# 2022 – REVISED MECHANISMS OF INJURY (MOI)

**Complied by Dr. Sherri Tenpenny**
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**COVID ILLNESS:**

- Is not a respiratory illness; it is a blood and blood-clotting disorder.
- Is greater than 99% recoverable
- Has a death rate of less than 0.1% globally; more deaths now from shots than from infection
- Can be treated with effective medicines, nutrients, and medical interventions.
- Symptoms are primarily caused by a spike protein.
    - Spike protein can cause covid-19 symptoms without a coronavirus present.
        - https://www.ahajournals.org/doi/full/10.1161/CIRCRESAHA.121.318902
    - Spike protein can cause symptoms in the brain, heart, lung, liver, kidney, blood, and male and female reproductive organs.
        - https://www.thieme-connect.com/products/ejournals/pdf/10.1055/s-0041-1731068.pdf
        - https://www.frontiersin.org/articles/10.3389/fimmu.2020.617089/full#f1

**What has not been done:**

- **No** drug interaction studies
- **No** vaccine interaction studies
- **No** toxicity studies on ingredients never used in humans
- **No** toxicokinetic studies for how long the mRNA, the spike protein, the anti-spike Ab last
- **No** genotoxicity studies to see if your DNA is damaged
- **No** carcinogenicity studies
- **No** studies in pregnant women or children
- **No** studies on pre- or post-natal effects on moms or newborns
- **No** studies on the effect of these shots on breast milk
- **No** animal offspring studies

**What the shots do not do:**

- Prevent you from becoming sick with COVID
- Prevent hospitalization
- Prevent transmission to others
- ONLY reduces symptoms in MILD COVID

# Some of what we DID NOT KNOW in 2021:

- **What is transmitted to un-injected persons?**
  - **2022:** It is presumed that either the spike protein, as an exosome or perhaps graphene oxide, is transmitted

- **How long after a person is injected do they transmit these 'particles'?**
  - **2022: We still don't know this answer**

- **How long does mRNA and spike antigen stay in the body after an mRNA shot?**
  - **April 2022:** The biodistribution, quantity, ***and persistence of vaccine mRNA and spike antigen*** after vaccination and viral antigens after SARS-CoV-2 infection are ***incompletely understood*** but are likely to be major determinants of immune responses. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8786601/pdf/main.pdf

- **What are the effects of lipid nanoparticles (LPN) on the body?**
  - **May 2022:** https://sharylattkisson.com/2022/05/read-watchdog-documents-lipid-nanoparticles-from-covid-19-vaccines-travel-to-various-organs-in-the-body/
    - Pfizer data: Over 48 hours, the LNP distributed mainly to ***liver, adrenal glands, spleen and ovaries***, with maximum concentrations observed at 8-48 hours post-dose. Total recovery (% of injected dose) of LNP, for combined male and female animals, outside of the injection site was greatest in the liver (up to 18%)
    - J&J data: A table showed that the ***vaccine virus continued to appear*** in the rabbits' iliac lymph nodes 180 days after injection.

- **Do the covid shots effect menstrual cycles?**
  - **July 2022:** Approximately 42 percent of respondents in a survey about post-vaccination menstruation (39,000 answers evaluated) with a regular period reported bleeding more heavily than usual after getting a vaccine, according to the study. https://www.science.org/doi/10.1126/sciadv.abm7201#

- **Does the lipid nanotech coats adhere to sperm as it does in ovaries?**
  - **June 2022:** COVID vaccination shown to decrease sperm counts
  - Effect begins 2 months following vaccination & persists for at least 5 months, when study ended. https://www.israelnationalnews.com/news/355353
  - **June 2022**: Repetitive measurements revealed −15.4% sperm concentration decrease leading to total motile count 22.1% reduction after Covid-19 vaccination BNT162b2. https://onlinelibrary.wiley.com/doi/10.1111/andr.13209

- **How long does the spike protein cause blood clots?**
  - **June 2022: Formed indefinitely because spike protein is most likely made in perpetuity** https://www.thedesertreview.com/opinion/columnists/covid-shots-causing-monstrous-clots/article_13ad0062-e680-11ec-9aca-3bc4b8cb2804.html

- **What affect does the mRNA or ds-DNA have on the unborn fetus?**
  - **Sept 2022:** Covid-19 Injections in Pregnant Women Lead to 8X Increase in Spontaneous Abortions and 3X Increase in Stillbirths. https://www.trialsitenews.com/a/covid-19-injections-in-pregnant-women-lead-to-8x-increase-in-spontaneous-abortions-and-3x-increase-in-stillbirths.-a48c57af

- **How do the Covid 19 shots affect birthrates?**
  - **June 2022:** Birth rates down all over the world. Very good substack with many charts, graphs and links, all in one place. https://timtruth.substack.com/p/birth-rates-plummet-in-1st-quarter
  - **Sept 1, 2022:** Live births dropped in England by 14% as of May 2022, and the decline seems to be worsening and not recovering. https://igorchudov.substack.com/p/uk-births-in-england-collapsed-and

- **Is the spike protein passed to infants through breast milk?**
    - **Nov 2021:** We found a clear association between COVID-19 vaccination and specific immunoglobulin concentrations in HM. This effect was more pronounced when lactation periods exceeded 23 months. https://pubmed.ncbi.nlm.nih.gov/34408089/
    - **Sept 2021:** One VAERS report describes a 5-month-old breastfed infant whose mother received a second dose of Pfizer's vaccine in March. The following day, the baby developed a rash and became "inconsolable," refused to nurse, and developed a fever. The baby was hospitalized with a diagnosis of thrombotic thrombocytopenia purpura (TT), a rare blood disorder in which blood clots form in small blood vessels throughout the body. The baby died. https://newsrescue.com/nursing-baby-died-with-blood-clots-inflamed-arteries-following-mothers-pfizer-shot-vaers-report-and-is-second-such-reported-case/

- ....this list could be endless.

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August 6, 2021
Updated: September 2022

## Definitions:

**J&J – Johnson and Johnson –** uses adenovirus and transgene to create the spike protein
**AZ – AstraZeneca –** uses adenovirus and transgene to create spike proteins; high risk of blood clots
**Pfizer and Moderna –** use mRNA to create the spike protein
**Spike protein –** antigen on surface of the SARS-CoV2 virus that binds to the ACE2 receptors on the surface of cells to enter into organs to start replication.
**Anti-S-Antibody –** the antibody generated by your immune system B-cells after being exposed to the Spike protein; the antibody is supposed to bind to the spike protein on the surface of the virus to block entrance into the cells. However, it is not known if this actually occurs.

**The MOI can be aggregated into 4 groups**
Group 1. Acute reactions (anaphylaxis, cardiac arrest)
Group 2. Illness/Damage caused by spike proteins
Group 3. Illness/Damage caused by anti-S-antibody
Group 4. Illness/Damage to immune system (macrophage damage, ADE, etc.)

# CATEGORY I: ACUTE REACTIONS

**MOI #1** anaphylaxis/PEG:
Moreno: https://www.sciencedirect.com/science/article/pii/S2451945619300352

# CATEGORY II: INJURY RELATED TO SPIKE PROTEIN

**HOW THE SPIKE PROTEIN CAUSES DISEASE:**

- The spike protein is likely produced in perpetuity in most people.
- The spike protein actively disseminates throughout the body and adhering to surface tissues It becomes a hapten that is sensed by the host's immune system, attracting cytotoxic lymphocytes, resulting in immune responses directed against the S protein AND the tissue. https://www.fda.gov/media/146219/download *(Section 3.1.2 - pg. 28)*
- The spike protein can cause disease-generating oxidative stress throughout the body.
- Spike protein can cause covid-19 symptoms without a coronavirus present.
    - https://www.ahajournals.org/doi/full/10.1161/CIRCRESAHA.121.318902
- Spike protein can cause symptoms in the brain, heart, lung, liver, kidney, blood, and male and female reproductive organs.
    - https://www.thieme-connect.com/products/ejournals/pdf/10.1055/s-0041-1731068.pdf
    - https://www.frontiersin.org/articles/10.3389/fimmu.2020.617089/full#f1
- The spike protein binds to an ACE2 receptor, allowing entrance of the spike protein, with or without the virion, into the cell causing disruption of cellular matrix.

**WHAT IS AN ACE2 RECEPTOR?**

Description of ACE2 Receptors: https://pubmed.ncbi.nlm.nih.gov/15141377/
Spike proteins bind tight to ACE2: https://www.preprints.org/manuscript/202003.0422/v1

Nuovo: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7758180/

Angiotensin-converting enzyme 2 (ACE2) is a membrane-bound enzyme**, that the spike protein of the SARS-CoV-2 virus uses as a receptor to enter the cells.** The ACE2 receptors are present in most tissues, including the nasal and oral mucosa (taste), blood vessels, red blood cells, lungs, kidney, heart, gastrointestinal (GI) tract, pancreas, ovaries, testis, and brain. **Organs with the highest concentration of ACE2 microvessels (brain, skin, liver) show the most disease.**

# SPIKE PROTEINS: BLOOD CLOTTING INJURIES

**MOI # 2** – Vaccine-induced Prothrombotic Immune Thrombocytopenia (VITT)

Pai: https://covid19-sciencetable.ca/sciencebrief/vaccine-induced-prothrombotic-immune-thrombocytopenia-vipit-following-astrazeneca-covid-19-vaccination/
Patients with VITT may present with CSVT, or with other arterial or venous clots. Some symptoms: persistent and severe headache; focal neurological symptoms (including blurred or double vision); shortness of breath; chest, back, or abdominal pain; unusual bleeding, bruising, or blood blisters; swelling and redness in a limb; or pallor and coldness in a limb. VITT seems to occur between 4 and 28 days post-vaccination.

**MOI # 3 -** Unusual thrombotic events

**Douxfils:** https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8123522/
As of 4 April 2021, a total of 169 cases of cerebral venous **sinus thrombosis (CVST)** and 53 cases of **splanchnic vein thrombosis** were reported to EudraVigilance

- **CDC – HAN: Cerebral Venous Sinus Thrombosis w/ Thrombocytopenia** – 6 patients (J&J shot) https://emergency.cdc.gov/han/2021/han00442.asp
- **Greinacher: AstraZeneca: Thrombotic thrombocytopenia** – 11 patients https://www.nejm.org/doi/pdf/10.1056/NEJMoa2104840?articleTools=true
- **Schultz: AstraZeneca: Thrombosis with thrombocytopenia** – 5 patient case reports https://www.nejm.org/doi/full/10.1056/NEJMoa2104882
- **Cines: AstraZeneca**: **Vaccine–Induced Immune Thrombotic Thrombocytopenia (VIITT)** https://www.nejm.org/doi/full/10.1056/NEJMe2106315?query=recirc_curatedRelated_article
- **Sangli: Moderna**: **Thrombosis with Thrombocytopenia** https://www.acpjournals.org/doi/10.7326/L21-0244
- **Shimazawa: Pfizer: Disproportionately high incidence of fatal intracranial hemorrhage in Japanese women** https://link.springer.com/article/10.1186/s40545-021-00326-7

# SPIKE PROTEINS: CARDIOVASCULAR INJURIES

**MOI # 4** - Cardiac damage

Lei: https://www.salk.edu/news-release/the-novel-coronavirus-spike-protein-plays-additional-key-role-in-illness

**MOI # 5** - Organ failure

- Hoffe: Microcapillary clotting cause by trillions of spike proteins → HEART FAILUR https://principia-scientific.com/doctor-heart-failure-from-mrna-jabs-will-kill-most-people
- Mokhdarti: Multiorgan system failure https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7533045/

**MOI # 6 -** Myocarditis

CDC – ACIP meeting (slide 17) - https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2021-06/03-COVID-Shimabukuro-508.pdf

The FDA update followed a review of information and discussion at the CDC's Advisory Committee on Immunization Practices (ACIP) meeting on June 23, 2021the committee acknowledged **1,226 cases of heart inflammation** in 16- to 24-year-olds and said mRNA COVID vaccines should *only carry a warning statement*.

Montgomery: **MILITARY** - https://jamanetwork.com/journals/jamacardiology/fullarticle/2781601

In this case series of 23 male patients, including 22 previously healthy military members, myocarditis was identified within 4 days of receipt of a COVID-19 vaccine. For most patients (n = 20), the diagnosis was made after the second dose of mRNA COVID-19 vaccine.

Shay: https://jamanetwork.com/journals/jamacardiology/fullarticle/2781600

" The striking clinical similarities in the presentations of these patients, their recent vaccination with an mRNA-based COVID-19 vaccine, and the lack of any alternative etiologies **for acute myocarditis suggest an association with immunization."**

Kim: https://jamanetwork.com/journals/jamacardiology/fullarticle/2781602

"7 patients with acute myocarditis were identified, of which 4 occurred within 5 days of COVID-19 vaccination: All 4 had received the second dose of a mRNA vaccine (2 received Moderna, and 2 received Pfizer) between 1 and 5 days before hospitalization."

# SPIKE PROTEINS: LUNG INJURIES

**MOI # 7** - Pulmonary hypertension, pulmonary thromboembolism and lung thrombosis, lung tissue damage, possible pulmonary fibrosis
Suzuki: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7827936/

**MOI # 8 -** Fatal Pulmonary Hypertension
Suresh: https://www.mdpi.com/2673-527X/1/1/4

Promotes growth of human lung vascular cells, leading to thickened pulmonary vascular walls and fatal disease pulmonary arterial hypertension (PAH)".

# SPIKE PROTEINS: NEUROLOGIC INJURIES

**MOI # 9** - Loss of Blood Brain Barrier (BBB) integrity
Buzhdygan:https://www.sciencedirect.com/science/article/pii/S096999612030406X?via%3Dihub

**MOI # 10** - Amyotrophic Lateral Sclerosis (ALS)
Baloh: https://pubmed.ncbi.nlm.nih.gov/23041957/
Classen: https://scivisionpub.com/pdfs/covid19-rna-based-vaccines-and-the-risk-of-prion-disease-1503.pdf

- What causes prion disease: prion diseases occur when a normal protein, found on the surface of many cells, becomes abnormal and clump in the brain, causing brain damage. This abnormal accumulation of protein in the brain can cause memory impairment, personality changes, and difficulties with movement.
  John Hopkins: https://www.hopkinsmedicine.org/health/conditions-and-diseases/prion-diseases

- Damage to FUS gene and TDP-43 protein: The RNA sequence in the vaccine contains sequences believed to induce TDP-43 and FUS to aggregate in their prion-based conformation leading to the development of common neurodegenerative diseases.
  Classen: https://principia-scientific.com/covid-19-rna-based-vaccines-and-the-risk-of-prion-disease/

**MOI # 11** - Frontotemporal lobe degeneration: (multiple types)
AFTD Association: https://www.theaftd.org/what-is-ftd/ftd-disorders/
Baloh: https://pubmed.ncbi.nlm.nih.gov/23041957/

**MOI # 12** - Circulating S1 spike protein and brain damage
Nuovo: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7758180/
Circulating spike protein leads to diffuse microvessels endothelial damage in lung, liver, brain and skin. It also leads to microencephalopathy in the brain with marked neuronal dysfunction and a reduction of key neuronal proteins.

**MOI # 13** - Spike protein binds to the acetylcholine receptors (AChR)
Oliveira: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7889469/
Lagoumintzis: https://www.biorxiv.org/content/10.1101/2020.08.20.259747v1.full
Binding disrupts the transmission of nerve impulses to muscles, possibly resulting in tremors, spasms, seizures, irregular heartbeats. Dysregulation of these receptors could be a possible cause for the **uncontrolled inflammatory response in COVID-19**. It could also explain other clinical manifestations of COVID-19 such as **anosmia** (loss of smell) and **thromboembolic complications** (blood clots).

## NEUROLOGIC INJURIES – *Spike protein not defined*

**MOI # 14 -** Visual disturbances
Bohler: https://www.nature.com/articles/s41433-021-01610-1
The signs and symptoms of our patient were consistent with acute macular neuroretinopathy (AMN) in a 27yo female. An association between AMN and COVID-19 vaccination raises the question: is there a common immune-mediated pathway that can trigger this peculiar macular disease?

**MOI # 15** - Miller Fisher Syndrome (MFS) – variant of GBS
Ehrenfeld: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7289100/
Acute onset of external ophthalmoplegia (paralysis of eye muscles) is a cardinal feature. Ataxia (unsteady gate) tends to be out of proportion to the degree of sensory loss in feet and legs. Patients may also have mild limb weakness, ptosis, ptosis (unable to open upper eyelid), facial paralysis, or bulbar palsy (cranial nerve disfunction). Occasionally generalized muscle weakness and respiratory failure may develop.

**MOI # 16** - Facial paralysis
Renoud: https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2779389
As of March 2021 in the WHO pharmacovigilance database, identified among 133,883 adverse events 844 facial paralysis-related events were reported:

- 683 cases of facial paralysis,
- 168 cases of facial paresis,
- 25 cases of facial spasms, and
- 13 cases of facial nerve disorders (some co-reported in the same case).

The breakdown included:

- 749 cases after the **Pfizer-BioNTech vaccine**
- 95 cases were reported with the **Moderna vaccine**

**CONCLUSION:** *We did not detect any signal of disproportionality of facial paralysis for broad and narrow definitions vs other viral vaccines or vs influenza vaccines alone.*

**MOI # 17** - Multiple Sclerosis

Havla: https://link.springer.com/article/10.1007/s00415-021-10648-w

Initial onset of MS with brain lesions seen on MRI after FIRST Pfizer shot

# AUTOIMMUNE DISEASE and ANTI-S-ANTIBODY

**MOI # 18 -** Molecular mimicry associated with **anti-spike antibody**

- Vojdani: https://www.frontiersin.org/articles/10.3389/fimmu.2020.617089/full#f1
  The 55 antigens that were selected provide a wide net to evaluate key autoimmune target proteins that include skin, gastrointestinal, pancreas, liver, heart, muscle, joint, thyroid, brain, enteric nerve, tight junction proteins and cellular components.
  - **28 of 55 tissue types reacted to SARS-CoV2 antibody**

- Kanduc: https://www.thieme-connect.com/products/ejournals/pdf/10.1055/s-0041-1731068.pdf
  Viral infection and/or active immunization may be causally associated as cross-reactive autoantibodies capable of altering human proteins that regulate hemostasis. This study found that 60 pentapeptides are shared by SARS-CoV-2 spike glycoprotein and human proteins. **When the human proteins are altered, mutated, deficient or, improperly functioning, this can cause vascular diseases, thromboembolic complications, venous thrombosis, thrombocytopenia, coagulopathies, and bleeding.**

- Seniff, Nigh (pg 15): https://ijvtpr.com/index.php/IJVTPR/article/view/23/51
  Antibodies with a high binding affinity to SARS-CoV-2 spike also have a high binding affinity with tTG (associated with Celiac Disease), TPO (Hashimoto's thyroiditis), myelin basic protein (multiple sclerosis), and several endogenous proteins.

**MOI # 19** - Direct anti-S-antibody damage:

- Liu: Lung damage: https://insight.jci.org/articles/view/123158
  We determined that anti–spike IgG (S-IgG), in infected lungs, causes severe acute lung injury by skewing inflammation-resolving response.

# IMMUNE SYSTEM SUPPRESSION

**MOI # 20** – Immobilize M2 macrophages

- Liu: https://insight.jci.org/articles/view/123158
  Disturbances in wound-healing can lead to uncontrolled production of inflammatory mediators [via M1 macrophages], contributing to a state of persistent injury. S-IgG likely alters [M2] macrophage response in the lungs during acute infection, resulting in increase in cytokine production, enhanced lung injury and accumulation inflammatory macrophages (M1) and by blocking M2 macrophages that would normally migrate into the area to put out the M1 "fires" and to clean up the infection and the debris.

- Ehrenfeld: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7289100/
  Autoimmune disease linked to SARS-CoV2 illness, implicating the spike protein-ACE2 association as the cause

**MOI # 21** - Immune response to stimulate spike proteins against brain cells

Merchant: https://pure.hud.ac.uk/en/publications/might-post-injection-distribution-of-covid-vaccines-to-the-brain-

The biodistribution of ChaAdOx1 (AstraZeneca) in mice confirmed the delivery of vaccine into the brain tissues. The vaccine may therefore **spur the brain cells to**

**produce Covid spike proteins** that *may* lead to an immune response against brain cells, or it may spark a spike protein-induced thrombosis.

**MOI # 22 -** Original antigenic sin - **IMPORTANT ARTICLE –**
Fierz, Walz: https://www.frontiersin.org/articles/10.3389/fimmu.2020.01120/full

**MOI # 23** - Flu shots and COVID deaths
Wehenkei: https://peerj.com/articles/10112/

**MOI # 24** - High antibody responses lead to severe and prolonged illness
Moore: https://jamanetwork.com/journals/jama/article-abstract/2777390
Fierz, Walz: https://www.frontiersin.org/articles/10.3389/fimmu.2020.01120/full

**MOI # 25** - Swollen lymph node and long-term ramifications
Society of Breast Imaging: https://www.sbi-online.org/Portals/0/Position%20Statements/2021/SBI-recommendations-for-managing-axillary-adenopathy-post-COVID-vaccination.pdf

**MOI # 26** - Widespread shots lead to mutant strains
Moore: https://jamanetwork.com/journals/jama/article-abstract/2777390

**MOI # 27** - Injected persons experience ADE on re-exposure
Tetro:
https://www.sciencedirect.com/science/article/abs/pii/S1286457920300344?via%3Dihub

**MOI # 28** - Injected of transgenes and DNA can lead to anti-DNA antibodies. Foreign DNA can integrate into human DNA
JJ Shot pg. 12 - Transgene: https://www.fda.gov/media/146219/download
Instability of transgene lines: https://www.i-sis.org.uk/transgenicLinesUnstable2.php

**MOI # 29** - dsDNA Antibodies associated with long list of illnesses:
Attar, Koshak:
https://www.academia.edu/23304303/Medical_conditions_associated_with_a_positive_anti_double_stranded_deoxyribonucleic_acid

## INFERTILITY

**MOI # 30** - Spike proteins: attach to sperm and eggs:
Morelli: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7941816
**Syncytin - "Quite simply, syncytin is critical and without it, human life could never form."**
http://isciencemag.co.uk/features/the-syncytin-gene-viruses-responsible-for-human-life/

**MOI # 31** - Lipid nanoparticle accumulation in ovaries
Pfizer: Organ distribution test –
https://undercurrents723949620.wordpress.com/2021/06/27/vaccine-causes-lipid-nanoparticles-to-accumulate-in-ovaries/

**MOI # 32 -** Genetic modification of human DNA
Zhang: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8166107/

SARS-CoV-2 RNA and perhaps spike proteins can be reverse transcribed in human cells by reverse transcriptase (RT) – MORE PROOF OF GENETIC MODIFICATION BY THESE SHOTS

**MOI # 33** - Concerns about **male infertility**

Bhattacharya: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8215312/

The testicular effects may impair Leydig cell, Sertoli cell, and sperm functions.

Wang: https://www.mdpi.com/2073-4409/9/4/920

These findings provide evidence that the human testis is a potential target of SARS-CoV-2 infection (and hence, spike protein).

Navara: https://www.frontiersin.org/articles/10.3389/fphys.2020.574761/full#B32

ACE2 human testes, epididymis, Leydig cells (testosterone production), Sertoli cells, and sperm. The expression of ACE2 is age-related, with a higher expression in patients aged 20–30 compared to 60yo+ patients that have reduced expression.

Basourakos: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223018/

The effects of SARS-Cov-2 (spike protein) on spermatogenesis may linger months after clinical recovery from active infection.

# CANCER

**MOI # 34 -** *FUS* gene mutation and cancer:

MedlinePlus: https://medlineplus.gov/genetics/gene/fus/#conditions

**MOI # 35 -** Adenoviruses and cancer:

Medical Microbiology. 4th edition. https://www.ncbi.nlm.nih.gov/books/NBK8503/

**MOI #35A –** Tumor suppressor cells are deactivated →cancer reactivation

interaction of S2 subunit protein of SARS-nCoV-2 of novel coronavirus with **tumor suppressor proteins p53 and BRCA-1/2. Therefore:** Spike protein is more fatal in people with underlying conditions specially **lung diseases, diabetes and cancer**. https://www.sciencedirect.com/science/article/pii/S1936523320303065

# CHEMICAL POISONING

**MOI # 36** - Chemical poisoning

## SM-102

MODERNA: Contains SM-102, used to develop lipid nanoparticles for delivery of mRNA

**Safety Data Sheet:** https://www.caymanchem.com/msdss/33474m.pdf

**Chloroform**: https://byjus.com/chemistry/chloroform-uses-effects-environment/

- Generic name: 8-[(2-hydroxyethyl)[6-oxo-6-(undecyloxy)hexyl]amino]-octanoic acid
- Trade name: **SM-102 in Chloroform**
  - Chloroform is trichloromethane.
  - Suspected carcinogen
  - Suspected to damage fertility; known teratogenicity and developmental toxicity in the unborn child
  - When exposed to light and/or air, converts to phosgene, a highly poisonous gas
  - May cause anemia, cough, CNS depression, drowsiness, headache, heart damage, lassitude (weakness, exhaustion), liver damage, narcosis, **reproductive effects, teratogenic effects.**

- For Research Use Only**. Not for human or veterinary diagnostic or therapeutic use**.

**MOI # 37** - Chemical poisoning

### HBCD

JOHNSON & JOHNSON: Contains 2-hydroxypropyl-β-cyclodextrin (HBCD)
**Safety Data Sheet**: http://www.abmole.com/literature/2-hydroxypropyl-beta-cyclodextrin-msds.html

- HBCD is used for easier diffusion across biological membranes.
- Toxicological effects of this product have not been studied
- Carcinogenicity potential of this product has not been studied
- For Research Use Only. **Not Intended for Diagnostic or Therapeutic Use.**

## MAGNETIC TOXICITY/POISONING

**MOI # 38** - Magnetic poisoning

### Graphene

https://particleandfibretoxicology.biomedcentral.com/articles/10.1186/s12989-016-0168-y
Graphene is an extremely thin two-dimensional layer of the graphite used in pencils The graphene-family of nanoparticles (GFN) can penetrate through the physiological barriers or cellular structures by different exposure ways or administration routes and entry the body or cells, eventually resulting in toxicity in vivo and in vitro.

GFNs can induce acute and chronic injuries in tissues by penetrating through the blood-air barrier, blood-testis barrier, blood-brain barrier, and blood-placenta barrier etc.

GFNs can accumulate in the lung, liver, and spleen etc. They can be inhaled and deposited in the respiratory tract and travel to the lower lung airways. The result may be granuloma, lung fibrosis or even cancer. The toxicological mechanisms include inflammatory response, DNA damage, cellular death, tissue necrosis etc.,

**ACCORDING TO LA QUINTA COLUMNA, in Spain:**
https://rightsfreedoms.wordpress.com/2021/06/27/la-quinta-columna-analysis-of-vaccination-vial-confirms-presence-of-graphene-nanoparticles/

- The COVID vaccines in **all their variants**, Pfizer, Moderna, Johnson & Johnson, AstraZeneca, Sinovac, etc., contain a considerable dose of graphene oxide nanoparticles.
- The masks being used contain graphene oxide.
- PCR swabs for swabs and antigen testing contain graphene oxide nanoparticles.

Graphene oxide is toxic:

- Causes blood coagulation
- Can cause collapse of the immune system and subsequent cytokine storm
- Can lead to inflammation of mucous membranes, loss of taste and partial loss of smell. In the lungs, can lead to bilateral pneumonia
- Depletes glutathione reserves

**MOI # 39** - Magnetic poisoning

### Magnetite

Magnetic nanoparticles (MNPs) for biomedical applications are typically composed of a magnetic core. One of most commonly used MNP is magnetite. ($Fe_3O_4$)

The major advantage of magnetic manipulation is ‘‘remote control.’’ Magnetic labeling of cells with magnetic nanoparticles enables the manipulation of cells and also the control of cell functions by applying an external magnetic field. ‘‘Functional’’ magnetite nanoparticles were developed for cell manipulation using magnetic force, and the magnetite nanoparticles were applied to tissue-engineering processes, which are designated as magnetic force-based tissue engineering (Mag-TE).

Here are five uses of magnetite nanoparticles:

- Magnetic force-based gene transfer technique (magnetofection)
- Creating cell patterns using functional magnetite nanoparticles
- Micro-patterned magnetic field gradient concentrators, and
- Applications for creating of tissue-like constructs in skin, liver, and muscle tissue Engineering.
- The major advantage of magnetic manipulation is "remote control." Magnetic labeling of cells with magnetic nanoparticles enables the ***manipulation of cells and also the control of cell functions by applying an external magnetic field.***

**REFERENCES for MOI #39**


1. NANOMEDICINE: DESIGN AND APPLICATIONS OF MAGNETIC NANOMATERIALS, NANOSENSORS AND NANOSYSTEMS. Varadan, Vijay, editor. Wiley & Sons. John Wiley & Sons Ltd, The Atrium, Southern Gate, Chichester, West Sussex, PO19 8SQ, United Kingdom. **2008**
2. Clinical Applications of Magnetic Nanoparticles. Nguyen Thanh, editor. Taylor and Francis Group. 6000 Broken Sound Parkway NW, Suite 300, Boca Raton, FL. **2018.**
3. Tissue Engineering Using Magnetite Nanoparticles. Article: https://pubmed.ncbi.nlm.nih.gov/22093224/ **2011**


# FREQUENCIES

**MOI # 40** - Radiofrequency: Effect of 5G and EMF

Rubik, Brown: https://zero5g.com/wp-content/uploads/2021/03/Rubik-Brown-COVID-19-and-RFR-SUBMITTED.pdf

This is the first scientific paper documenting a link between the detrimental bioeffects of radiofrequency radiation (RFR) from wireless communication **in particular 5G**, and COVID-19. We conclude that RFR exacerbated the COVID-19 pandemic by weakening host immunity and increasing SARS-CoV-2 virulence by:

- Causing morphologic changes in red blood cells that may be contributing to hypercoagulation.
- Impairing microcirculation and hemoglobin levels exacerbating hypoxia.
- Amplifying immune dysfunction, including immunosuppression, autoimmunity, and hyperinflammation.
- Increasing cellular oxidative stress and the production of free radicals, exacerbating vascular injury and organ damage.
- Augmenting intracellular Ca2+ essential for viral entry, replication, and release; and
- Inducing heart arrhythmias and cardiac disorders.

## FURTHER CONCERNS:

There is no benefit from these vaccines and as presented, the potential can be catastrophic to our children. There is no data to support this, yet only potential for downsides. In terms of our children, it is beyond establishing whether the risk is real. This demand to stop any vaccination of our children is based on no risk and thus no benefit.

If the spike proteins are not filtered out of the blood, the national blood supply may be contaminated by blood donations from those who are injected with COVID shots. US and international Red Cross must respond to this potential risk.

RE: Long-haul COVID - This syndrome likely represents a low-grade unresolved smoldering COVID infection with the ***same kind of spike protein persistence and clinical impact*** as is seen in many individuals after their COVID vaccinations (Mendelson et al., 2020; Aucott and Rebman, 2021; Raveendran, 2021).