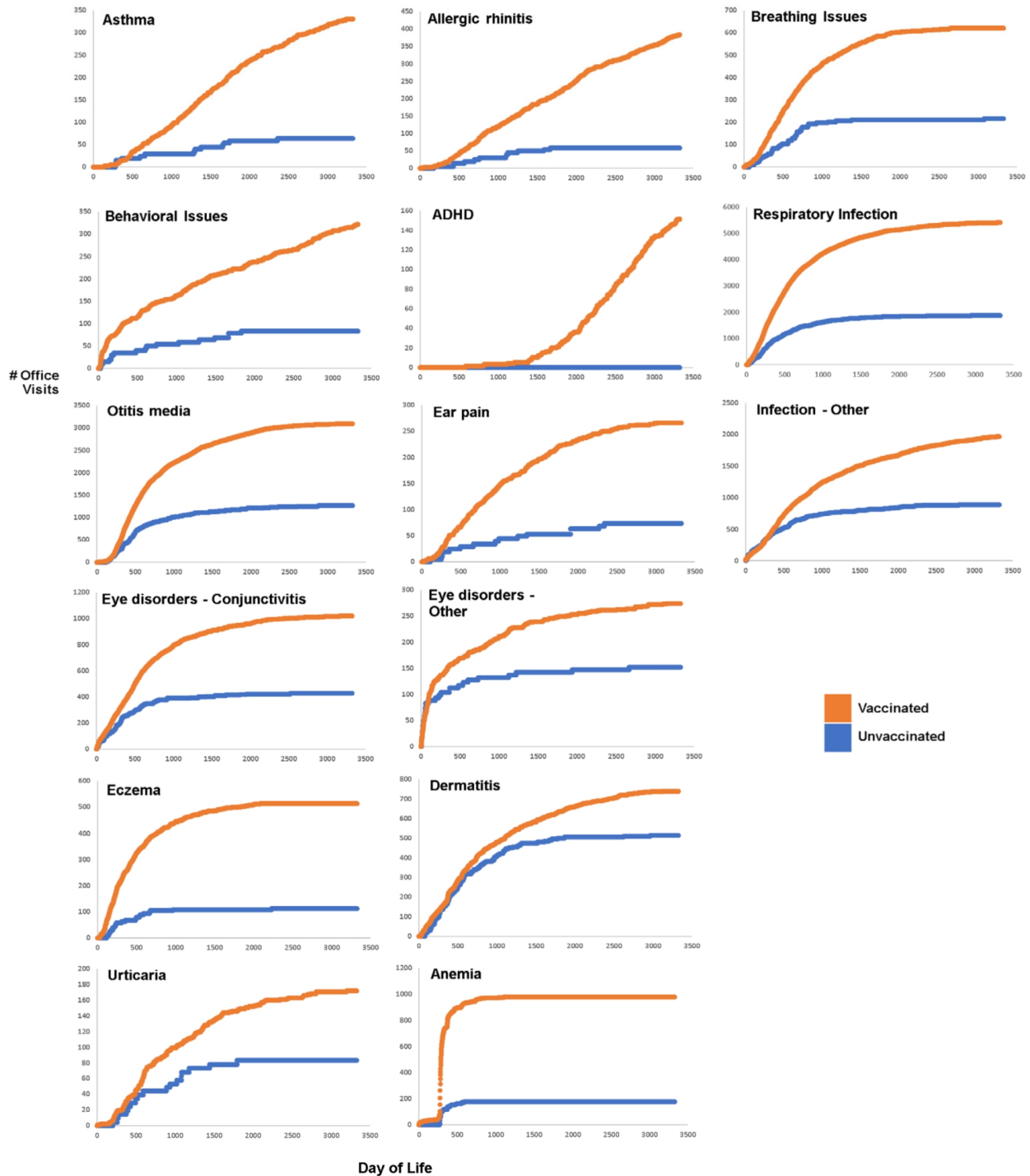
obvious:

They will never admit to it, but the sudden rise in SADS directly coincides with the unleashing of Operation Warp Speed, which has turned hundreds of millions of Americans into deadly spike protein factories. These spike proteins are ripping apart their cardiovascular systems and leaving them prone to early death.¹⁶⁴

All Vaccines are Dangerous Medical Quackery That Cause Disease

The COVID-19 vaccine is not an anomaly. It is just the most recent vaccine atrocity. Vaccination is medical quackery.¹⁶⁵ But because vaccinations fulfill the perverted ends of Satan and his minions, the practice flourishes. Vaccines are unsafe and ineffective. One suppressed study proves that “vaccinated children appear to be significantly less healthy than the unvaccinated.”¹⁶⁶

The chart below shows the “[c]umulative office visits in the vaccinated (orange) vs. unvaccinated (blue) patients born into [Dr. Paul Thomas’ pediatric] practice: the clarity of the age-specific differences in the health fates of individuals who are vaccinated (2763) compared to the 561 unvaccinated in patients born into the practice over ten years is most strikingly clear in this comparison of the cumulative numbers of diagnoses in the two patient groups. The number of office visits for the unvaccinated is adjusted by a sample size multiplier factor (4.9) to the expected value as if the number of unvaccinated in the study was the same as the number of vaccinated.”¹⁶⁷



Rhoda Wilson reveals in the April 11, 2022, edition of *The Expose* a groundbreaking study comparing the health of a group of 1,482 unvaccinated adults and children to the national statistics on the health of vaccinated adults.¹⁶⁸ The study conducted by an organization called *The Control Group* reveals that unvaccinated adults are significantly healthier than vaccinated adults.¹⁶⁹

The Control Group filed a complaint in federal court seeking a declaratory judgment and injunctive relief against the federal government alleging its vaccine laws, regulations, and policies are unscientific and violate the constitutional rights of the people.¹⁷⁰ But their complaint was dismissed and “on October 3, 2022, the US Supreme Court denied *The Control Group*’s petition for writ of certiorari. So this health freedom case is now closed.”¹⁷¹

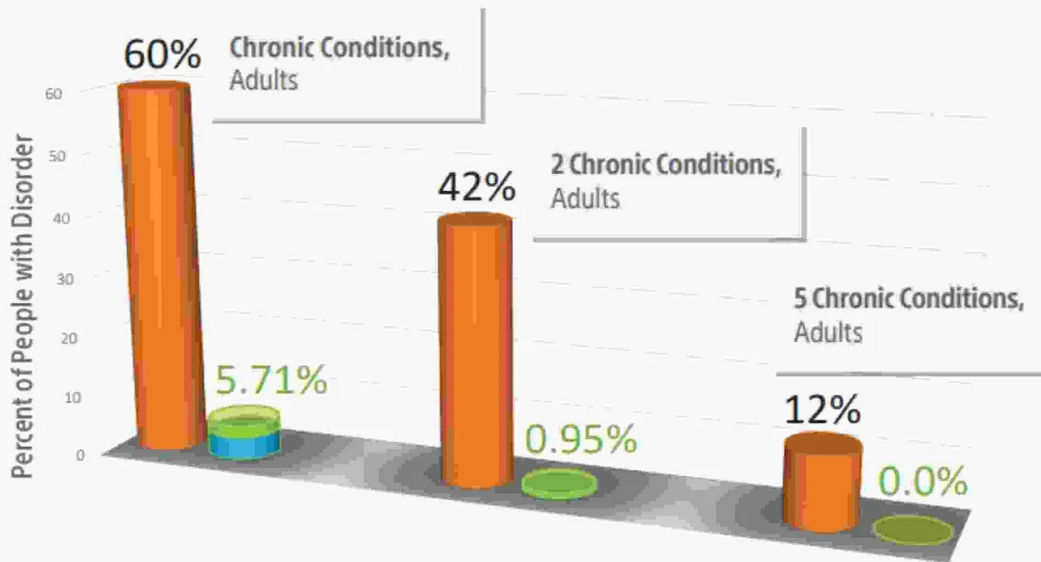
Despite the failure of the Control Group in court, the facts that they established in their study will have a long-term benefit to all who seek justice in the future. The study is robust and unimpeachable. Dr. Stephen Malthouse states:

Every so often a study comes along that shakes the bedrock of medicine. The Control Group compared unvaccinated adults to vaccinated adults in the US and what they discovered is incredible. Perhaps one of the most surprising findings is that vit K shots, containing aluminum in most cases (although not always disclosed on the list of ingredients), played a significant role in adult (and childhood) chronic disease. If you get rid of vit K shots and all vaccinations, the incidence of heart disease, asthma, autism, and other severe disorders goes practically to zero.¹⁷²

Below is a sample of some of the charts that were filed as exhibits in the litigation by the Control Group.

2020 Pilot Survey Data Comparison

VACCINATED -VS- UNVACCINATED



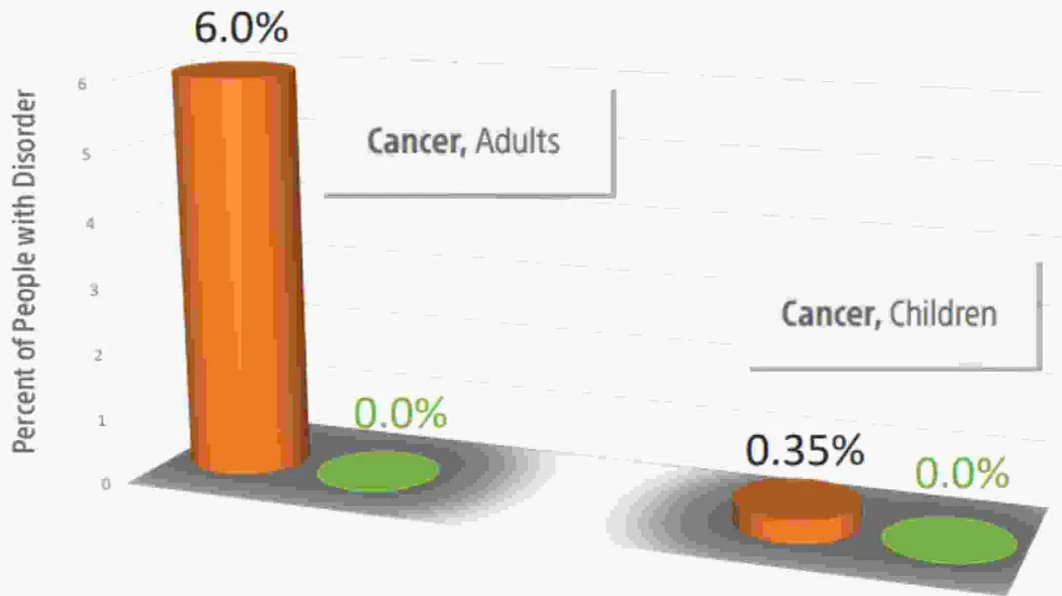
“The cure cannot be worse than the problem itself.”
- President Donald J. Trump, October 22, 2020, Presidential Debate



- U.S. National data for approximately 99%+ Vaccinated Population (CDC, Chronic Diseases in America, <https://www.cdc.gov/chronicdisease/resources/infographic/chronic-diseases.htm>)
- Pilot survey data for 100% Unvaccinated Control Group
 - ▲ Unvaccinated but exposed to K-shot and/or maternal vaccination
 - ▲ Unvaccinated and unexposed to K-shot and maternal vaccination

2020 Pilot Survey Data Comparison

VACCINATED -VS- UNVACCINATED



“The cure cannot be worse than the problem itself.”

- President Donald J. Trump, October 22, 2020, Presidential Debate

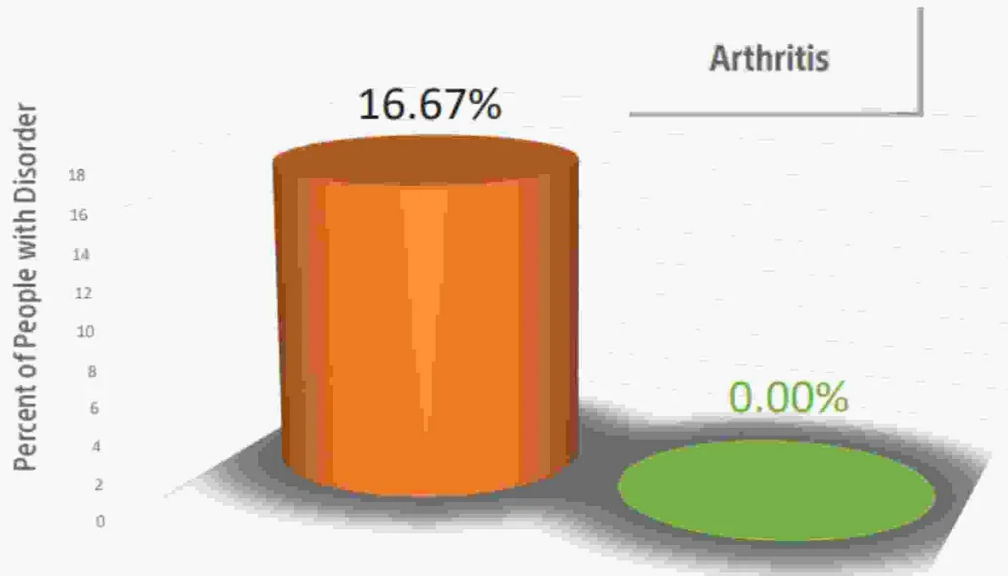


● U.S. National data for approximately 99%+ Vaccinated Population (CDC, Cancer Prevention and Control. https://www.cdc.gov/cancer/dpcr/research/articles/cancer_2020.htm; ACCO, US Childhood Cancer Statistics. <https://www.acco.org/us-childhood-cancer-statistics/>)

● Pilot survey data for 100% Unvaccinated Control Group

2020 Pilot Survey Data Comparison

VACCINATED -VS- UNVACCINATED



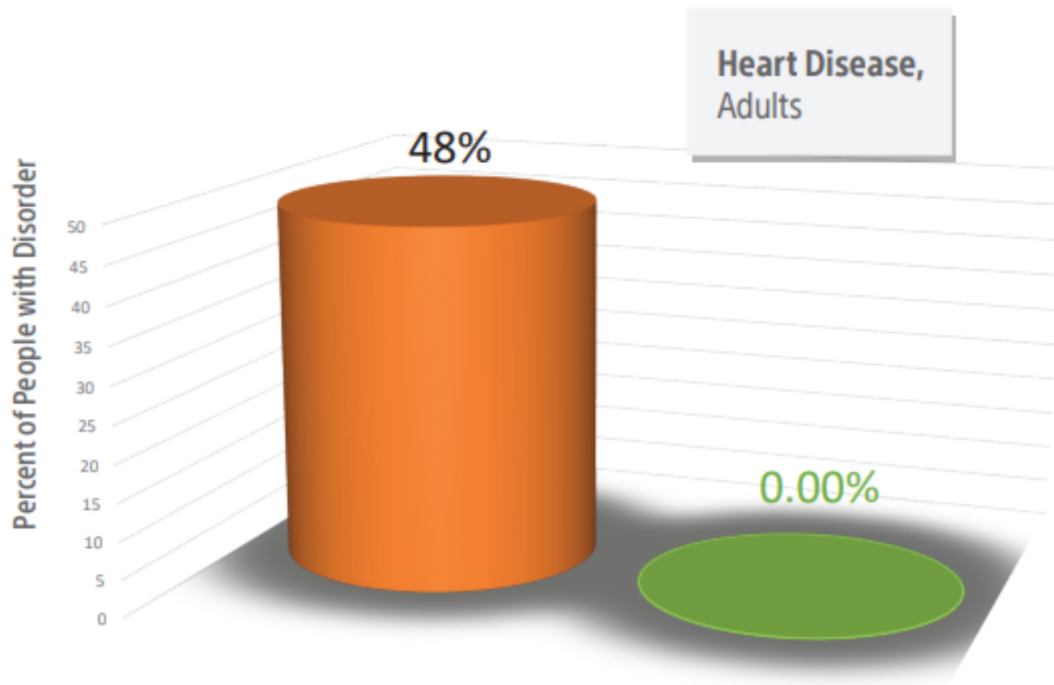
“The cure cannot be worse than the problem itself.”
- President Donald J. Trump, October 22, 2020, Presidential Debate



- U.S. National data for approximately 99%+ Vaccinated Population (CDC, Arthritis. https://www.cdc.gov/arthritis/data_statistics/state-data-current.htm)
- Pilot survey data for 100% Unvaccinated Control Group

2020 Pilot Survey Data Comparison

VACCINATED -VS- UNVACCINATED



"The cure cannot be worse than the problem itself."

- President Donald J. Trump, October 22, 2020, Presidential Debate

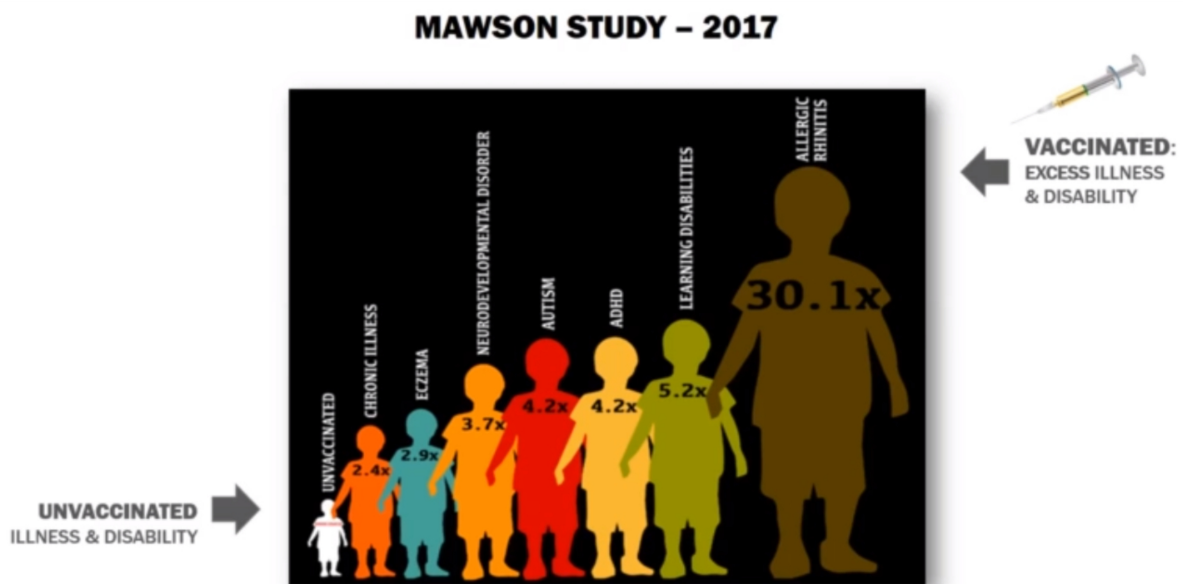


- U.S. National data for approximately 99%+ Vaccinated Population (AHA, Cardiovascular diseases affect nearly half of American adults, statistics show. <https://www.heart.org/en/news/2019/01/31/cardiovascular-diseases-affect-nearly-half-of-american-adults-statistics-show>)
- Pilot survey data for 100% Unvaccinated Control Group

Yet another study in 2020 came up with the same results. The study found that vaccinated children were much sicker than unvaccinated children. The researchers concluded:

In this study, based on a convenience sample of children born into one of three distinct pediatric medical practices, higher ORs [odds ratios] were observed within the vaccinated versus unvaccinated group for developmental delays, asthma and ear infections.¹⁷³

The 2017 Mawson study comparing the health of vaccinated children to the health of unvaccinated children arrived at the conclusion that the vaccinated children were much less healthy than the unvaccinated children.¹⁷⁴



Mark Blaxill and Amy Becker studied mortality rates during the COVID-19 lock-downs.¹⁷⁵ They discovered a startling fact. Infant mortality actually went down during the COVID-19 lockdowns. There was a significant decrease in the number of infant deaths. Blaxill and Becker attributed that drop to the inability of parents to do well-baby doctor checkups with the obligatory vaccinations. Fewer vaccines = fewer infant deaths. Blaxill and Becker stated:

Starting in early March, expected deaths [for children under 18 years old] began a sharp decline, from an expected level of around 700 deaths per week to well under 500 by mid-April and throughout May. The Centers for Disease Control and Prevention. National Center for Health Statistics Mortality Surveillance System.

As untimely deaths spiked among the elderly in Manhattan nursing homes and in similar settings all over the country, something mysterious was saving the lives of children. As springtime in America came along with massive disruptions in family life amid near-universal lockdowns, roughly 30% fewer children died.

Was this a protective effect of school closures? Were teenagers getting themselves into risky situations at a lower rate? No. There was very little effect among school age children or adolescents.¹⁷⁶

Incidentally, since the publication of Blaxill and Becker's article, the CDC has removed the page that memorialized the fact that almost all of the reduction in childhood deaths came from infants. Blaxill and Becker explain that the CDC statistics showed:

Virtually the entire change came from infants. Somehow, the changing pattern of American life during the lockdowns has been saving the lives of hundreds of infants, over 200 per week.

What has changed during this period that might have such an effect?

One very clear change that has received publicity is that public health officials are bemoaning the sharp decline in infant vaccinations as parents are not taking their infants into pediatric offices for their regular well-baby checks. In the May 15 [2020] issue of the CDC Morbidity and Mortality Weekly Report (MMWR), a group of authors from the CDC and Kaiser Permanente reported **a sharp decline in provider orders for vaccines as well as a decline in pediatric vaccine doses administered.** Santoli, Jeanne M et al. Effects of the COVID-19 Pandemic on Routine Pediatric Vaccine Ordering and Administration — United States, 2020. [cdc.gov](https://www.cdc.gov/mmwr).¹⁷⁷ [Online] May 15, 2020. These declines began in early March, around the time infant deaths began declining.¹⁷⁸

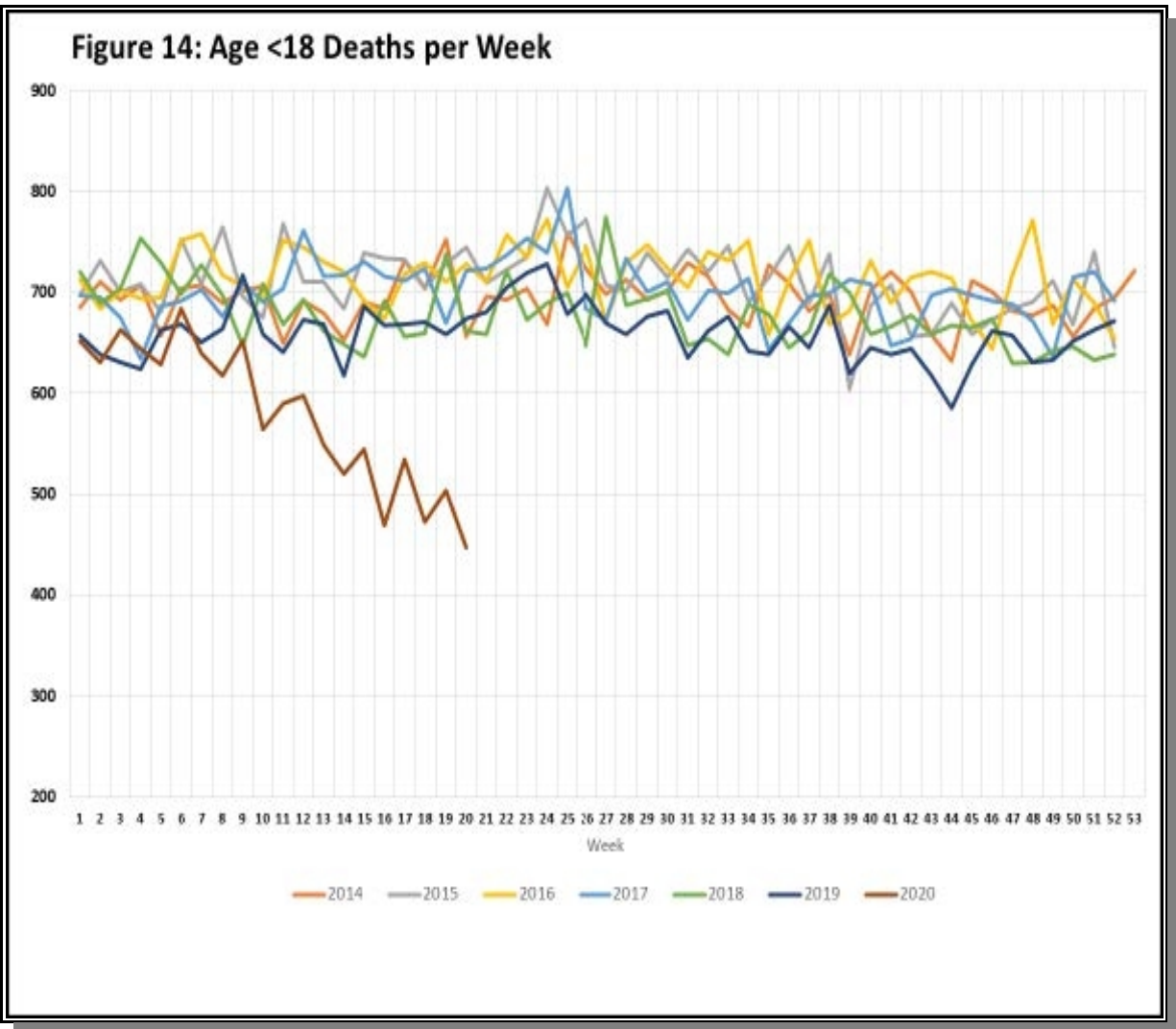


Figure 9: Chart showing a precipitous drop in child deaths early in 2020 that correlated directly with the COVID-19 lockdowns. Virtually the entire drop in deaths among children under 18 years old came from infants. The COVID-19 lockdowns prevented parents from taking infants for well-baby checkups and getting vaccinated. The reduction in infant deaths also correlated directly with a sharp decline in provider orders for vaccines and a decline in pediatric vaccine doses administered.

Lest you think that the above quoted doctors and their studies are anomalies, please understand that doctors and scientists through the centuries have witnessed first-hand the injuries caused by vaccines and have been speaking out against that superstitious practice.

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