

COVID-19 Vaccine Ingredients

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Introduction

On 20 August 2021 Dr. Robert Young published his team’s findings after analysing the four dominant COVID-19 “vaccines” using Phase Contrast Microscopy, Transmission and Scanning Electron Microscopy and Energy-Dispersive X-ray Spectroscopy. Their findings both confirm and expand upon the prior investigations carried out by Dr. Pablo Campra (University of Almeria, Spain), Dr. Juan F. Gastón Añaños (Hospital de Barbastro, Spain), and later ones by Dr. Martín Monteverde (Argentina), Dr. Matt Shelton (New Zealand), a British Laboratory, as well as the pathology reports from autopsies of vaccinated deceased which were carried out by Prof. Dr. Arne Burkhardt, Prof. Dr. Walter Lang and Prof. Dr. Peter Schirmacher (Germany & Austria), and as reported by Maria Zeee (Australia).

Many of these substances were observed as being bonded to graphene oxide and metallic nanoparticles. GO nanoparticles are necrotic, able to pass into or through physiological barriers including (but not limited to) the blood-air barrier, the blood-testis barrier, the blood-brain barrier, and the blood-placenta barrier. Over a period of several months after intramuscular injection, as much as 75% of the GO nanoparticle “delivery platform”, and most of the substances listed below, are transported extensively throughout the bodies of

mammals, into the blood, brain and other organs. Some of the many toxic effects of graphene oxide are myocarditis and blood clotting. Contamination in vaccines appears to be so common that one might be forgiven for thinking that it is deliberate.

COVID-19 Vaccine Identified Ingredients

Identified Ingredients	Pfizer	AstraZeneca	Janssen	Moderna
<u>Aluminium (Al)</u>	Yes			Yes
<u>Bismuth (Bi)</u>	Yes			
<u>Cadmium (Cd)</u>				Yes
<u>Calcium (Ca)</u>				Yes
<u>Carbon (C)</u>	Yes			Yes
<u>Chloride (CL⁻)</u>	Yes			
<u>Chlorine (Cl in saline solution)</u>	Yes	Yes	Yes	Yes
<u>Chromium (Cr)</u>	Yes	Yes	Yes	
<u>Copper (Cu)</u>	Yes	Yes		Yes
<u>Graphene oxide</u>	Yes	Yes	Yes	Yes
<u>Iron (Fe)</u>	Yes	Yes	Yes	Yes
<u>Lead (Pb)</u>				Yes
<u>Magnesium (Mg)</u>				Yes
<u>Manganese (Mn)</u>			Yes	
<u>Nickel (Ni)</u>		Yes	Yes	
<u>Nitrogen (N)</u>	Yes			Yes
<u>Oxygen (O)</u>	Yes			Yes
<u>Phosphorous (P)</u>	Yes			Yes
<u>Potassium (K)</u>				Yes
<u>Selenium (Se)</u>				Yes
<u>Silicon (Si)</u>	Yes	Yes	Yes	Yes

Identified Ingredients	Pfizer	AstraZeneca	Janssen	Moderna
<u>Sodium (Na in saline solution)</u>	Yes	Yes	Yes	Yes
<u>Sulfur (S)</u>	Yes	Yes		
<u>Tin (Sn)</u>		Yes		
<u>Titanium (Ti)</u>	Yes			Yes
<u>Trypanosoma (parasite)</u>	<u>Yes</u>	<u>Possible</u>		
<u>Vanadium (Va)</u>	Yes			

Source : <https://www.drrobertyoung.com/post/transmission-electron-microscopy-reveals-graphene-oxide-in-cov-19-vaccines>

These findings are compositionally consistent with some of the declared contents of the Pfizer and Moderna products. I imagine that further quantitative analysis of the contents should make it possible to identify the likely chemical compounds which have *not* been explicitly identified by the manufacturers (via mass-spectrometry and molar mass derivations). Considering the experiment that was carried out in Kenya in 2014 (and more here), I suspect that Human chorionic gonadotropin (hCG) (composed primarily of carbon, hydrogen, nitrogen and oxygen) is possibly one of them.

The discovery of stainless steel (and unidentified black particles) in the Moderna vaccines in Japan may account for some of the iron, carbon, nitrogen, aluminium, silicon, titanium, copper and/or selenium detected in that particular chimera. Moderna are claiming that the stainless steel inclusions were accidental contamination and limited to some batches manufactured by Laboratorios Farmacéuticos Rovi headquartered in Madrid. Dr. Young's team observed nano-scale shards of stainless steel in the AstraZeneca vaccine, and aggregate stainless steel particles in the Janssen vaccine.

More recently, reports are coming out of Japan revealing the presence of unidentified floating white contaminants in the Pfizer vaccines, which Pfizer are claiming are likely undissolved vaccine ingredients. Irrespective of the claimed composition thereof, are undissolved solids *ever* safe when injected into the body?

COVID-19 Vaccine Declared Ingredients

Declared Ingredients	Chemical Composition	Pfizer	Moderna
Active Ingredients			

Declared Ingredients	Chemical Composition	Pfizer	Moderna
Comirnaty mRNA	$C_{15}H_{31}N_3O_{13}P_2$ (DNA/variable)	Yes	
mRNA-1273 mRNA	$C_{15}H_{31}N_3O_{13}P_2$ (DNA/variable)		Yes
Lipids			
<u>Cholestrol</u>	$C_{27}H_{46}O$	Yes	Yes
<u>1,2-distearoyl-sn-glycero-3-phosphocholine (DSPC)</u>	$C_{44}H_{88}NO_8P$	Yes	Yes
<u>((4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate) (ALC-3015)</u>	$C_{48}H_{95}NO_5$	Yes	
<u>2-[(polyethylene glycol)-2000]-N,N-ditetradecylacetamide (ALC-0159)</u>	H- (O-CH ₂ -CH ₂) _n -OH	Yes	
<u>Lipid SM-102</u>	$C_{44}H_{87}NO_5$		Yes
<u>1,2-dimyristoyl-rac-glycero-3-methoxypolyethylene glycol-2000 (PEG2000-DMG)</u>	$(C_2H_4O)_n C_{32}H_{62}O_5$		Yes
Buffers			
potassium chloride	KCl	Yes	
monobasic potassium phosphate	KH_2PO_4	Yes	
sodium chloride	NaCl	Yes	
basic sodium phosphate dihydrate	Na_2HPO_4	Yes	
tromethamine (tris(hydroxymethyl)aminomethane)	$C_4H_{12}ClNO_3$		Yes
tromethamine hydrochloride	$C_4H_{11}NO_3$		Yes
acetic acid	$C_2H_4O_2$		Yes
sodium acetate	$C_2H_3NaO_2$		Yes
water	H_2O	Yes	Yes
Other			
sucrose	$C_{12}H_{22}O_{11}$	Yes	Yes

The components which *do not* appear to have been declared include:

Aluminium (Al)

Bismuth (Bi)

Cadmium (Cd)

Chromium (Cr)

Copper (Cu)

Iron (Fe)

Lead (Pb)

Magnesium (Mg)

Manganese (Mn)

Nickel (Ni)

Selenium (Se)

Silicon (Si)

Sulfur (S)

Tin (Sn)

Titanium (Ti)

Vanadium (V)

Graphene oxide (C₁₄₀H₄₂O₂₀)

...which includes the blood parasite, Trypanosoma cruzi (Chagas disease) or possibly Trypanosoma brucei (African sleeping sickness), as indicated in the most recent MHRA reports (reproduced below) and 16 VAERS reports (August 2023). Trypanosoma is composed of carbon, oxygen, chromium, sulphur, aluminium, chloride and nitrogen.

Case Series Drug Analysis Print

Name: COVID-19 mRNA Pfizer- BioNTech vaccine analysis print

Report Run Date: 26-Aug-2021

Data Lock Date: 25-Aug-2021 18:30:56

Earliest Reaction Date: 13-Apr-1968

MedDRA Version: MedDRA 24.0

Reaction Name	Total	Fatal
Infections		
Infections cont'd		
<i>Treponema Infections</i>		
Syphilis	2	0
<i>Trypanosomal Infections</i>		
African trypanosomiasis	2	0
<i>Tuberculous Infections</i>		
Latent tuberculosis	1	0
Lymph node tuberculosis	1	0
Pulmonary tuberculosis	1	0
Tuberculosis	1	0
Tuberculosis of central nervous system	1	0
<i>Upper respiratory tract Infections</i>		
Acute sinusitis	4	0
Chronic sinusitis	1	0
Croup infectious	1	0
Epiglottitis	1	0
Laryngitis	24	0
Nasopharyngitis	788	0
Peritonsillar abscess	2	0
Pharyngitis	27	0
Rhinitis	36	0
Sinusitis	123	0
Tonsillitis	90	0
Tracheitis	4	0
Tracheostomy infection	1	0
Upper respiratory tract infection	6	0
<i>Urinary tract Infections</i>		
Cystitis	61	0
Kidney infection	34	0
Pyelonephritis	2	0
Urinary tract infection	154	0
<i>Vascular Infections</i>		
Haematoma infection	1	0
Infected lymphocele	1	0
Infusion site infection	1	0
Lymphangitis	7	0
<i>Viral Infections NEC</i>		
Arthritis viral	1	0
Conjunctivitis viral	2	0
Encephalitis viral	4	1
Eye infection viral	2	0
Gastroenteritis viral	21	0
Hepatitis viral	2	0
Meningitis viral	8	0
Meningoencephalitis viral	1	0
Oral viral infection	1	0
Pleurisy viral	1	0
Pneumonia viral	2	1
Post viral fatigue syndrome	37	0
Sweating fever	77	0
Vestibular neuronitis	23	0
Viral diarrhoea	2	0
Viral infection	40	0
Viral labyrinthitis	3	0

Tuberculosis	1	0
Tuberculosis of central nervous system	1	0
Upper respiratory tract infections		
Acute sinusitis	4	0
Chronic sinusitis	1	0
Croup infectious	1	0
Epi-glottitis	1	0
Laryngitis	24	0
Nasopharyngitis	788	0
Peritonsillar abscess	2	0
Pharyngitis	27	0
Rhinitis	36	0
Sinusitis	123	0
Tonsillitis	90	0
Tracheitis	4	0
Tracheostomy infection	1	0
Upper respiratory tract infection	6	0
Urinary tract infections		
Cystitis	61	0
Kidney infection	34	0
Pyelonephritis	2	0
Urinary tract infection	154	0
Vascular infections		
Haematoma infection	1	0
Infected lymphocele	1	0
Infusion site infection	1	0
Lymphangitis	7	0
Viral infections NEC		
Arthritis viral	1	0
Conjunctivitis viral	2	0
Encephalitis viral	4	1
Eye infection viral	2	0
Gastroenteritis viral	21	0
Menigitis viral	2	0

Case Series Drug Analysis Print

Name: COVID-19 vaccine AstraZeneca analysis print

Report Run Date: 26-Aug-2021

Data Lock Date: 25-Aug-2021 18:30:56

Earliest Reaction Date: 03-Feb-1921

MedDRA Version: MedDRA 24.0

Reaction Name	Total	Fatal
Infections Infections cont'd		
Vaccination site pustule	5	0
Staphylococcal infections		
Furuncle	54	0
Staphylococcal bacteraemia	2	0
Staphylococcal infection	1	0
Staphylococcal scalded skin syndrome	1	0
Staphylococcal sepsis	4	1
Toxic shock syndrome staphylococcal	1	0
Vulvovaginitis staphylococcal	1	0
Streptococcal Infections		
Cellulitis streptococcal	1	0
Erysipelas	1	0
Meningitis pneumococcal	4	1
Pharyngitis streptococcal	9	0
Pneumonia pneumococcal	1	0
Scarlet fever	1	0
Streptococcal infection	2	0
Tonsillitis streptococcal	1	0
Tinea Infections		
Body tinea	8	0
Tinea cruris	2	0
Tinea infection	2	0
Tinea pedis	4	0
Tinea versicolour	2	0
Treponema Infections		
Neurosyphilis	1	0
Syphilis	3	0
Trypanosomal Infections		
African trypanosomiasis	6	0
Tuberculous infections		
Disseminated Bacillus Calmette-Guerin infection	1	0
Erythema induratum	1	0
Latent tuberculosis	1	0
Lymph node tuberculosis	3	0
Meningitis tuberculous	1	0
Pulmonary tuberculosis	2	0
Tuberculosis	4	0
Upper respiratory tract infections		
Acute sinusitis	6	0
Chronic sinusitis	14	0
Croup infectious	1	0
Epiglottitis	1	0
Laryngitis	36	0
Nasal vestibulitis	1	0
Nasopharyngitis	1863	0
Peritonsillar abscess	1	0
Pharyngeal abscess	1	0
Pharyngitis	38	0
Rhinitis	52	0
Sinobronchitis	1	0
Sinusitis	373	0
Tonsillitis	86	0
Tracheitis	2	0

<i>Yersinia enterocolitica</i>	1	0
<i>Yersinia pseudotuberculosis</i>	1	0
Streptococcal Infections		
Cellulitis streptococcal	1	0
Erysipelas	1	0
Meningitis pneumococcal	4	1
Pharyngitis streptococcal	9	0
Pneumonia pneumococcal	1	0
Scarlet fever	1	0
Streptococcal infection	2	0
Tonsillitis streptococcal	1	0
Tinea Infections		
Body tinea	8	0
Tinea cruris	2	0
Tinea infection	2	0
Tinea pedis	4	0
Tinea versicolour	2	0
Treponema Infections		
Neurosyphilis	1	0
Syphilis	3	0
Trypanosomal Infections		
African trypanosomiasis	6	0
Tuberculous Infections		
Disseminated Bacillus Calmette-Guerin infection	1	0
Erythema induratum	1	0
Latent tuberculosis	1	0
Lymph node tuberculosis	3	0
Meningitis tuberculous	1	0
Pulmonary tuberculosis	2	0
Tuberculosis	4	0
Upper respiratory tract Infections		
Acute sinusitis	6	0
Chronic sinusitis	14	0
Croup infectious	1	0
Epiglottitis	1	0

Case Series Drug Analysis Print

Name: COVID-19 vaccine brand unspecified analysis print

Report Run Date: 26-Aug-2021

Data Lock Date: 25-Aug-2021 18:30:56

Earliest Reaction Date: 06-Feb-2020

MedDRA Version: MedDRA 24.0

Reaction Name	Total	Fatal
Infections		
<i>Abdominal and gastrointestinal infections</i>		
Appendicitis	1	0
<i>Bacterial infections NEC</i>		
Arthritis bacterial	1	0
<i>Breast infections</i>		
Mastitis	1	0
<i>Caliciviral infections</i>		
Norovirus infection	1	0
<i>Central nervous system and spinal infections</i>		
Encephalitis	1	0
Meningitis aseptic	1	0
<i>Coronavirus infections</i>		
COVID-19	16	0
Suspected COVID-19	1	0
<i>Eye and eyelid infections</i>		
Eye infection	1	0
<i>Fungal infections NEC</i>		
Fungal infection	1	0
<i>Herpes viral infections</i>		
Genital herpes	2	0
Herpes zoster	9	0
Oral herpes	2	0
<i>Infections NEC</i>		
Infection	5	0
Localised infection	1	0
<i>Infectious transmissions</i>		
Vaccine virus shedding	1	0
<i>Influenza viral infections</i>		
Influenza	13	0
<i>Lower respiratory tract and lung infections</i>		
Lower respiratory tract infection	3	1
Pneumonia	5	3
<i>Mumps viral infections</i>		
Mumps	1	0
<i>Sepsis, bacteraemia, viraemia and fungaemia NEC</i>		
Sepsis	1	0
<i>Staphylococcal infections</i>		
Furuncle	1	0
<i>Trypanosomal infections</i>		
African trypanosomiasis	1	0
<i>Upper respiratory tract infections</i>		
Nasopharyngitis	8	0
Sinusitis	1	0
Tonsillitis	1	0
<i>Urinary tract infections</i>		
Kidney infection	2	0
Urinary tract infection	3	0
<i>Viral infections NEC</i>		
Gastroenteritis viral	1	0
Sweating fever	1	0
Viral infection	2	0
Infections SOC TOTAL	89	4

Central nervous system and spinal infections		
Encephalitis	1	0
Meningitis aseptic	1	0
Coronavirus infections		
COVID-19	16	0
Suspected COVID-19	1	0
Eye and eyelid infections		
Eye infection	1	0
Fungal infections NEC		
Fungal infection	1	0
Herpes viral infections		
Genital herpes	2	0
Herpes zoster	9	0
Oral herpes	2	0
Infections NEC		
Infection	5	0
Localised infection	1	0
Infectious transmissions		
Vaccine virus shedding	1	0
Influenza viral infections		
Influenza	13	0
Lower respiratory tract and lung infections		
Lower respiratory tract infection	3	1
Pneumonia	5	3
Mumps viral infections		
Mumps	1	0
Sepsis, bacteraemia, viraemia and fungaemia NEC		
Sepsis	1	0
Staphylococcal infections		
Furuncle	1	0
Trypanosomal infections		
African trypanosomiasis	1	0
Upper respiratory tract infections		
Nasopharyngitis	9	0

Details for VAERS ID: 1382321-1

Event Information			
Patient Age	61.00	Sex	Female
State / Territory	Missouri	Date Report Completed	2021-06-08
Date Vaccinated	2021-01-08	Date Report Received	2021-06-08
Date of Onset	2021-02-05	Date Died	
Days to onset	28		
Vaccine Administered By	Work *	Vaccine Purchased By	Not Applicable *
Mfr/Imm Project Number	vsafe	Report Form Version	2
Recovered	Yes	Serious	No

* VAERS 2.0 Report Form Only

** VAERS-1 Report Form Only

"Not Applicable" will appear when information is not available on this report form version.

Event Categories	
Death	No
Life Threatening	No
Permanent Disability	No
Congenital Anomaly / Birth Defect *	No
Hospitalized	No
Days in Hospital	None
Existing Hospitalization Prolonged	No
Emergency Room / Office Visit **	N/A
Emergency Room *	No
Office Visit *	Yes

* VAERS 2.0 Report Form Only

** VAERS-1 Report Form Only

"N/A" will appear when information is not available on this report form version.

Vaccine Type	Vaccine	Manufacturer	Lot	Dose	Route	Site
COVID19 VACCINE	COVID19 (COVID19 (PFIZER-BIONTECH))	PFIZER\BIONTECH	EL1284	2	IM	RA

Symptom
ANTIBODY TEST
BLOOD TEST
UNEVALUABLE EVENT

Adverse Event Description
<p>Back in Dec before my 1st shot 12/18/20, I donated blood, confirmed my blood was good and sent to the hospital. Then I got my second shot 1/8/21 and a little bit after that I donated blood again (02/05/2021), this time sent a letter that my blood tested positive for Trypanosoma Cruzi and that they can?t use my blood and that I should see my Doc. I went to see my Infectious Disease 4/8/21 Doctor and he did all the tests and they came back negative. He said I didn?t have anything and he thinks it was a reaction from the vaccine that caused the antibodies test to be positive.</p>

State / Territory	Missouri	Date Report Completed	2021-06-08
Date Vaccinated	2021-01-08	Date Report Received	2021-06-08
Date of Onset	2021-02-05	Date Died	
Days to onset	28		
Vaccine Administered By	Work *	Vaccine Purchased By	Not Applicable *
Mfr/Imm Project Number	vsafe	Report Form Version	2
Recovered	Yes	Serious	No

* VAERS 2.0 Report Form Only
 ** VAERS-1 Report Form Only
 "Not Applicable" will appear when information is not available on this report form version.

Life Threatening	No
Permanent Disability	No
Congenital Anomaly / Birth Defect *	No
Hospitalized	No
Days in Hospital	None
Existing Hospitalization Prolonged	No
Emergency Room / Office Visit **	N/A
Emergency Room *	No
Office Visit *	Yes

* VAERS 2.0 Report Form Only
 ** VAERS-1 Report Form Only
 "N/A" will appear when information is not available on this report form version.

Vaccine Type	Vaccine	Manufacturer	Lot	Dose	Route	Site
COVID19 VACCINE	COVID19 (COVID19 (PFIZER-BIONTECH))	PFIZER\BIONTECH	EL1284	2	IM	RA

Symptom
ANTIBODY TEST
BLOOD TEST
UNEVALUABLE EVENT

Adverse Event Description
Back in Dec before my 1st shot 12/18/20 I donated blood confirmed my blood was good and sent to the hospital

VAERS ID ↓	Vaccine Manufacturer	Symptoms	Adverse Event Description ↑↓
0961987-1	PFIZER\BIONTECH	AFRICAN TRYPANOSOMIASIS	"very tired; had the feeling of acid in my mouth; 1-month-old female patient received; Sleeping sickness; Vomiting; Feeling unwell/being sick and feeling sick/still feel icky; This is a spontaneous report. A contactable healthcare professional reported that a 1-month-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, lot number: EE8493), via an unspecified route of administration on 10Jan2021 at single dose for COVID-19 immunisation. The patient medical history was not reported. Concomitant medication included diazepam (DIAZEPAN) for anxiety, lithium for bipolar disorder and zopiclone for sleep loss. The patient stated on 10Jan2021, ""a few hours after the jab I started feeling unwell and had the feeling of acid in my mouth about 4 hrs later I was being sick and feeling sick, this went on and off till the following day, stopped being sick at around 11: 30 pm on the 11th, but continued to feel sick and still do now, however I'm able to work just taking my time, I am very tired and still feel icky"". Vomiting and sleeping sickness was also reported on 10Jan2021. Patient has not tested positive for COVID-19 since having the vaccine. Patient has not had symptoms associated with COVID-19. Patient is not enrolled in clinical trial. The outcome of ""feeling unwell/being sick and feeling sick/still feel icky"" was not recovered, vomiting was recovering and other events was unknown. No follow-up attempts are possible. No further information expected."
1250350-1	PFIZER\BIONTECH	AFRICAN TRYPANOSOMIASIS	Mild fever Sleeping; stomach cramps; nausea; Mild fever Sleeping; Diarrhoea; This is a spontaneous report from a contactable other hcp received from the Regulatory Authority. The regulatory authority report number is GB-MHRA-WEBCOVID-202101291156382120,Safety Report Unique Identifier GB-MHRA-ADR 24666319. A 45-year-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection, Lot Number: ee8492), via an unspecified route of administration on 31Dec2020 at single dose for COVID-19 immunization. Medical history included multiple sclerosis for which she was taking unspecified medicines, lymphopenia from an unknown date and unknown if ongoing. Also taking Gabapentin and high dose Vitamin D. Patient has not had symptoms associated with COVID-19. Not had a COVID-19 test. Patient was not enrolled in clinical trial. Concomitant medications included dimethyl fumarate (TECFIDERA) taken for multiple sclerosis from 31Dec2020 to an unspecified stop date; gabapentin taken for an unspecified indication, vitamin D NOS taken for an unspecified indication. On an unspecified date, the patient experienced stomach cramps, nausea, mild fever sleeping, mild fever sleeping and diarrhoea on 01Jan2021. As per the case narrative, unable to keep warm (24hrs post vaccine) mild fever sleeping nausea and stomach cramps (36hrs post vaccine). Patient has not tested positive for COVID-19 since having the vaccine. The Outcome of the event diarrhoea was recovered and rest events outcome was unknown. No follow-up attempts are possible. No further information is expected.
1538592-1	PFIZER\BIONTECH	AFRICAN TRYPANOSOMIASIS	Sleeping sickness; Fever; Sleep unwell; Rash; Headache; This is a spontaneous report from a contactable consumer received from the regulatory authority report number is GB-MHRA-WEBCOVID-202107261536104970-67TJQ, Safety Report Unique Identifier GB-MHRA-ADR 25708411. A 30-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration at single dose on 16Jul2021 for COVID-19 immunisation. Medical history included lactation decreased, suspected COVID-19 (unsure when symptoms started and unsure when symptoms stopped), immunodeficiency (had an illness or condition, not listed above, which reduces the immune response). Patient had not had a COVID-19 test. Patient was not pregnant and was not currently breastfeeding. Patient was not enrolled in clinical trial. The patient's concomitant medications were not reported. The patient experienced sleeping sickness, fever, sleep unwell, rash and headache on 18Jul2021. The case was reported as serious (medically significant). Outcome of fever was recovered with sequel on 22Jul2021, of sleep unwell was recovered on 22Jul2021, of rash was not recovered, of sleeping sickness and headache was recovered on 24Jul2021. Patient had not tested positive for COVID-19 since having the vaccine. No follow-up attempts are possible, Information about lot/batch number cannot be obtained. No further information is expected.

0961967-1	PFIZER/BIONTECH	AFRICAN TRYPANOSOMIASIS	feeling of acid in my mouth about 4 hrs later I was being sick and feeling sick, this went on and off till the following day, stopped being sick at around 11: 30 pm on the 11th, but continued to feel sick and still do now, however I'm able to work just taking my time, I am very tired and still feel icky". Vomiting and sleeping sickness was also reported on 10Jan2021. Patient has not tested positive for COVID-19 since having the vaccine. Patient has not had symptoms associated with COVID-19. Patient is not enrolled in clinical trial. The outcome of "feeling unwell/being sick and feeling sick/still feel icky" was not recovered, vomiting was recovering and other events was unknown. No follow-up attempts are possible. No further information expected."
1250350-1	PFIZER/BIONTECH	AFRICAN TRYPANOSOMIASIS	Mild fever Sleeping; stomach cramps; nausea; Mild fever Sleeping; Diarrhoea; This is a spontaneous report from a contactable other hcp received from the Regulatory Authority. The regulatory authority report number is GB-MHRA-WEBCOVID-202101291156382120, Safety Report Unique Identifier GB-MHRA-ADR 24666319. A 45-year-old female patient received BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE, Solution for injection, Lot Number: ee8492), via an unspecified route of administration on 31Dec2020 at single dose for COVID-19 immunization. Medical history included multiple sclerosis for which she was taking unspecified medicines, lymphopenia from an unknown date and unknown if ongoing. Also taking Gabapentin and high dose Vitamin D. Patient has not had symptoms associated with COVID-19. Not had a COVID-19 test. Patient was not enrolled in clinical trial. Concomitant medications included dimethyl fumarate (TECFIDERA) taken for multiple sclerosis from 31Dec2020 to an unspecified stop date; gabapentin taken for an unspecified indication, vitamin D NOS taken for an unspecified indication. On an unspecified date, the patient experienced stomach cramps, nausea, mild fever sleeping, mild fever sleeping and diarrhoea on 01Jan2021. As per the case narrative, unable to keep warm (24hrs post vaccine) mild fever sleeping nausea and stomach cramps (36hrs post vaccine). Patient has not tested positive for COVID-19 since having the vaccine. The Outcome of the event diarrhoea was recovered and rest events outcome was unknown. No follow-up attempts are possible. No further information is expected.
			Sleeping sickness; Fever; Sleep unwell; Rash; Headache; This is a spontaneous report from a contactable consumer received from the regulatory authority report number is GB-MHRA-WEBCOVID-202107261536104970-67TJQ, Safety Report Unique Identifier GB-MHRA-ADR 25708411. A 30-year-old female patient received first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration at single dose on 16Jul2021 for COVID-19 immunisation. Medical history included lactation decreased, suspected COVID-19 (unclear when symptoms started and unclear when symptoms

The Parasites

The recommended temperature range for storage and transportation of Pfizer's chimera is $-70^{\circ}\text{C}\pm 10^{\circ}\text{C}$ and the maximum room temperature storage time is indicated as being no more than 6 hours.

Source : https://www.pfizer.com/.../covid_19_vaccine_u_s_distribution_fact_sheet

Source : <https://www.cdc.gov/.../pfizer/downloads/storage-summary.pdf>

Source : https://healthjusticeinitiative.org.za/.../OCRPfizer-1_Redacted.pdf

Trypanosoma samples are cryogenically preserved for laboratory storage and transportation in a temperature range of -80°C to -60°C and seem to remain viable at room temperature for up to 6 hours.

Source : <https://www.intechopen.com/chapters/52895>

Source : <https://www.researchgate.net/publication/285417680...>

In the 31 years that the VAERS database existed prior to the introduction of the COVID vaccines, there were 2 reports of trypanosomiasis (African Sleeping Sickness) post-vaccination. Three years later this has risen to 18. This is a staggering 120-fold (or 12,000%) increase in reporting frequency over the previous 31 years. 2 of the 16 COVID vaccine-related reports included confirmed myocarditis diagnoses, and all involve the Pfizer chimera.

Vaccine Type ↓	Vaccine Manufacturer	Symptoms	→ Events Reported ↑↓	← Percent (of 18) ↑↓
COVID19 VACCINE (COVID19)	PFIZERIBIONTECH	AFRICAN TRYPANOSOMIASIS	13	72.22%
COVID19 VACCINE (COVID19)	PFIZERIBIONTECH	AMERICAN TRYPANOSOMIASIS	3	16.67%
COVID19 VACCINE (COVID19)	PFIZERIBIONTECH	Total	16	88.89%
COVID19 VACCINE (COVID19)	Total		16	88.89%
INFLUENZA VIRUS VACCINE, NO BRAND NAME (FLUX(SEASONAL))	UNKNOWN MANUFACTURER	AFRICAN TRYPANOSOMIASIS	1	5.56%
INFLUENZA VIRUS VACCINE, NO BRAND NAME (FLUX(SEASONAL))	UNKNOWN MANUFACTURER	Total	1	5.56%
INFLUENZA VIRUS VACCINE, NO BRAND NAME (FLUX(SEASONAL))	Total		1	5.56%
UNKNOWN VACCINES (UNK)	UNKNOWN MANUFACTURER	AMERICAN TRYPANOSOMIASIS	1	5.56%
UNKNOWN VACCINES (UNK)	UNKNOWN MANUFACTURER	Total	1	5.56%
UNKNOWN VACCINES (UNK)	Total		1	5.56%
Total			18	100.00%

<https://wonder.cdc.gov/controller/saved/D8/D353F295>

– Perfectum Venenum (August, 2023)

The mainstream media have been pushing stories about potential outbreaks of Chagas disease (*Trypanosoma cruzi*) for several months already.

“Texas is now engaged in a major conflict with Covid-19. However, it will not be the only sickness the state will have to cope with within 2021. The state also faces a possible outbreak of Chagas Disease.”

Source : <https://www.natureworldnews.com/articles/47211/20210825/chagas-disease-texas-faces-new-deadly-outbreak-amidst-covid-pandemic.htm>

There has been some recent media reporting around snake venom as possible source of compounds for treating “COVID”. There’s similar research looking at scorpion venom as a treatment for Chagas. This makes sense if we’re dealing with a living parasite, against which these complex enzymes are effective.

Like Venom Coursing Through the Body: Researchers Identify Mechanism Driving COVID-19 Mortality

Researchers have identified what may be the key molecular mechanism responsible for COVID-19 mortality – an enzyme related to **neurotoxins found in rattlesnake venom.**

By Rosemary Brandt, College of Agriculture and Life Sciences

Aug. 24, 2021

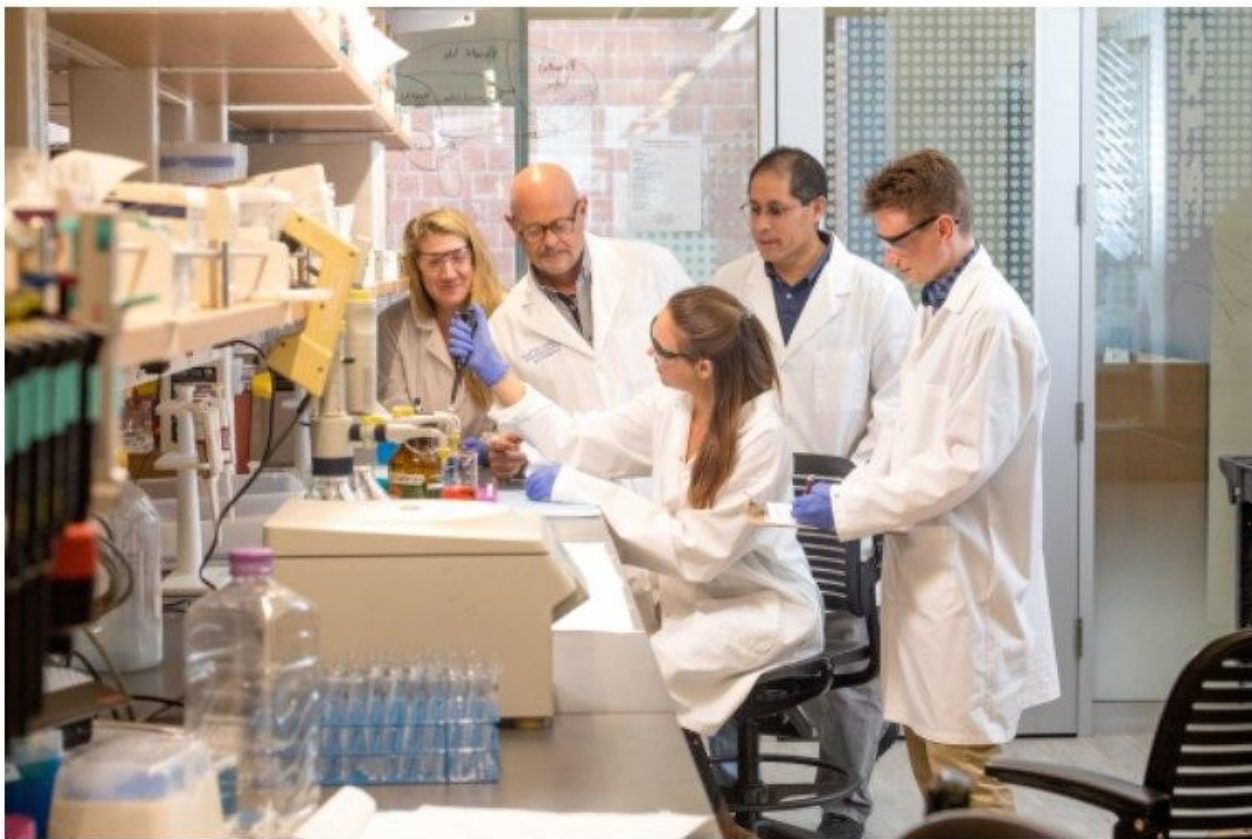
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[source](#)

REVISED Toxin-like peptides in plasma, urine and faecal samples from COVID-19 patients [version 2; peer review: 2 approved]

Carlo Brogna ^{1*}, Simone Cristoni^{2*}, Mauro Petrillo ^{3*}, Maddalena Querci³, Ornella Piazza ⁴, Guy Van den Eede⁵

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* Equal contributors

v2 First published: 08 Jul 2021, 10:550
<https://doi.org/10.12688/f1000research.54306.1>

Latest published: 14 Oct 2021, 10:550
<https://doi.org/10.12688/f1000research.54306.2>

Abstract

Background: SARS-CoV-2 that causes COVID-19 disease and led to the pandemic currently affecting the world has been broadly investigated. Different studies have been performed to understand the infection mechanism, and the involved human genes, transcripts and proteins. In parallel, numerous clinical extra-pulmonary manifestations co-occurring with COVID-19 disease have been reported and evidence of their severity and persistence is increasing. Whether these manifestations are linked to other disorders co-occurring with SARS-CoV-2 infection, is under discussion. In this work, we report the identification of toxin-like peptides in COVID-19 patients by application of the Liquid Chromatography Surface-Activated Chemical Ionization – Cloud Ion Mobility Mass Spectrometry.

Methods: Plasma, urine and faecal samples from COVID-19 patients and control individuals were analysed to study peptidomic toxins' profiles. Protein precipitation preparation procedure was used for plasma, to remove high molecular weight proteins and efficiently solubilize the peptide fraction; in the case of faeces and urine, direct peptide solubilization was employed.

[source](#)

Dr. Brian Ardis gave this interview with Stew Peters on 11 April 2022, wherein he describes the numerous links between COVID, snake venom, remdesivir, the 'vaccines' and the banned therapies.

This may also explain the effectiveness of the anti-parasitic drug Ivermectin, which has demonstrated promising results as a possible treatment for both *Trypanosoma brucei* and *Trypanosoma cruzi*.

Open Peer Review

Reviewer Status  

Invited Reviewers

	1	2
version 2 (revision) 14 Oct 2021	 report	 report
version 1 08 Jul 2021	  report	  report

1. **Paolo Grumati**, Telethon Institute of Genetics and Medicine (TIGEM), Pozzuoli, Italy
2. **Moshe Arditi**, Cedars-Sinai Medical Center, Los Angeles, USA

Any reports and responses or comments on the article can be found at the end of the article.

The Mayo Clinic list symptoms of Chagas Disease (*T. cruzi*) as swelling at the infection site*, *fever**, *fatigue**, *rash**, *body aches**, *eyelid swelling*, *headache**, loss of appetite, *nausea**, *diarrhoea* or *vomiting**, swollen glands, enlargement of your liver or spleen, irregular heartbeat*, heart failure, sudden cardiac arrest, *difficulty swallowing** due to enlarged oesophagus and stomach pain or constipation due to enlarged colon.

The World Health Organization describe the symptoms of African Sleeping Sickness (*T. brucei*) as *fever**, *headaches**, enlarged lymph nodes, *joint pains**, itching, *changes of behaviour*, *confusion*, *sensory disturbances**, poor coordination* and *disturbance of the sleep cycle*.

Symptoms above which are consistent with those of “COVID-19” (as published by the CDC and WHO) are in *italics*. Those marked with an asterisk (*) are listed by the NICD as possible COVID-19 “vaccine” side-effects.

American trypanosomiasis (*T. cruzi*) infection brings with it a 2.3-times higher risk of mortality regarding all causes when compared with uninfected individuals. Without treatment, African trypanosomiasis (*T. brucei*) is invariably fatal, with progressive mental deterioration leading to coma, systemic organ failure, and death.

Visual evidence from multiple sources indicate what appears to be Hydra vulgaris in some of the vaccines. Its anyone’s guess why these freshwater polyps might be in there.





Johnson & Johnson





 **Hydra Vulgaris**

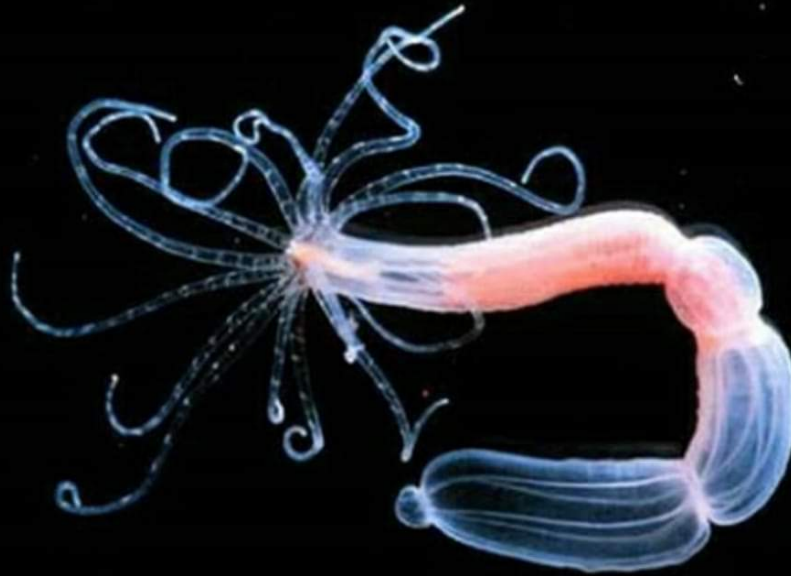


Also known as the freshwater polyps,
can live forever without aging.
Under right circumstances they achieve
biological immortality

 /uetss  /uet ss  /uet ss  /uetss



Hydra Vulgaris



Also known as the freshwater polyps,
can live forever without aging.
Under right circumstances they achieve
biological immortality

f /uetss

🐦 /uet_ss

UET SCIENCE SOCIETY

📷 /uet_ss

📺 /uetss

The Graphene

This video was first posted on 26 November 2021. He was arrested during another livestream roughly a year before. His wife announced his death 28th November, apparently due to respiratory issues. The late Dr. Andreas Noack..

There exists at least one paper espousing the utility of graphene oxide as a “vaccine carrier and adjuvant”, and one patent for these iatrogenic chimeras. Submitted in September 2020:

Nano coronavirus recombinant vaccine taking graphene oxide as carrier

Abstract

The invention belongs to the field of nano materials and biomedicine, and relates to a vaccine, in particular to development of 2019-nCoV coronavirus nuclear recombinant nano vaccine. The invention also comprises a preparation method of the vaccine and application of the vaccine in animal experiments. The new corona vaccine contains graphene oxide, carnosine, CpG and new corona virus RBD; binding carnosine, CpG and neocoronavirus RBD on the backbone of graphene oxide; the CpG coding sequence is shown as SEQ ID NO 1; the novel coronavirus RBD refers to a novel coronavirus protein receptor binding region which can generate a high-titer specific antibody aiming at the RBD in a mouse body, and provides a strong support for prevention and treatment of the novel coronavirus.

CN112220919A

China

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Other languages: [Chinese](#)

Inventor: 崔大祥, 高昂, 梁辉, 田静, 李雪玲, 沈琦

Current Assignee : Shanghai National Engineering Research Center for Nanotechnology Co Ltd

Here we have graphene oxide nanomaterials being employed as a drug delivery platform and cellphone frequencies as the dosing trigger:



“This study focuses on the development of a new electric field responsive graphene oxide (GO) nanoparticle system for on-demand drug delivery... Here, we have demonstrated how to control the drug release rate remotely with a handy mobile phone, with zero passive release at idle time.”

<https://www.sciencedirect.com/science/article/abs/pii/S2468519422002166>

Remotely controlled electro-responsive on-demand nanotherapy based on amine-modified graphene oxide for synergistic dual drug delivery

[D. Sahoo](#)^{a e}  , [T. Mitra](#)^{b e}  , [K. Chakraborty](#)^c, [P. Sarkar](#)^d

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<https://doi.org/10.1016/j.mtchem.2022.100987> 

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Abstract

This study focuses on the development of a new electric field responsive graphene oxide (GO) nanoparticle system for on-demand drug delivery. Today, GO is an attractive option adopted in various biological applications for its exclusive features such as flexibility, conductiveness, cost-effectiveness, and external stimuli-responsive nature. It is usual to utilize

The Metals

Most metals exhibit some form of toxicity when injected, but the potential for harm increases exponentially when a human body, containing magnetic or diamagnetic nanoparticles, is placed in the powerful field produced by Magnetic Resonance Imaging equipment.

URGENT WARNING.

We believe MRI scans are causing serious injuries including paralysis in Covid-19 vaccinated patients. Patients are showing clear signs of having magnetised particles within them post-vaccination.

The hypothesis is that magnetised lipid nanoparticles within the patient migrate under the huge magnetic fields used within an MRI causing damage on a nanoscale equivalent to multiple shrapnel wounds.

Source: <https://www.notonthebeeb.co.uk/post/gp-urgent-warning>

The photo in this tweet is actually of a Canon Aquilion RX CT scanner.



DR AFZAL NIAZ M.D, M.B.B.S (King Edward) ,FRCS
@DRAFZALNIAZ2



I am warning vaxxed individuals to avoid MRI scans, especially for the 1st few weeks, as some people have been severely affected by the electromagnetism it produces.

The most severe cases have resulted in the death of the patients. No one is reporting to VAERS.

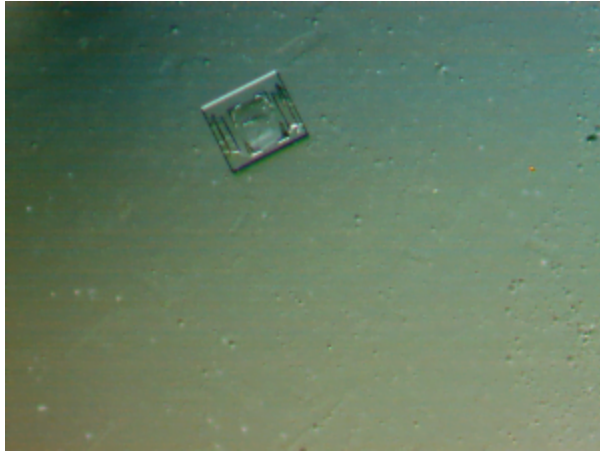


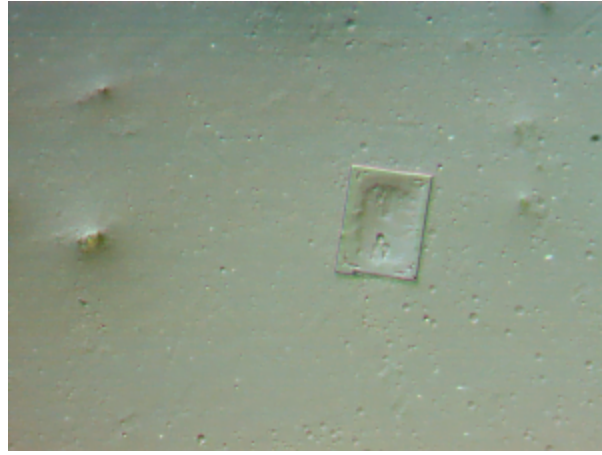
10:30 PM · Sep 22, 2021 · Twitter Web App

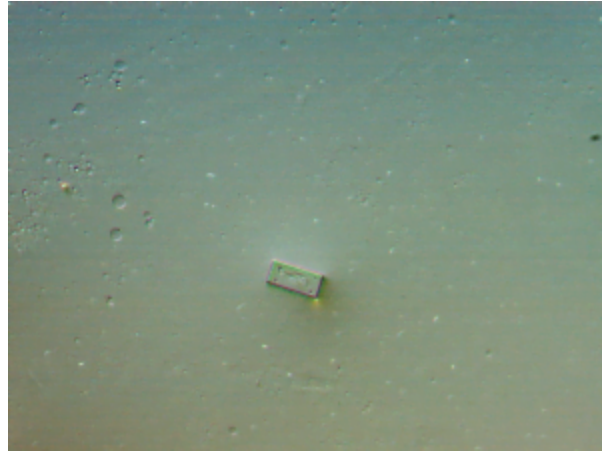
1,449 Retweets 180 Quote Tweets 2,013 Likes

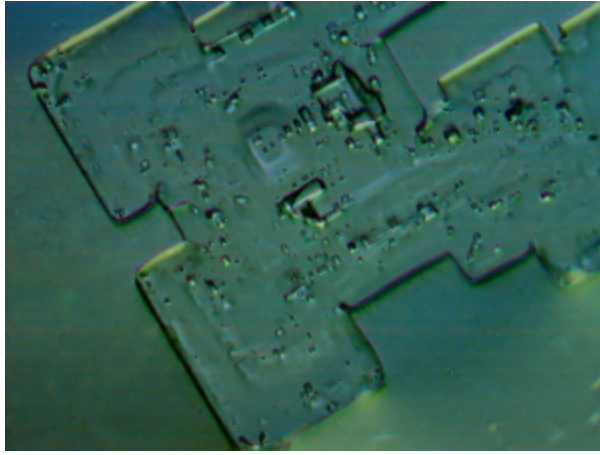
Nanotechnology

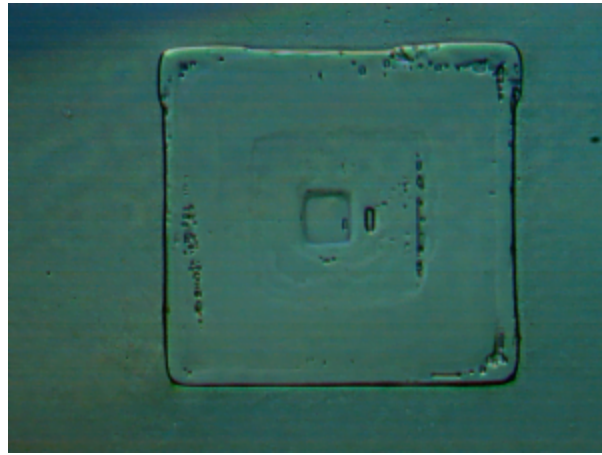
La Quinta Columna have observed and documented what appear to nano-scale digital devices, possibly bluetooth wireless transceivers, in the Pfizer Comirnaty chimera. These may be part of a brain-machine-body interface system involving graphene, wireless nanorouters and an external near-field device such as a smartphone.

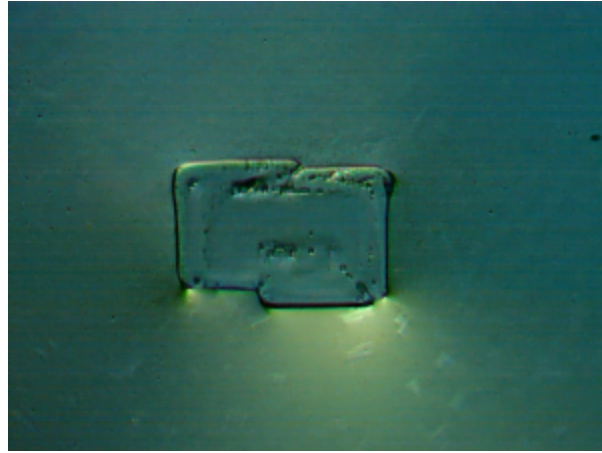


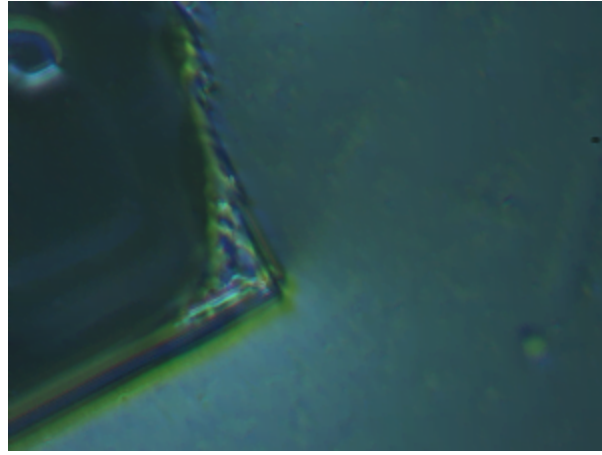


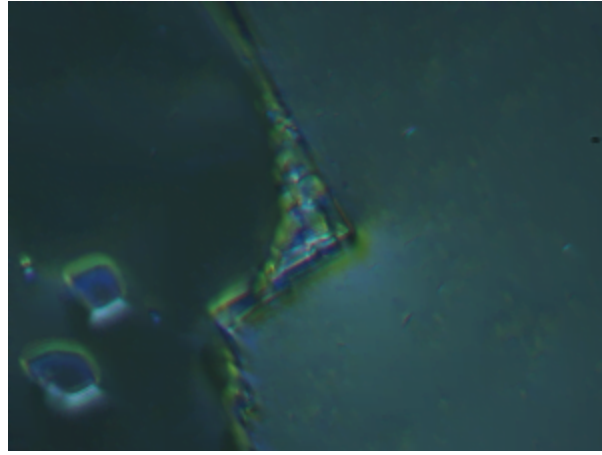


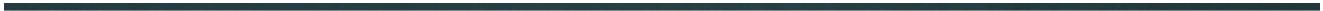
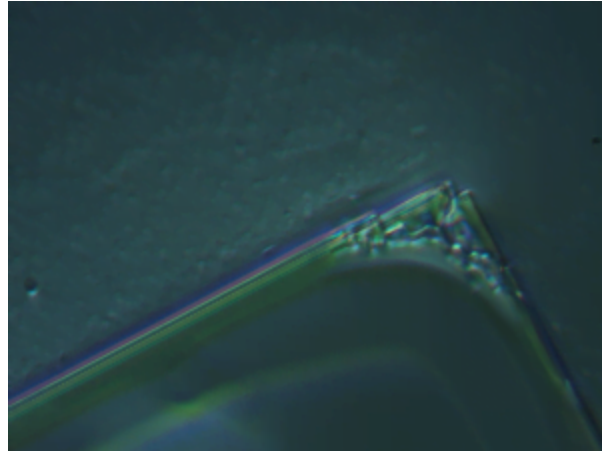


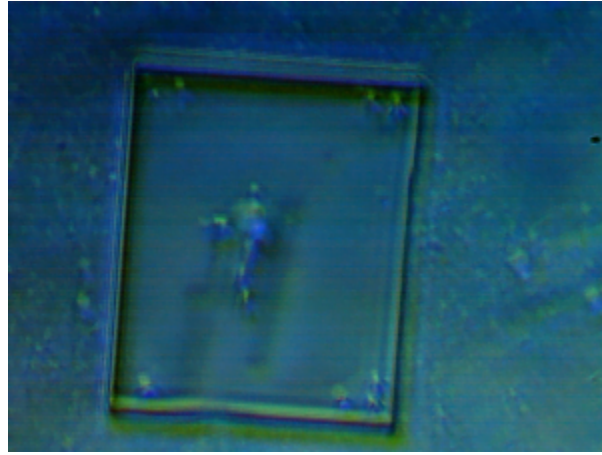


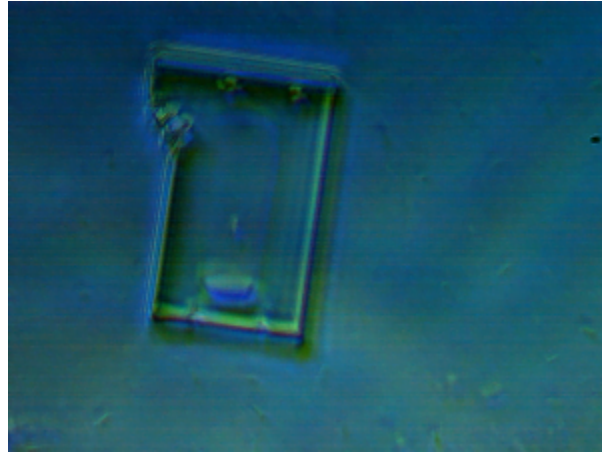


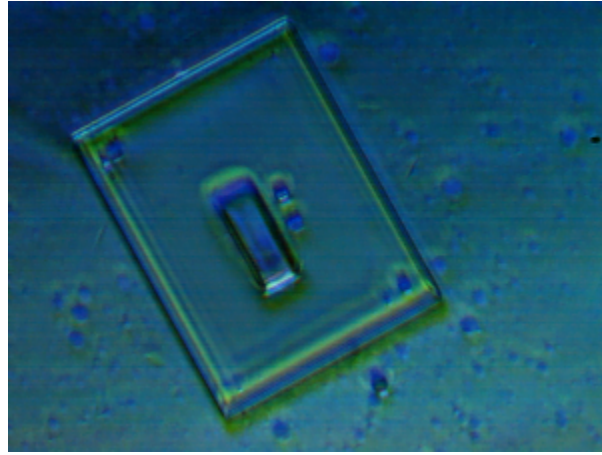










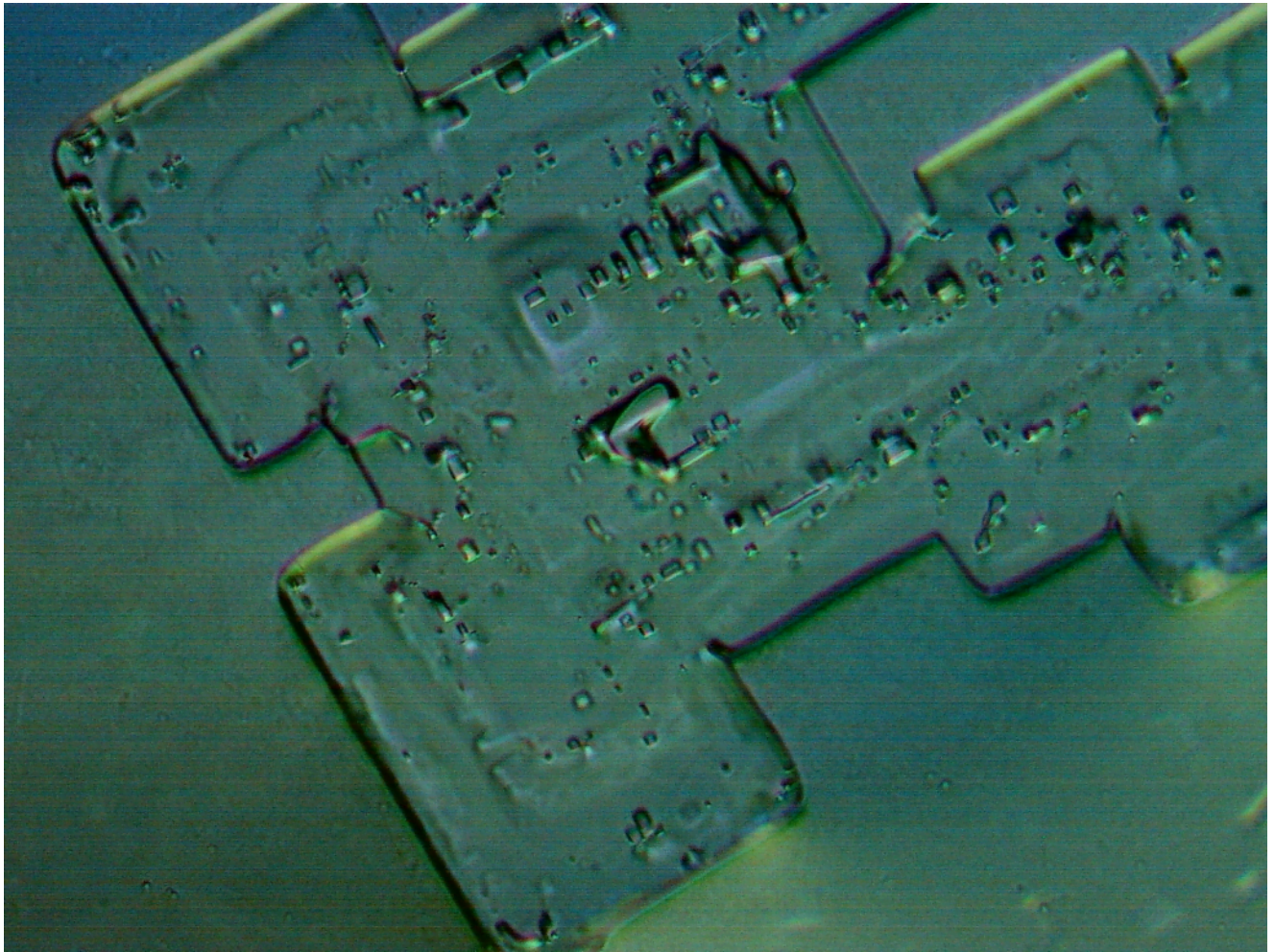


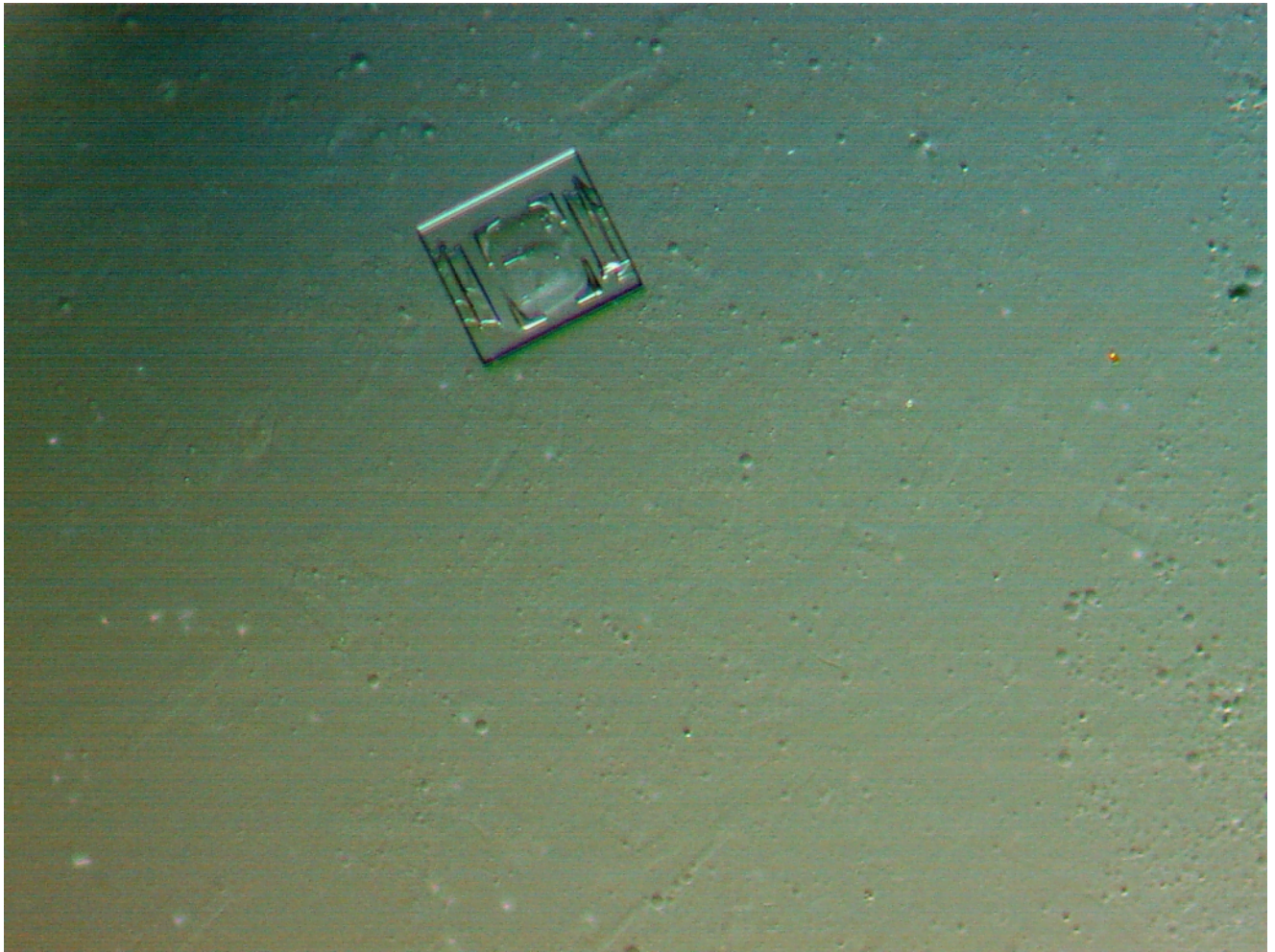


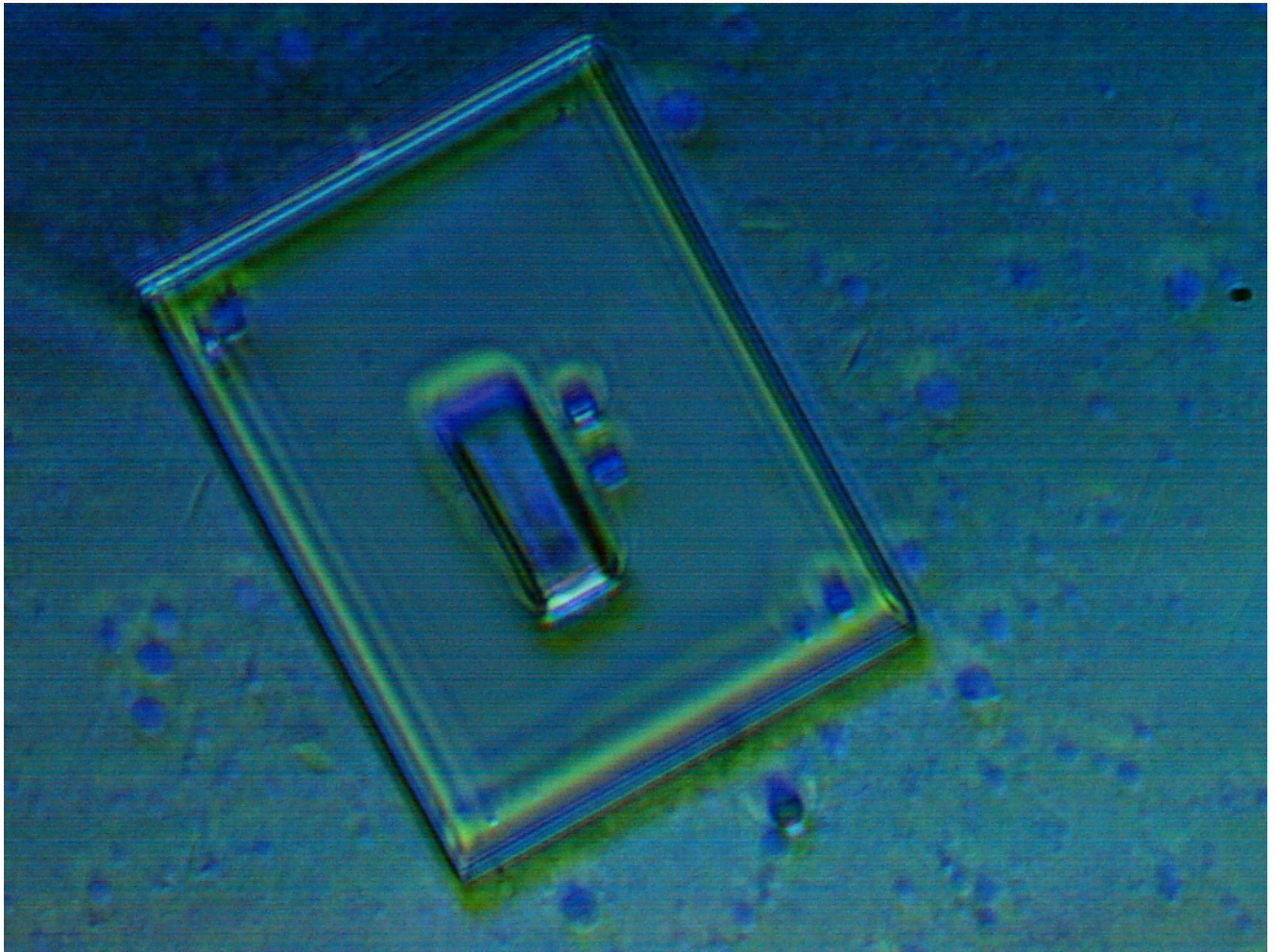


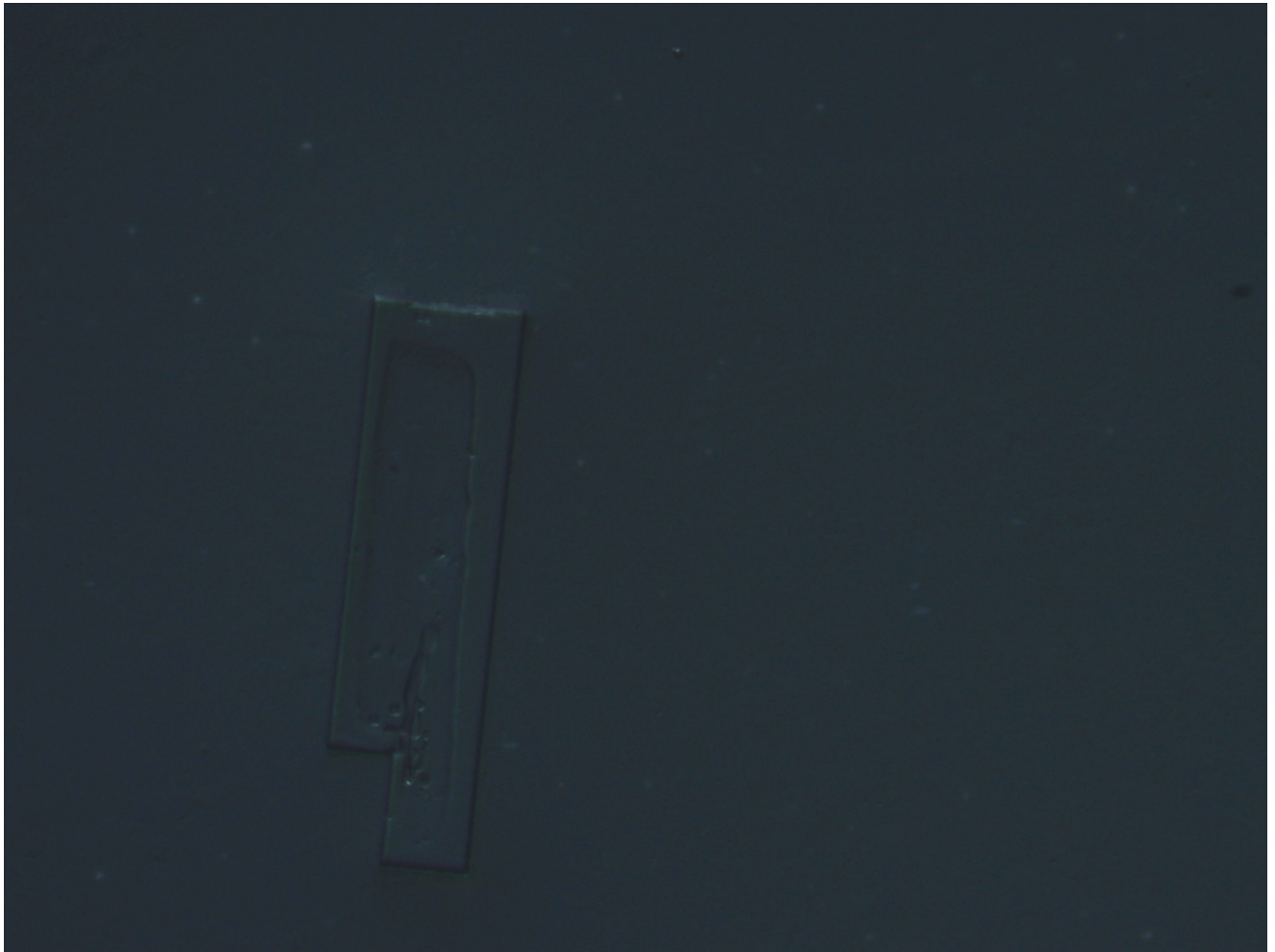


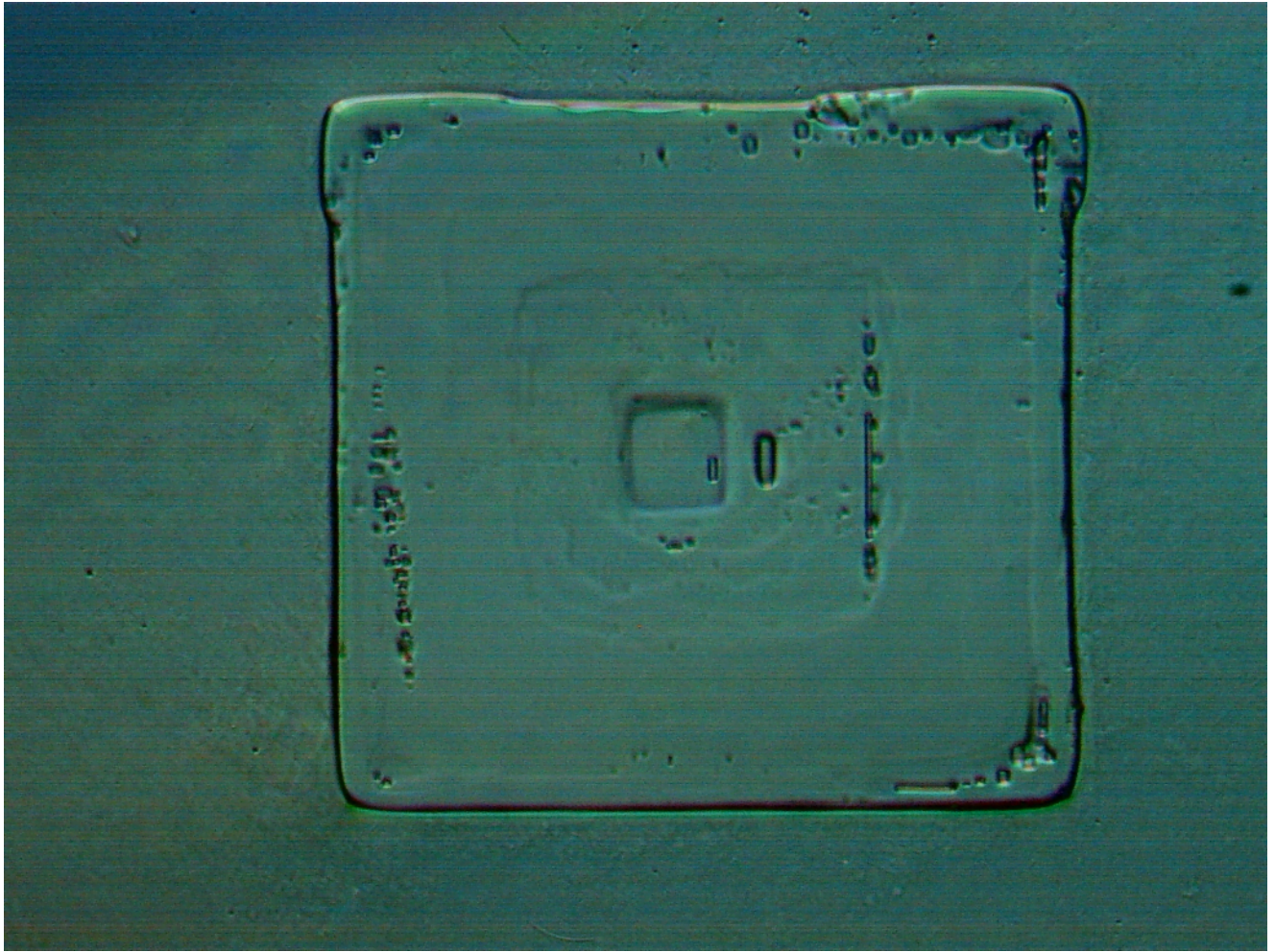
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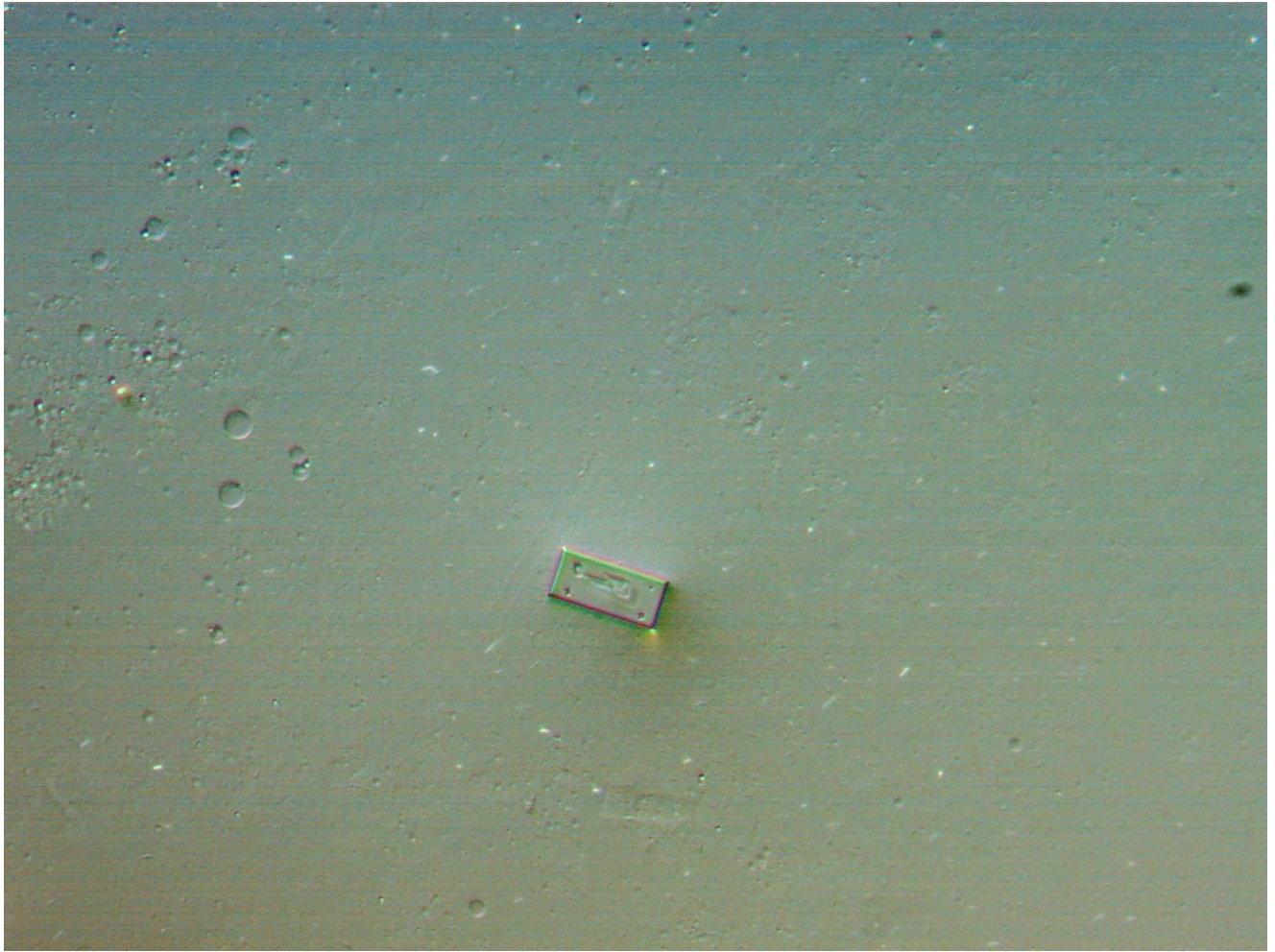


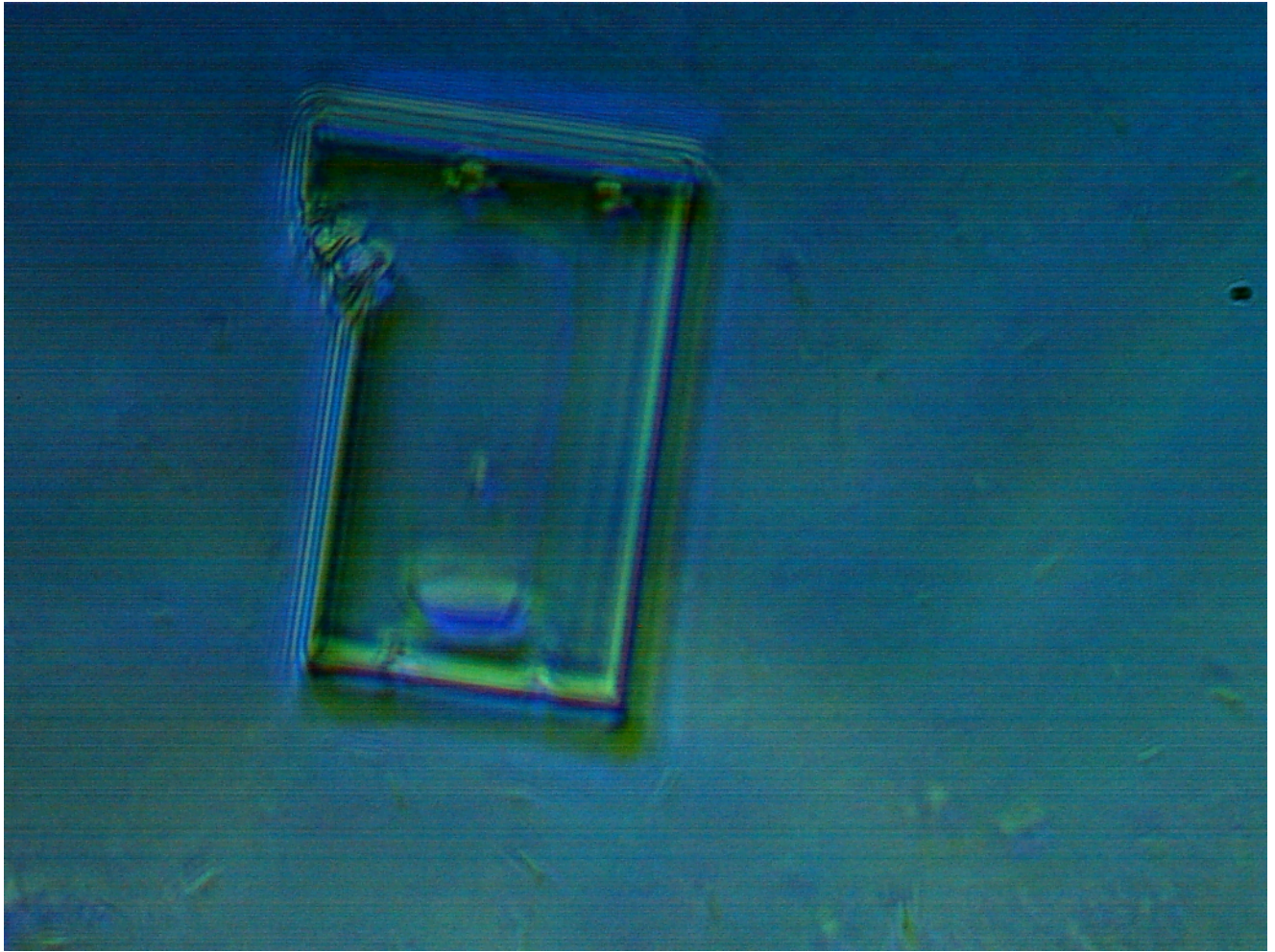


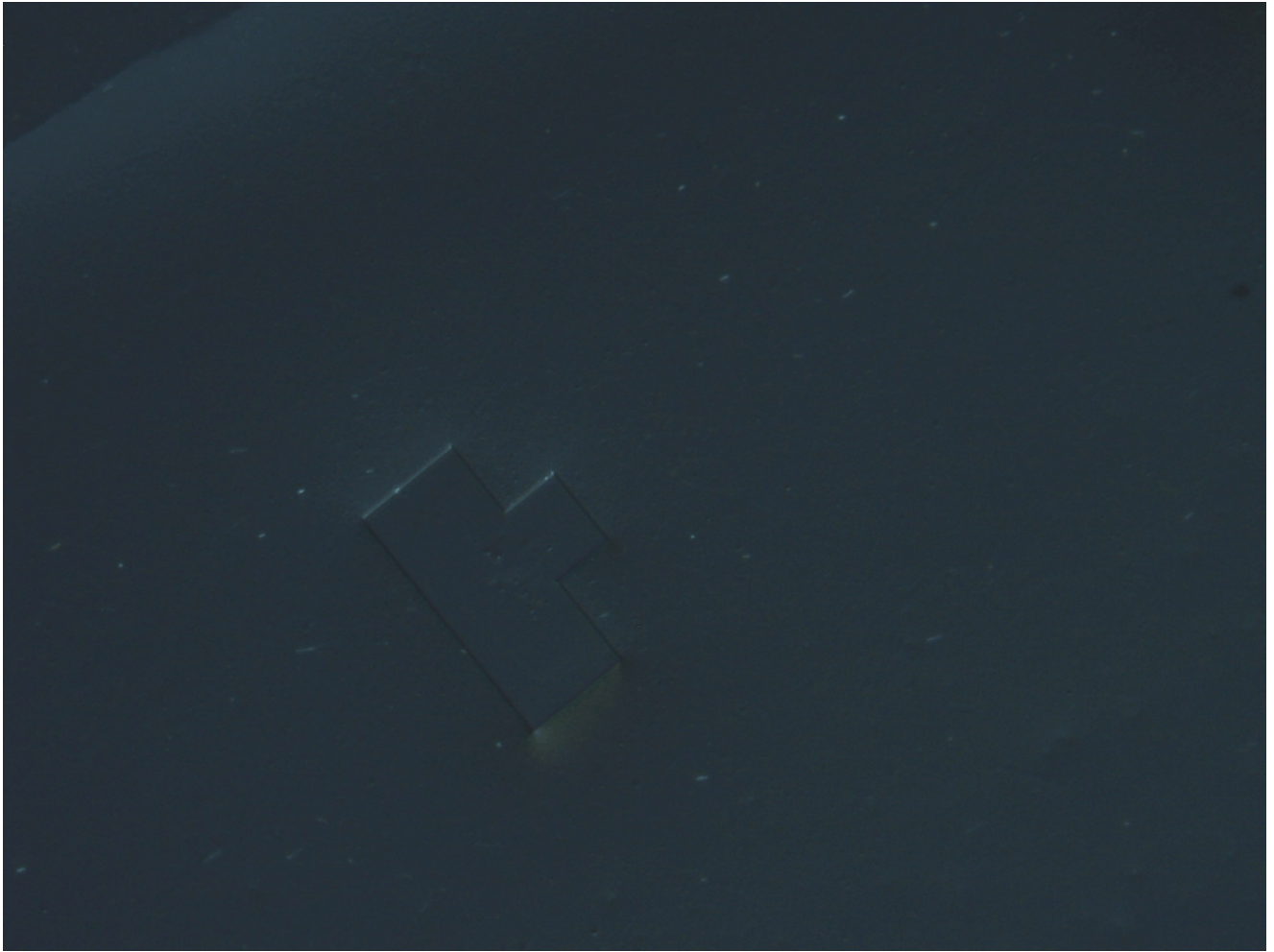


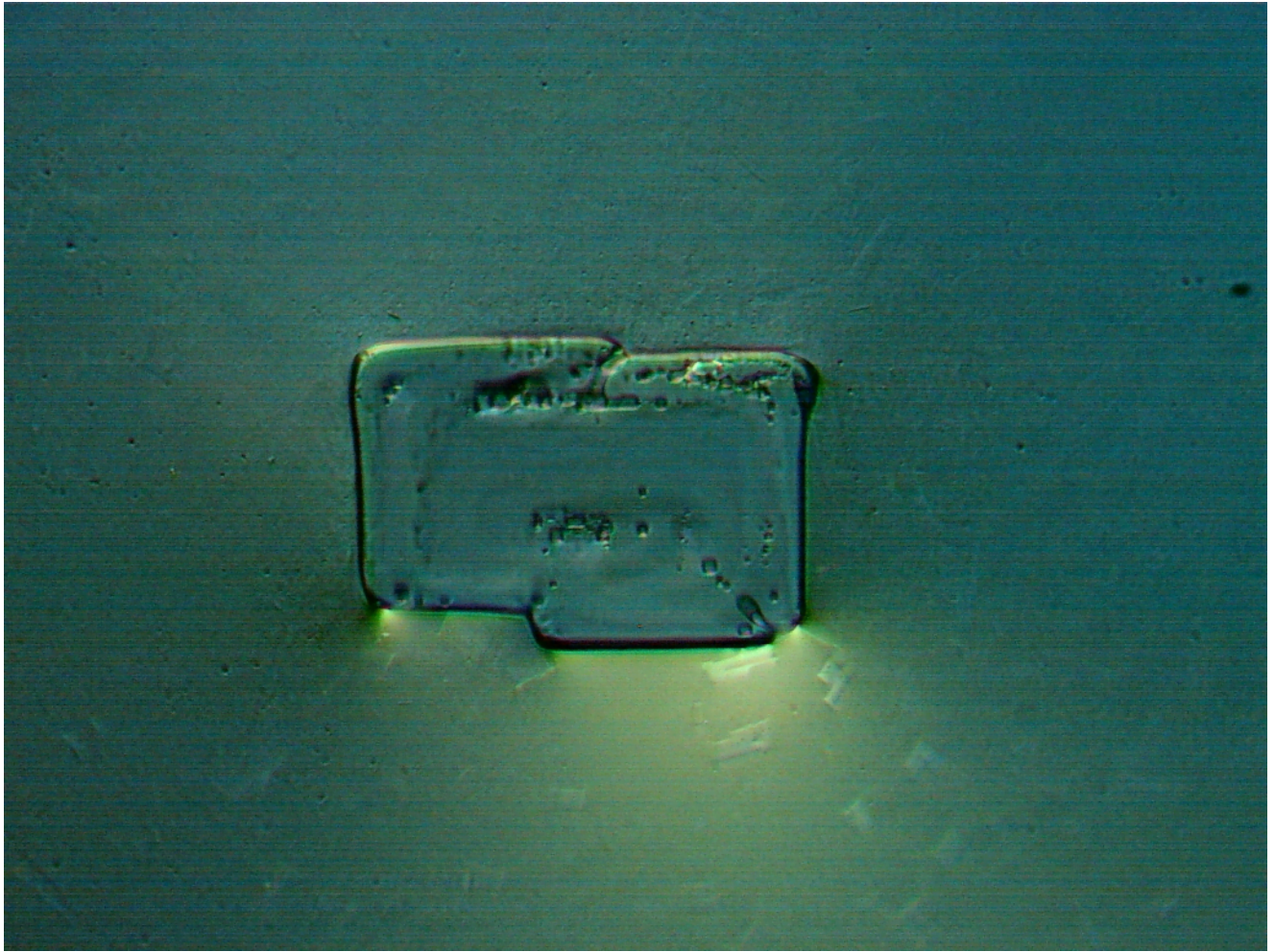


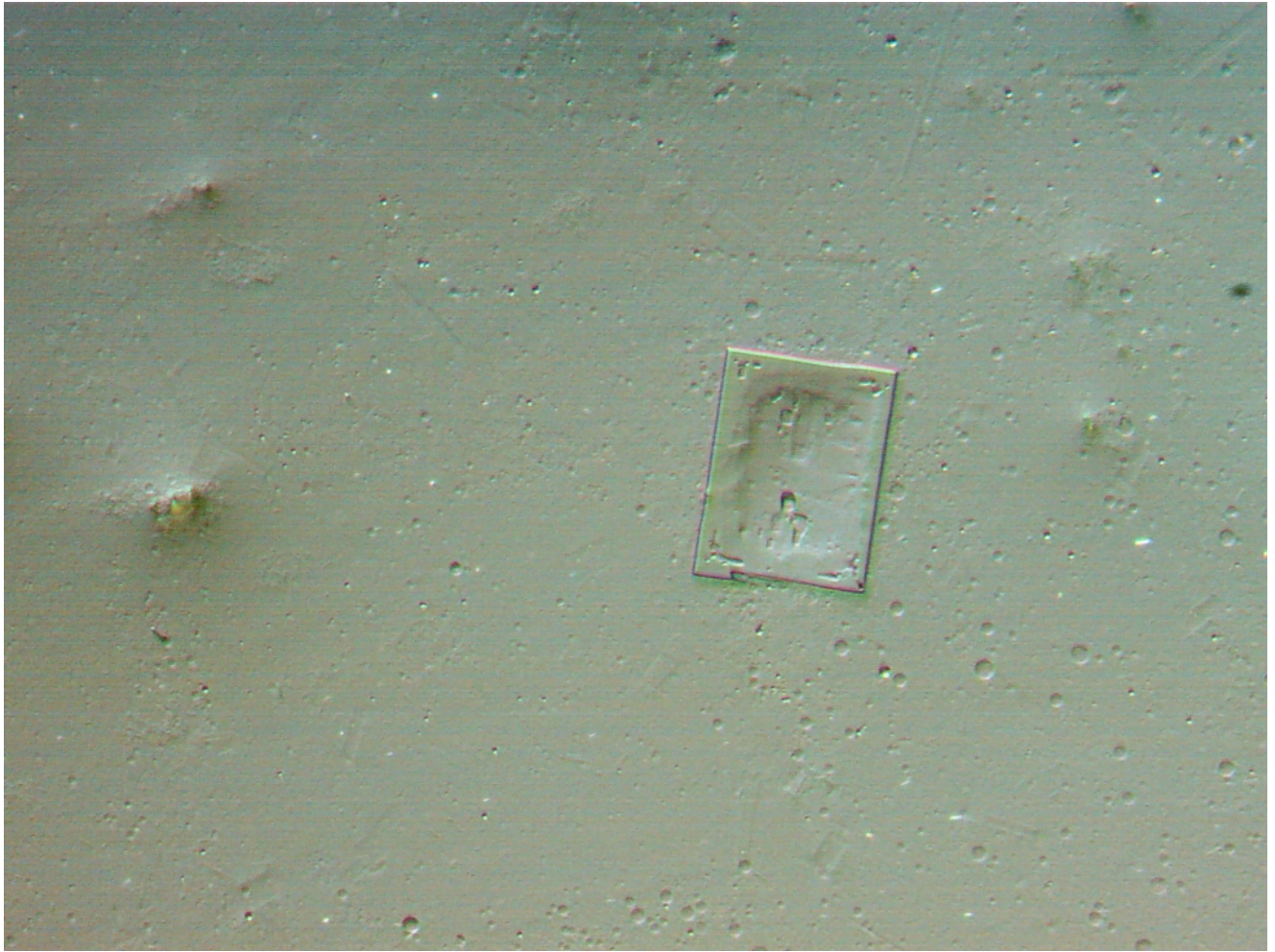


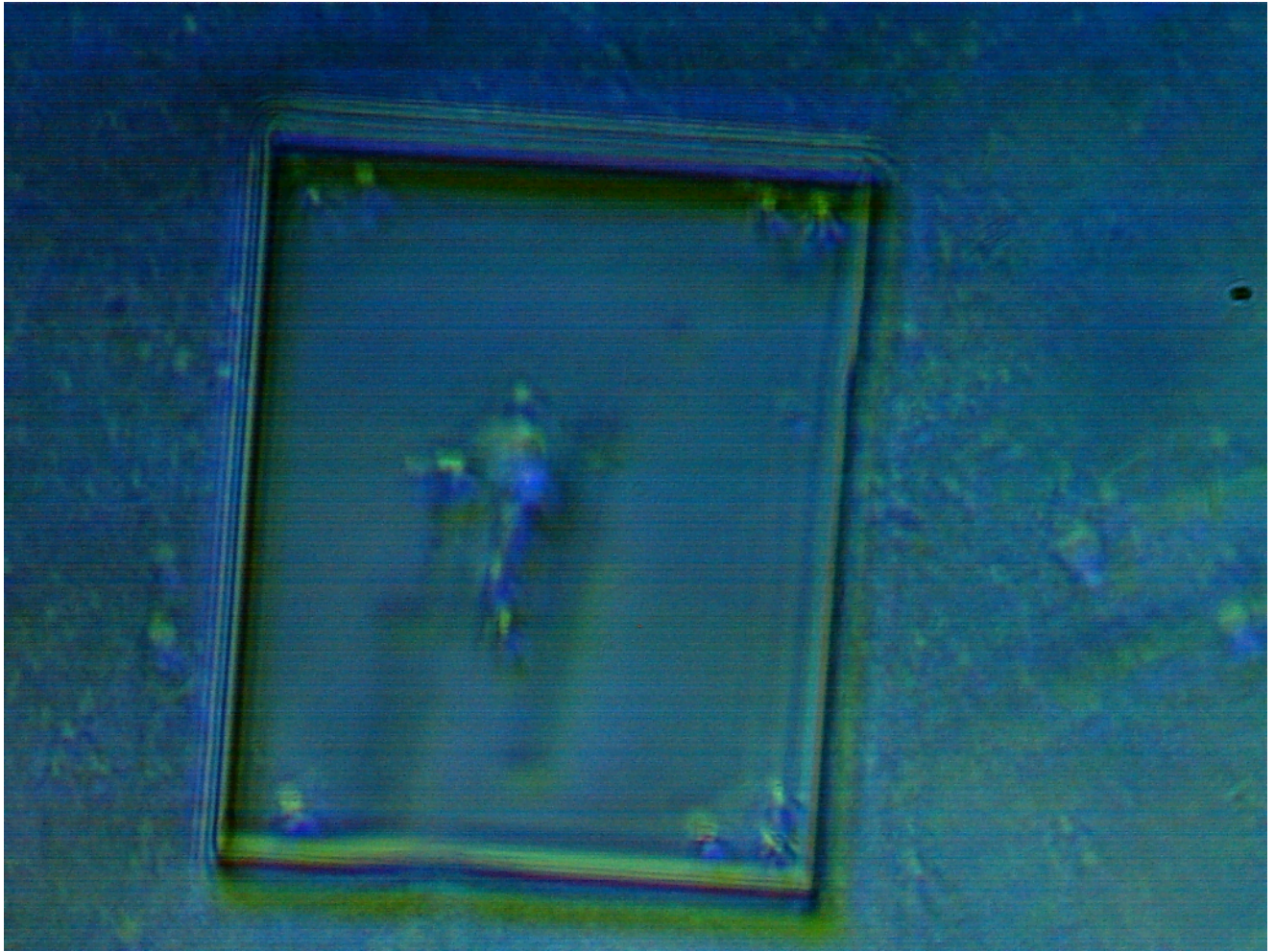














Blood Analysis

The following report was published August 12, 2022:

ABSTRACT: The use of dark-field microscopic analysis of fresh peripheral blood on a slide was once widespread in medicine, allowing a first and immediate assessment of the state of health of the corpuscular components of the blood. In the present study we analyzed with a dark-field optical microscope the peripheral blood drop from 1,006 symptomatic subjects after inoculation with an mRNA injection (Pfizer/BioNTech or Moderna), starting from March 2021. There were 948 subjects (**94% of the total sample**) whose blood showed aggregation of erythrocytes and the presence of **particles of various shapes and sizes of unclear origin** one month after the mRNA inoculation. In 12 subjects, blood was examined with the same method before vaccination, showing a perfectly normal hematological distribution. The alterations found after the inoculation of the mRNA injections further reinforce the suspicion that **the modifications were due to the so-called “vaccines” themselves**. We report 4 clinical cases, chosen as representative of the entire case series. Further studies are needed to define the exact nature of the particles found in the blood and to identify possible solutions to the problems they are evidently causing.

Source: <https://ijvtpr.com/index.php/IJVTPR/article/view/47/80>

A selection of the hundreds of microscopy images published with this report:

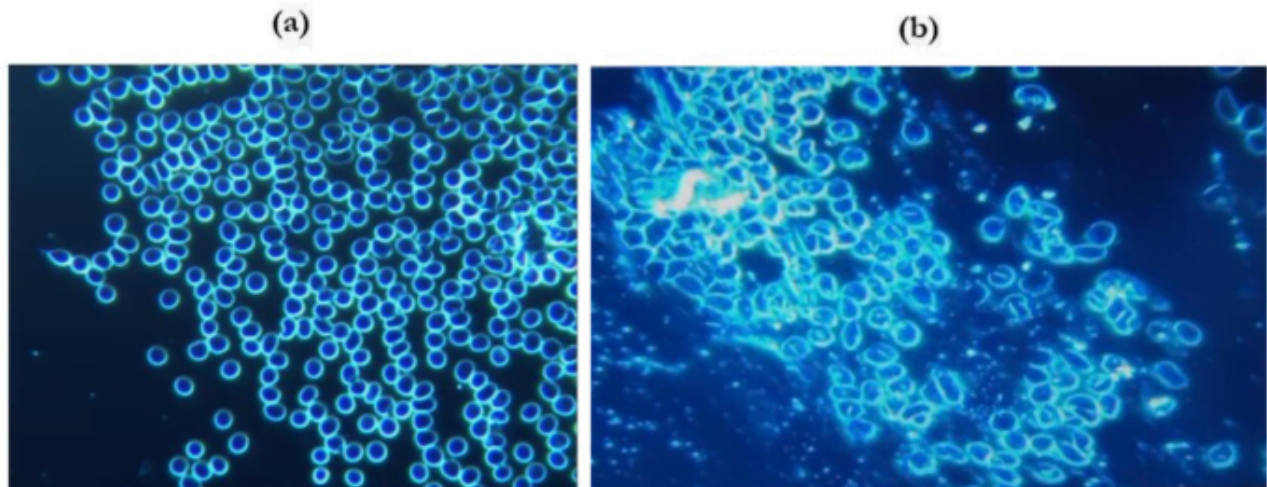


Figure 1. These photos are at 40x magnification. At the left side, (a) shows the blood condition of the patient before the inoculation. The right side image, (b) shows the same person's blood one month after the first dose of Pfizer mRNA "vaccine". Particles can be seen among the red blood cells which are strongly conglobated around the exogenous particles; the agglomeration is believed to reflect a reduction in zeta potential adversely affecting the normal colloidal distribution of erythrocytes as seen at the left. The red blood cells at the right (b) are no longer spherical and are clumping as in coagulation and clotting.

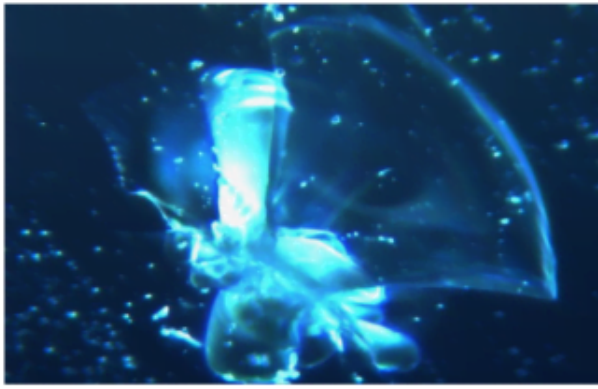


Figure 2. In this case the assembly of particles takes on crystalline features; furthermore, there is an area of close influence, butterfly wings, in the context of which a crystalline type organization occurs.

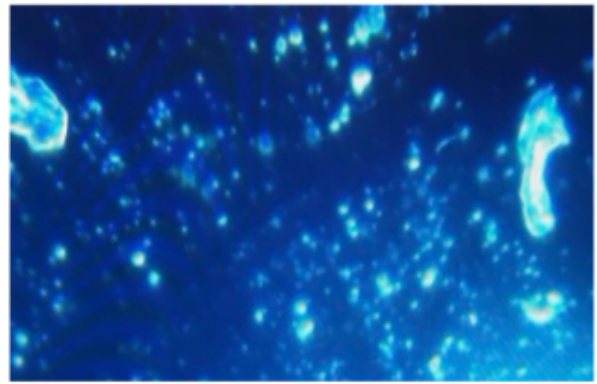


Figure 3. The image at 120x magnification shows two exogenous particles and clusters of fibrin 2 months after vaccination.

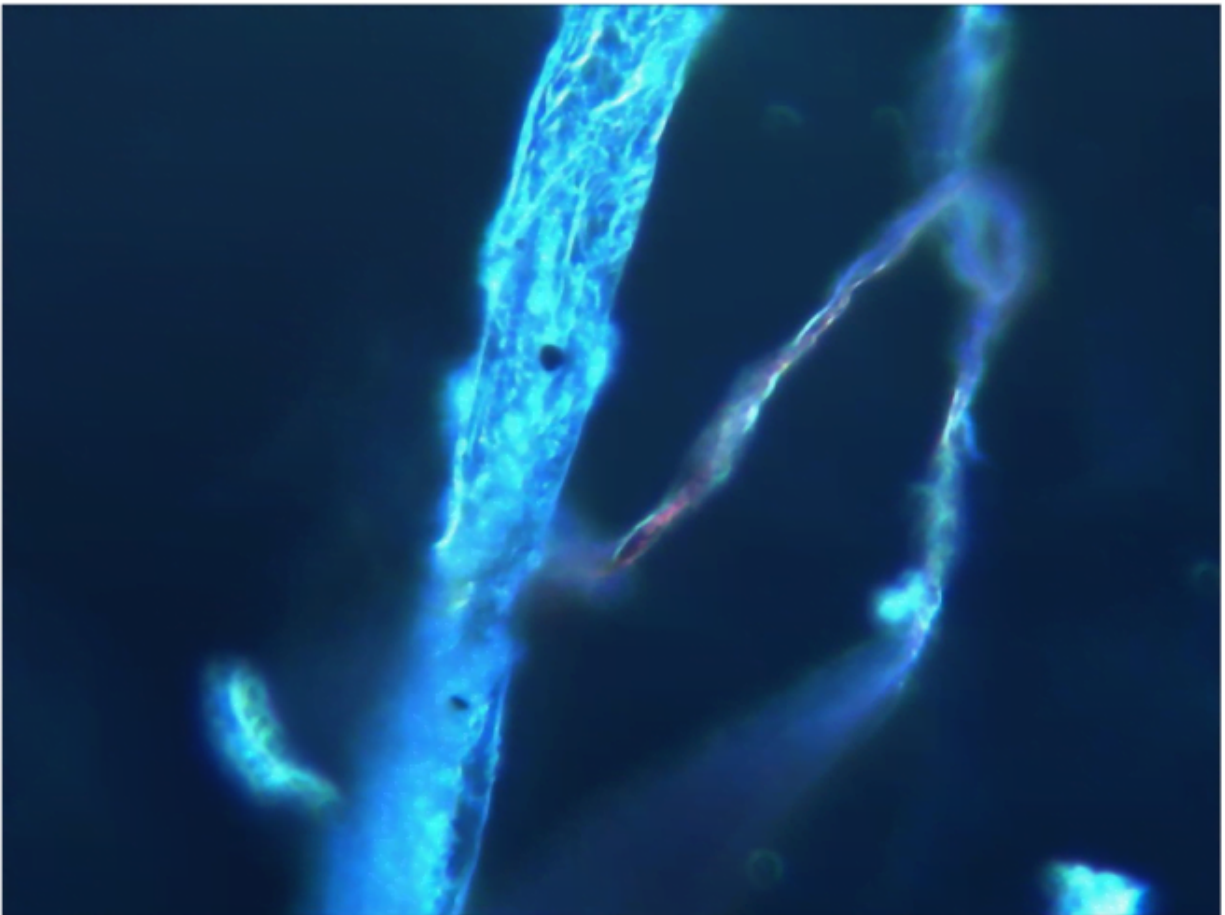


Figure 4. This image at 120x magnification (3x magnification digitally produced) highlights a typical self-aggregating structuring in fibro/tubular mode.

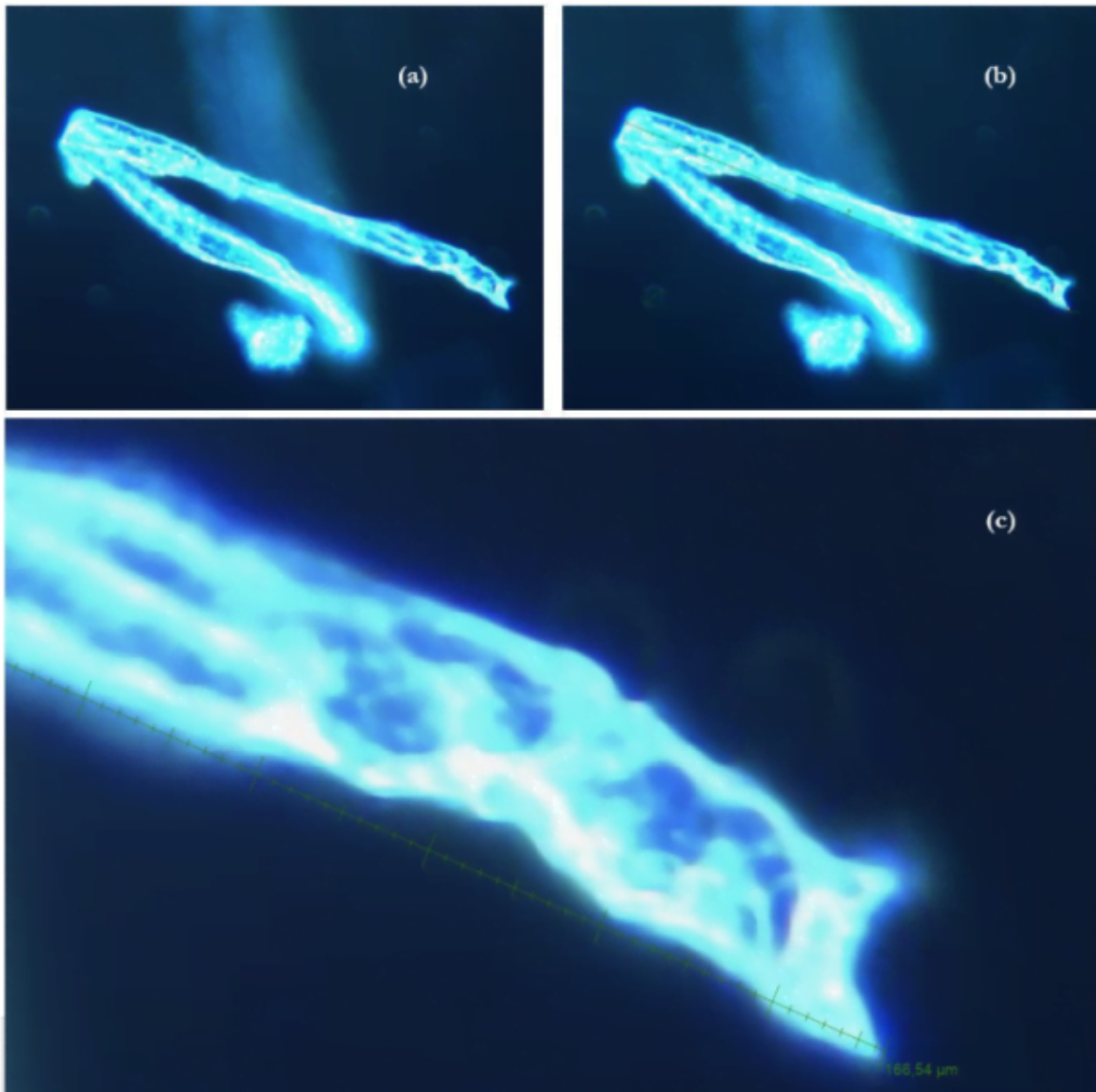


Figure 5. A highly structured fibro-tubular configuration of structures that can coalesce together, reaching dimensions ten times their initial size. In (a) and (b) at 40x magnification, we see what appears to be a laminar linkage. In (c), at 120x magnification (3x magnification digitally produced), there is a composite which is 166.54 μm (DeltaPix Software) in length.

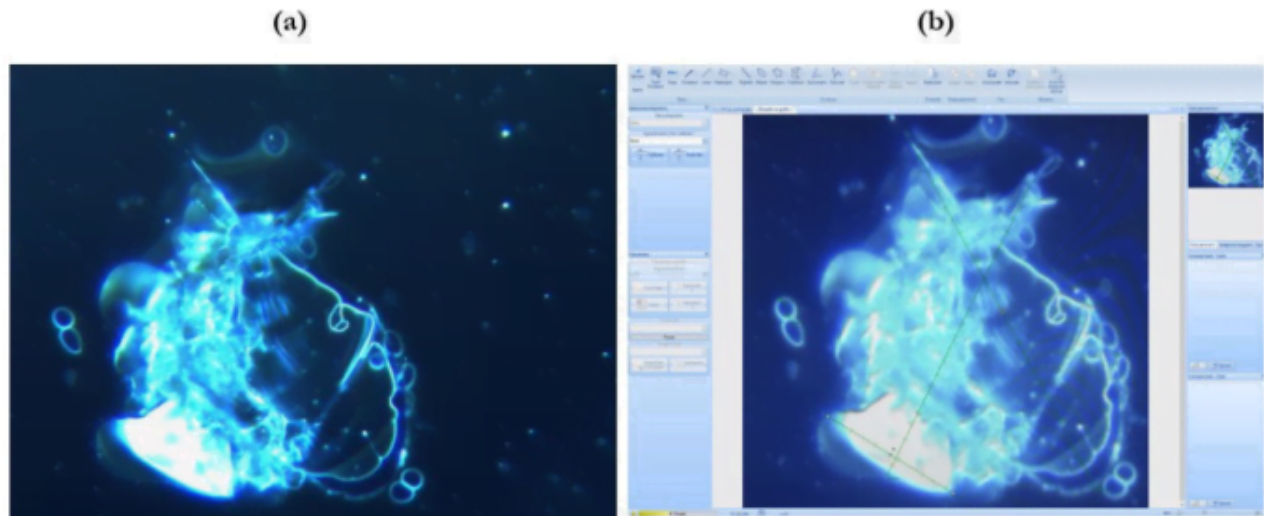


Figure 6. The sharper and larger image on the left seems to suggest the power of the exogenous particles introduced into the blood of mRNA injection recipients to assemble themselves into massive structures: we can see in both (a) and (b) at 120x magnification evidence of what appear to be lamellar configurations similar to agglomerations occurring in a field of forces pulling colloidal particles in the plasma together. The relative bulk of the particle conglobate can be easily estimated by comparison with the erythrocytes at the periphery of the much larger mass. It was also measured accurately at 113.91 μm by 139.99 μm (see the hatch mark green lines in b) using the Delta-Pix Software as shown in the computer screen shot at the right.

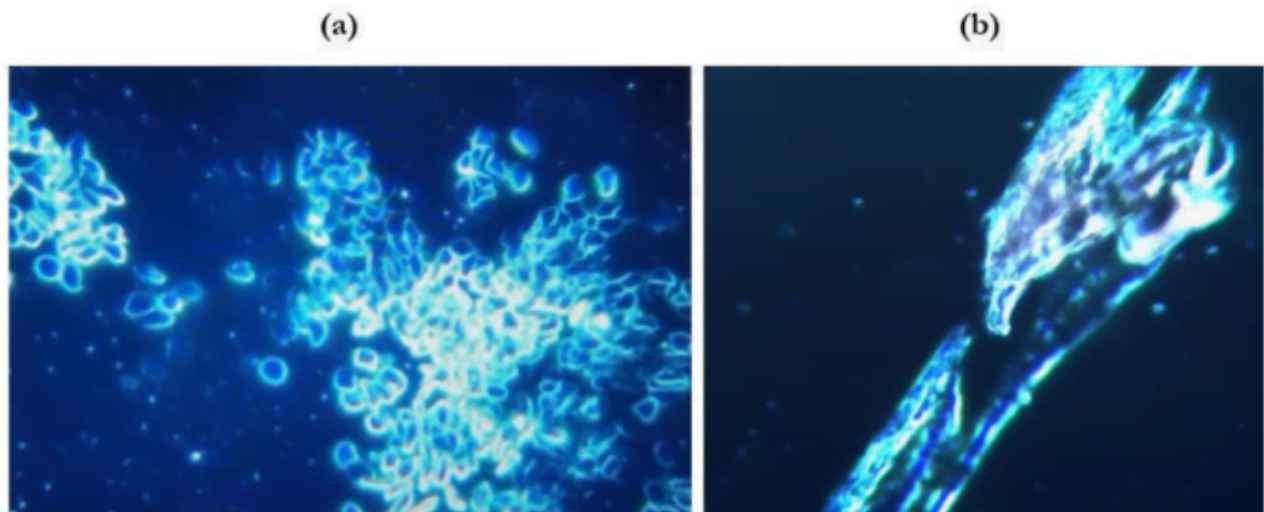


Figure 8. (a) Deformation and erythrocyte aggregation with signs of hemolysis at 40x magnification. (b) A foreign crystallized tubular structure at 120x magnification.

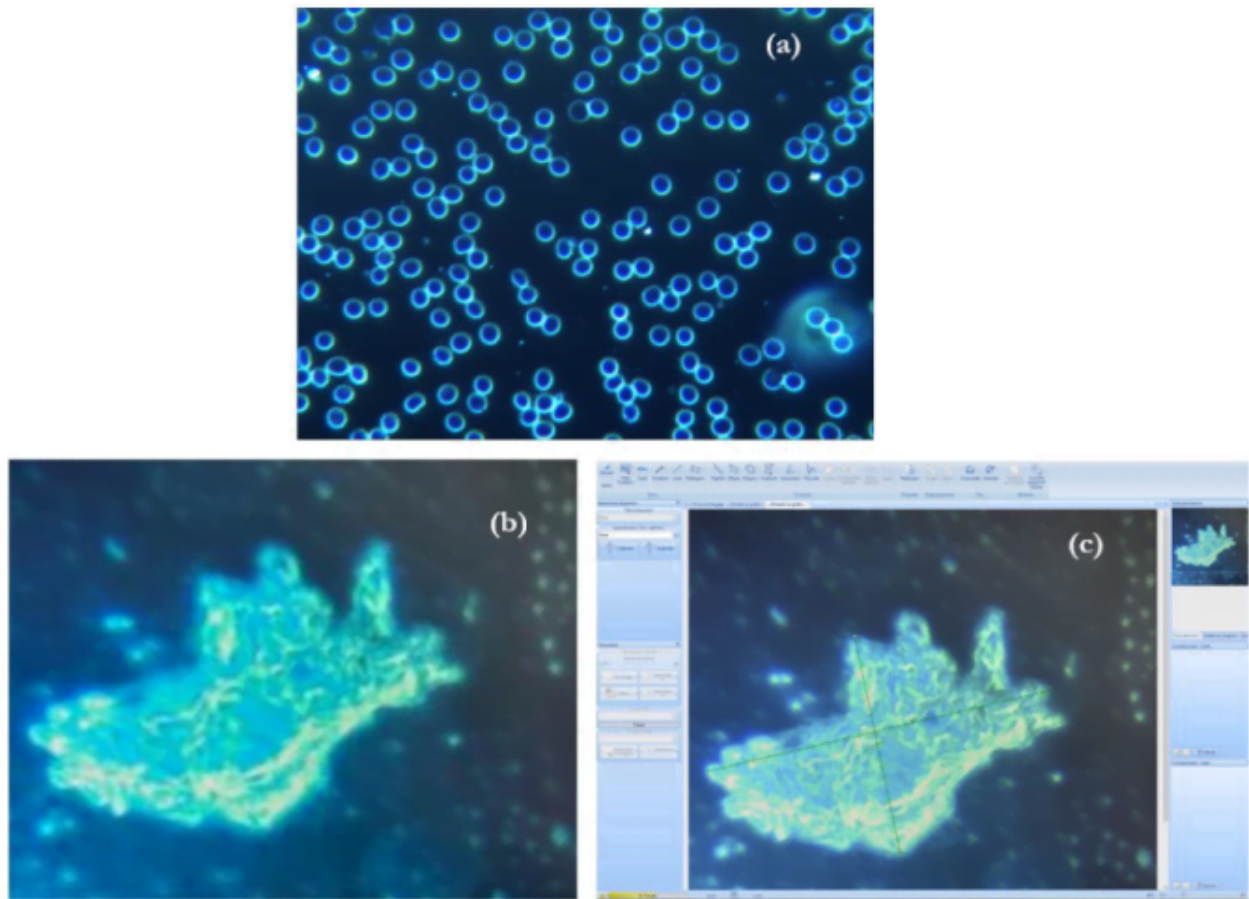


Figure 10. (a) The photo at the top and center shows the patient's blood condition at 40x magnification before the first mRNA inoculation. The images in (b) and (c), at 120x magnification, left and right at the bottom of the figure, show a voluminous agglomerate (measured at $329.14\mu\text{m}$ by $137.74\mu\text{m}$ with the DeltaPix software) five weeks after vaccination. Are these metallic objects graphene particles?

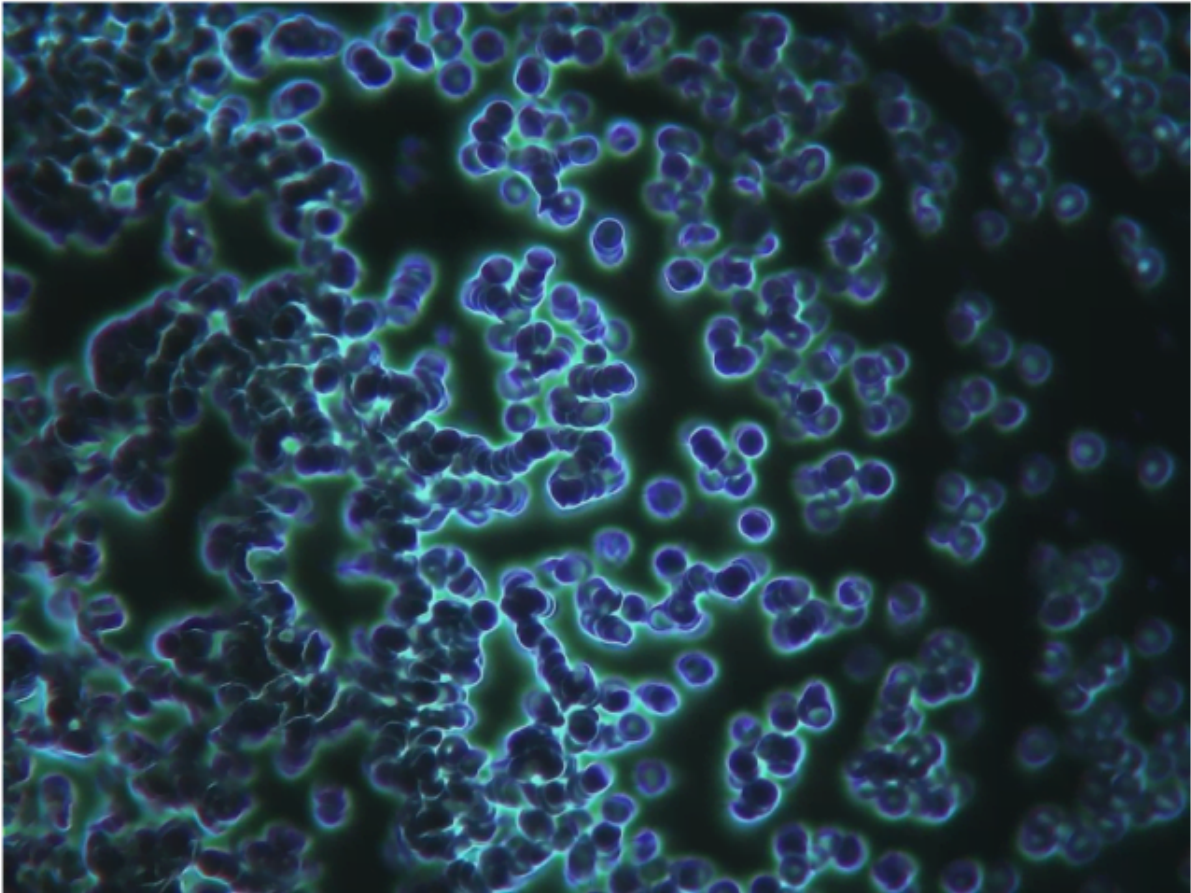


Figure 16. This image, at 40x magnification, is extremely representative of the "Z potential" disorders, with aggregation and "rouleaux stacking" of red blood cells.

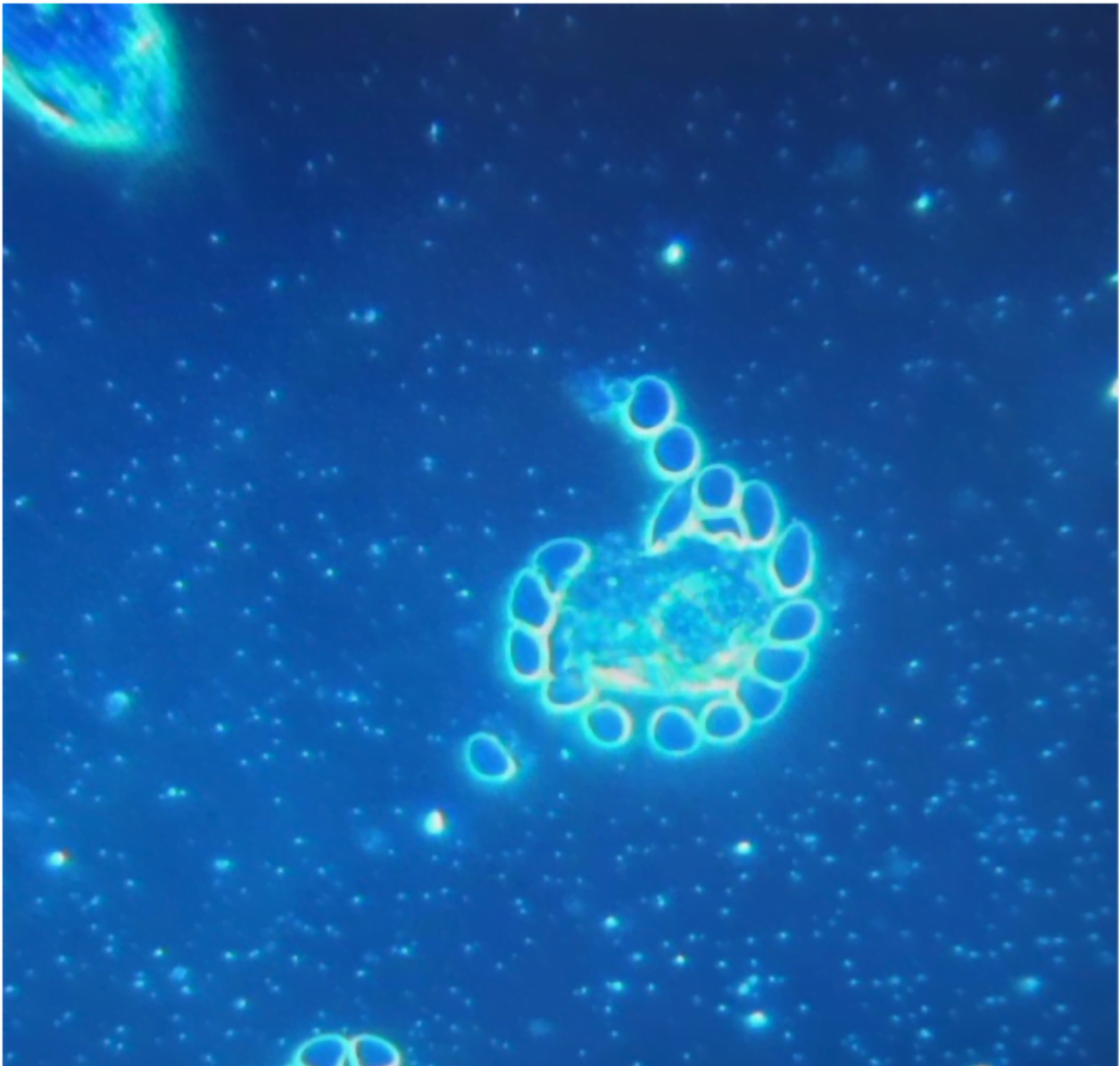


Figure 28. This photograph at 40x magnification highlights the interface of the interaction between red cells and what is presumably a graphenic particle.

Pathology Reports

More confirmation of metals and a whole slew of unidentified contaminants have been found in both the vaccines and in the blood and organs of vaccinated patients and corpses in Germany and Austria. A growing network of dozens (possibly hundreds) of doctors and pathologists are starting to independently carry out the pharmacovigilance research which the vaccine manufacturers and governments have (criminally) neglected to do:

On Monday, 20 September, 2021, At the pathological institute in Reutlingen, the results of the autopsies of eight people who died after COVID19 vaccination were presented. The fine tissue analyses were performed by pathologists Prof. Dr. Arne Burkhardt and Prof. Dr. Walter Lang. The findings confirm Prof. Dr. Peter Schirmacher's finding that among more than 40 corpses he autopsied who had died within two weeks of COVID19 vaccination, approximately one-third of those deaths were caused by the vaccination. Microscopic details of the tissue changes were shown during the live-streamed press conference. Prof. Dr. Werner Bergholz will report on the current parameters of the statistical recording of vaccination events.

The press conference also presented the results of the analysis of COVID-19 vaccine samples by an Austrian research group, which are consistent with the findings of scientists from Japan and the USA. Undeclared metal-containing components were found in the vaccine. Visually, the vaccine elements are conspicuous by their unusual shape.

The results of the investigation have led to legal and political demands, for example, for the immediate collection of information by the authorities in order to be able to assess the health risk posed to the population by the COVID-19 vaccines. For example, early signals of impaired fertility in vaccinated individuals can be examined by consulting IVF registries. Through the cancer registry, insights can be gained into the development of cancer due to the genetic modifications of the viral RNA.

Suspension of COVID-19 vaccination should be considered.

Source : <https://pathologie-konferenz.de/en/>

Video : <https://rumble.com/vmxiwd-covid-19-vaccines-undeclared-ingredients-german.html> (with poor machine-translated English subtitles only at this time).

This post on minds.com seems to describe some of the structures that were observed and reported by the German and Austrian researchers. The user account that posted it was deleted by Minds within minutes of my up-vote on the post. The original post also appears to have been removed from the t.me/covid_vaccine_injuries Telegram group.

The Barbastro Report

The Barbastro Hospital pharmacovigilance report revealed a statistically significant incidence of "COVID" deaths in patients who had received the Chiromas® flu shot. Wider investigation into medical records confirmed this trend, leading to the conclusion that the vaccines were "iatrogenic", and were a significant contributing factor to the COVID-19 attributed deaths. They also noted that the iatrogenic component of the Chiromas® flu shot was possibly associated with the polysorbate 80 component which is used as a nonionic surfactant for graphene oxide nanoparticles in suspension.

“...the 20 deceased in the Sector were all over 65 years of age. Of them, 17 had registered the administration of the vaccine and its batch by Primary Care, and of the other 3 there is no record. Those vaccinated against influenza would therefore represent at least 85% of the total number of deaths.”

“...the death rate in the vaccinated registered is four times that of the non-vaccinated, in an already significant sample of 94 individuals.”

The Barbastro Report

Contaminants in Other Vaccines

Antonietta M Gatti of the National Council of Research of Italy produced a report in 2016 which detailed their analyses of 44 different vaccines using an Environmental Scanning Electron Microscope equipped with an X-ray microprobe. They cataloged undeclared contaminants and nano-particulates in 43 out of the 44 products tested.

“The analyses carried out show that in all samples checked vaccines contain non biocompatible and bio-persistent foreign bodies which are not declared by the Producers, against which the body reacts in any case. This new investigation represents a new quality control that can be adopted to assess the safety of a vaccine. Our hypothesis is that this contamination is unintentional, since it is probably due to polluted components or procedures of industrial processes (e.g. filtrations) used to produce vaccines...”

“The quantity of foreign bodies detected and, in some cases, their unusual chemical compositions baffled us. The inorganic particles identified are neither biocompatible nor biodegradable, that means that they are biopersistent and can induce effects that can become evident either immediately close to injection time or after a certain time from administration. It is important to remember that particles (crystals and not molecules) are bodies foreign to the organism and they behave as such. More in particular, their toxicity is in some respects different from that of the chemical elements composing them, adding to that toxicity...they induce an inflammatory reaction.”

Source: <https://blog.nomorefakenews.com/2021/09/15/metal-particles-in-many-vaccines-but-dont-worry-line-up-and-take-your-shots/>

Results

The investigations verified the physical-chemical composition of the vaccines considered according to the inorganic component as declared by the Producer. In detail, we verified the presence of saline and Aluminum salts, but further presence of micro-, sub-micro- and nanosized, inorganic, foreign bodies (ranging from 100nm to about ten microns) was identified in all cases, whose presence was not declared in the leaflets delivered in the package of the product (Table 2).

N	Company	Name	Alluminum	Elements Identified
1	Allergopharma - Germany	Allergoid	yes	Al
2	Aventis Pasteur MSD Lyon - Francie	Typhim Vi	no	BrKP, PbSi, FeCr, PbClSiTi
3	Baxter AG	Tetabulin	no	SiMg, Fe, SiTiAl, SBa, Zn
4	Berna Biotech	Vivotif Berna	no	FeAl, ZrAlHf, SrAl, BiAlCl
5	Berna Biotech	Inflexal V	no	CuSnPbZn, Fe, CaSiAl, SiAl, NaPZn, ZnP, AlSiTi
6	Chiron	Anatetall	Al(OH) ₃	FeAl, SZnBaAl
7	Chiron	Morupar	no	/
8	GlaxoSmithKline- Belgium	Mencevax ACWY	no	FeCrNi, ZrAl, FeCrNiZrAlSi
9	GlaxoSmithKline	Infanrix	Al(OH) ₃	Al, AlTi, AlSi
10	GlaxoSmithKline Biologicals	Infanrix hexa	Al(OH) ₃	SBa, FeCu, SiAl, FeSi, CaMgSi, AlCaSi, Ti, Au, Sca, SiAlFeSnCuCrZn, CaAlSi
11	GlaxoSmithKline Biologicals	Infanrix hexa	Al(OH) ₃ , AlPO ₄ ·2H ₂ O	W, FeCrNi, Ti
12	GlaxoSmithKline	Typherix	no	Ti, TiW, AlSiTiWCr, SBa, W, SiAl, AlSiTi
13	GlaxoSmithKline	Priorix	no	WCa, WFeCu, SiAl, SiMg, PbFe, Ti, WNiFe
14	GlaxoSmithKline	Engerix-B	no	Al (precipitates)
15	GlaxoSmithKline	Varilrix	no	FeZn, FeSi, AlSiFe, SiAlTiFe, MgSi, Ti, Zr, Bi
16	GlaxoSmithKline	Fluarix	no	AlCu, Fe, AlBi, Si, SiZn, AlCuFe, SiMg, SBa, AlCuBi, FeCrNi, SPZn
17	GlaxoSmithKline Biologicals	Cervarix	Al(OH) ₃	AlSi, FeAl, SiMg, CaSiAl, CaZn, FeAlSi, FeCr, CuSnPb
18	Novartis Vaccines and Diagnostics	Anatetall	Al(OH) ₃	Al, FeCrNi, AlCr, AlFe, BaS, ZnAl
19	Novartis Vaccines and Diagnostics	Dif-Tet-All	Al(OH) ₃	Fe, SBa, SiSBa, AlZnCu, AlZnFeCr

20	Novartis Vaccines and Diagnostics	Menjugate kit	Al(OH) ₃	SiAl,Ti,FeZn, Fe, Sb, SiAlFeTi, W, Zr
21	Novartis Vaccines and Diagnostics	Focetria	no	Fe, FeCrNiCu, FeCrNi, SiFeCrNi, Cr, SiAlFe, AlSiTiFe, AlSi, SiMgFe, Si, FeZn
22	Novartis	Agrippal S1	no	Ca, Fe, SBa, SBaZn, Cr, Si, Pb, Bi, e FeSiAlCr, SiAlSBaFe, CaAlSi, Zn, CeFeTiNi, FeCrNi
23	Novartis Vaccines and Diagnostics	Agrippal S1	no	SiAlK, Si, SiMgFe, CaSiAl, SBaZn
24	Novartis vaccines	Agrippal	no	Cr, Ca, SiCaAl, ZrSi, SBa, CuZn, SCA
25	Novartis Vaccines and Diagnostics S	Fluad	no	CaSiAl, FeSiTi,SiMgAlFe, SBa
26	Novartis Vaccines and Diagnostics	Menveo	no	CaSiAl, SiAlFe, FeCrNi, Fe, Al, SBa
27	Pfizer	Prenevar 13	no	FeCr
28	Pfizer	Prevenar 13	no	W, CaAlSi, Al, CaSiAlFe, FeS, FeCr, FeCrNi, Fe, , CaP, FeTiMn, Ba, SiMgAlFe
29	Pfizer	Meningitec - ctrl	no	Cr, Si
30	Pfizer	Meningitec - ctrl	no	FeCrNi, W
31	Pfizer	Meningitec	no	CaSiAl, CaSi, SiAlFeTi, FeCrNi, W, Fe, Pb
32	Pfizer	Meningitec	no	Cr (precipitates), Ca, AlSi
33	Pfizer	Meningitec	no	W, SiCa, CaSi, Pb, FeCrNi, Cr
34	Wyeth Pharmaceutical - UK	Meningitec	no	SiAlFe, SiAlTi, SiMgFe, W, Fe, Zr, Pb, Ca, Zn, FeCrNi
35	Sanofi Pasteur MSD- France	Vaxigrip	no	Fe, FeCrNi, SiAlFe, AlSi, SiAlFeCr
36	Sanofi Pasteur MSD	Stamaril Pasteur	no	CaSiAl, AlSi, Fe, SiMgFe, SiMgAlFe, CrSiFeCr, CrSiCuFe
37	Sanofi Pasteur MSD	Gardasil	AlPO ₄ . 2H ₂ O	AlCuFe, PbBi, Pb, Bi, Fe
38	Sanofi Pasteur MSD	Gardasil	AlPO ₄ . 2H ₂ O	CaAlSi, AlSi, SiMgFe, Al,Fe, AlCuFe, FeSiAl, BiBaS, Ti, TiAlSi
39	Sanofi Pasteur	Vaxigrip	no	Ca, CrFe, FeCrNi, CaSZn, CaSiAlTiFe, Ag, Fe
40	Sanofi Pasteur	Vaxigrip	no	SiMgFe, CaSiAl, AlSiFe, AlSi,FeCr, FeZn, Fe
41	Sanofi Pasteur MSD	Repevax	AlPO ₄ . 2H ₂ O	Bi, Fe, AlSiFe, SiMg, SBa, Ca
42	Sanofi Pasteur MSD S	Renevax	AlPO ₄ . 2H ₂ O	Ti, Br, AuCuZn, Ca, SiZn, SiAuAgCu,

				SiMgFe,FeCrNi,AlSiMgTiMnCrFe, SiFeCrNi, FeAl
43	Sanofi Pasteur MSD	M-M-R vaxPro	no	Si, SiFeCrNi, FeCrNi,FeNi, Fe, SCa, AlSiCa, CaAlSiFeV, SBa, Pt, PtAgBiFeCr
44	Virbac S.A. - Carros - France	Feligen CRP	no	Ca,SiAl

Table 2: List of the vaccines according to their manufacturers with the chemical composition of the debris identified in each sample. The elements most represented are reported.

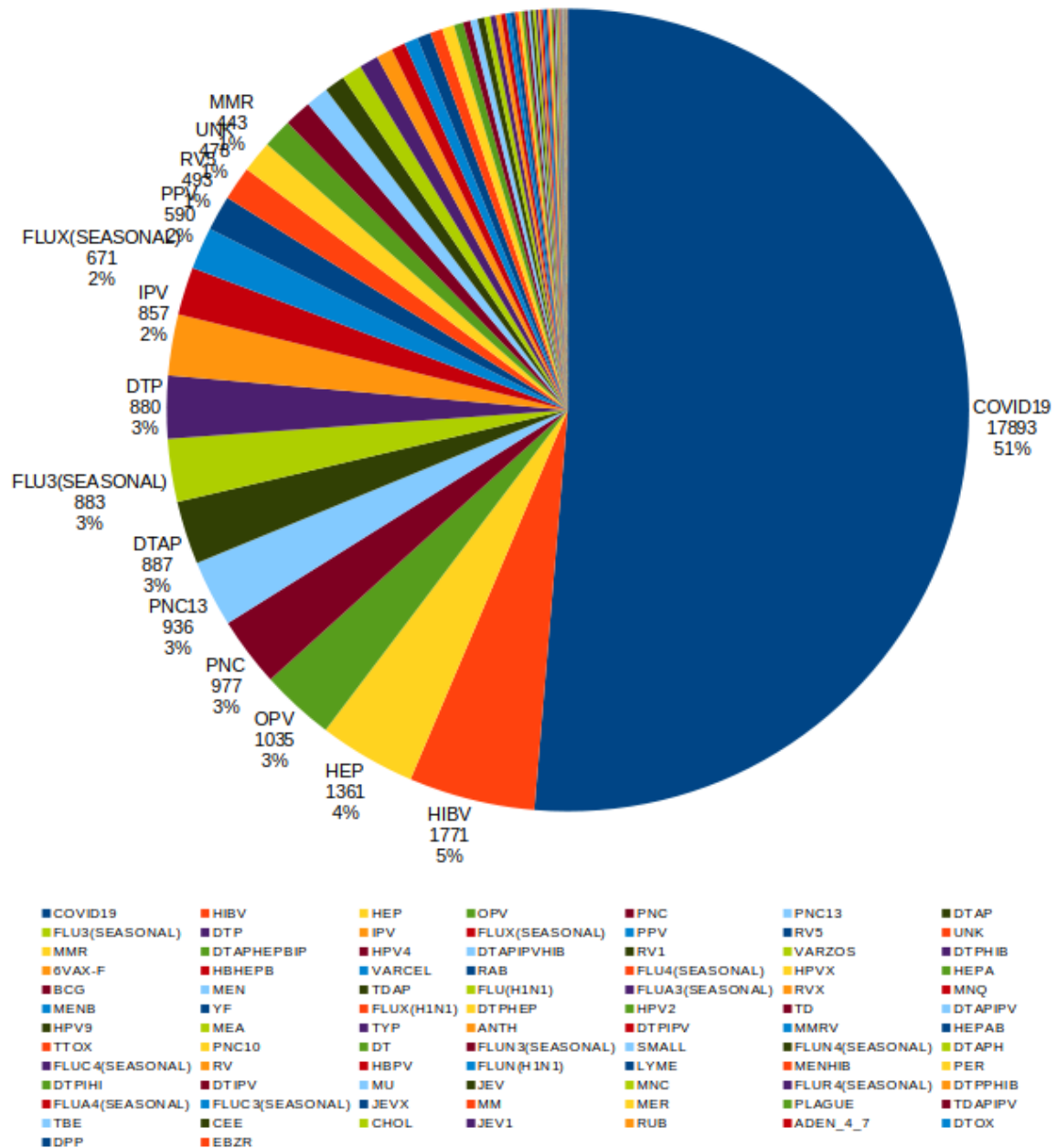
Source: <https://medcraveonline.com/IJVV/new-quality-control-investigations-on-vaccines-micro-and-nanocontamination.html>

VAERS Reported Deaths by Vaccine Type & Manufacturer (1988-2021)

COVID-19 vaccines account for 51% of all vaccine death reports submitted to VAERS since 1988. Double click/tap a segment to drill down to the manufacturer level.

source : [CDC Vaccine Adverse Event Reporting System](#)

VAERS Reported Deaths by Vaccine Type (1988-2021)



Further analysis of the VAERS data is revealing that certain vaccine lots are generating significantly higher numbers of adverse event reports than other lots, suggesting that composition varies considerably between different production batches.

Reports of Miscarriage / Stillbirth by Year**



Reports of Menstrual / Haemorrhages by Year



Reports of Miscarriage / Stillbirth by Year (2023-07-04)

Source: <https://openvaers.com/covid-data/reproductive-health>

“We quantify the overall all-ages vDFR for the 17 countries to be (0.126 ± 0.004) %, **which would imply 17.0 ± 0.5 million COVID-19 vaccine deaths worldwide**, from 13.50 billion injections up to 2 September 2023. This would correspond to a mass iatrogenic event that killed (0.213 ± 0.006) % of the world population (1 death per 470 living persons, in less than 3 years), and did not measurably prevent any deaths.”

COVID-19 vaccine-associated mortality in the Southern Hemisphere (September 2023)

A new study estimates that 17 million people have been killed by covid injections so far, and the risk of death is highest in older age groups

Vaccine-Associated AFM/AFP

Possibly related, several media reports appeared in recent years with regard to warnings from the CDC in 2018 of possible outbreaks of Acute Flaccid Myelitis in young children. Here’s an excerpt from the CDC’s “Transcript for CDC Telebriefing: Update on Acute Flaccid Myelitis (AFM) in the U.S.” dated 17 October, 2018:

Right now, we know that poliovirus is not the cause of these AFM cases. CDC has tested every stool specimen from the AFM patients, none of the specimens have tested positive for the poliovirus. AFM can be caused by other viruses, such as enterovirus and west nile virus, environmental toxins and a condition where the body’s immune system attacks and destroys body tissue that it mistakes for foreign material. While we know that these can cause AFM, we have not been able to find a cause for the majority of these AFM cases. The reason why we don’t know about AFM — and I am frustrated that despite all of our efforts we haven’t been able to identify the cause of this mystery illness.

– Dr. Nancy Messonnier, Director / CDC National Center for Immunization and Respiratory Diseases

There have been a number of articles and studies published around cases of vaccine-associated Acute Flaccid Paralysis/Myelitis:

1. “Vaccine-induced paralysis calls for action, says study”
2. “Acute Flaccid Paralysis Associated With Circulating Vaccine-Derived Poliovirus—Philippines, 2001”
3. “Vaccine-associated paralytic poliomyelitis: a retrospective cohort study of acute flaccid paralyzes in Brazil”
4. “Vaccine-associated paralytic poliomyelitis and other diseases with acute flaccid paralysis syndrome in Belarus”
5. “Measuring polio immunity to plan immunization activities”
6. “Outbreaks of acute flaccid myelitis in the US”

This was the topic of discussion in this interview with Dr. Bryan Ardis.

UPDATE: 30 August, 2022 – Here it comes...

GROWING —

Poliovirus outbreak expands in NY: Third county has vaccination rate of 62%

"One New Yorker paralyzed by polio is already too many," state health commissioner says.

BETH MOLE - 8/29/2022, 11:44 PM



Getty | Ed Jones

Enlarge / A polio vaccine box is displayed at a health clinic in Brooklyn, New York on August 17, 2022.

A third county in New York with a low vaccination rate has detected poliovirus in its wastewater, suggesting that spread of the dangerous virus is expanding, which continues to pose a significant threat to anyone unvaccinated.

It would appear that most of the pharma-biotech giants have been deeply entwined with their Chinese counterparts for at least 30 years.

Pfizer has invested more than US\$500 million in China since the 1980s, GlaxoSmithKline (GSK) has invested over US\$400 million, while AstraZeneca has invested more than US\$140 million. AstraZeneca has opened an East Asia clinical trial center in Shanghai, Roche established its first Asian R&D center in Shanghai, Eli Lilly has also opened up a research and development (R&D) facility in Shanghai, and Novo Nordisk has an R&D facility in the Beijing Zhongguancun (ZGC) Life Science Park. GSK and Pfizer have also set up R&D centers in China.

“Biotechnology Parks: China into the Next Future” (2011) –
https://www.asiabiotech.com/15/1503/0034_0039.pdf

11 September, 2021 :

“Now, thanks to materials released through a Freedom of Information Act lawsuit by The Intercept against the National Institutes of Health (which were unredacted enough to toss Fauci under the bus), we now know that Fauci-funded EcoHealth Alliance, a New York-based nonprofit headed by Peter Daszak, was absolutely engaged in gain-of-function research to make chimeric SARS-based coronaviruses, which they confirmed could infect human cells.”

<https://www.zerohedge.com/covid-19/massive-foia-release-proves-fauci-funded-wuhan-research-construct-sars-related>

<https://theintercept.com/2021/09/06/new-details-emerge-about-coronavirus-research-at-chinese-lab/>

23 September, 2021:

“New documents show that just 18 months before the first Covid-19 cases appeared, researchers [Peter Daszak] had submitted plans to release skin-penetrating nanoparticles containing “novel chimeric spike proteins” of bat coronaviruses into cave bats in Yunnan, China.”

“They also planned to create chimeric viruses, genetically enhanced to infect humans more easily, and requested \$14 million from the Defense Advanced Research Projects Agency (Darpa) to fund the work.”

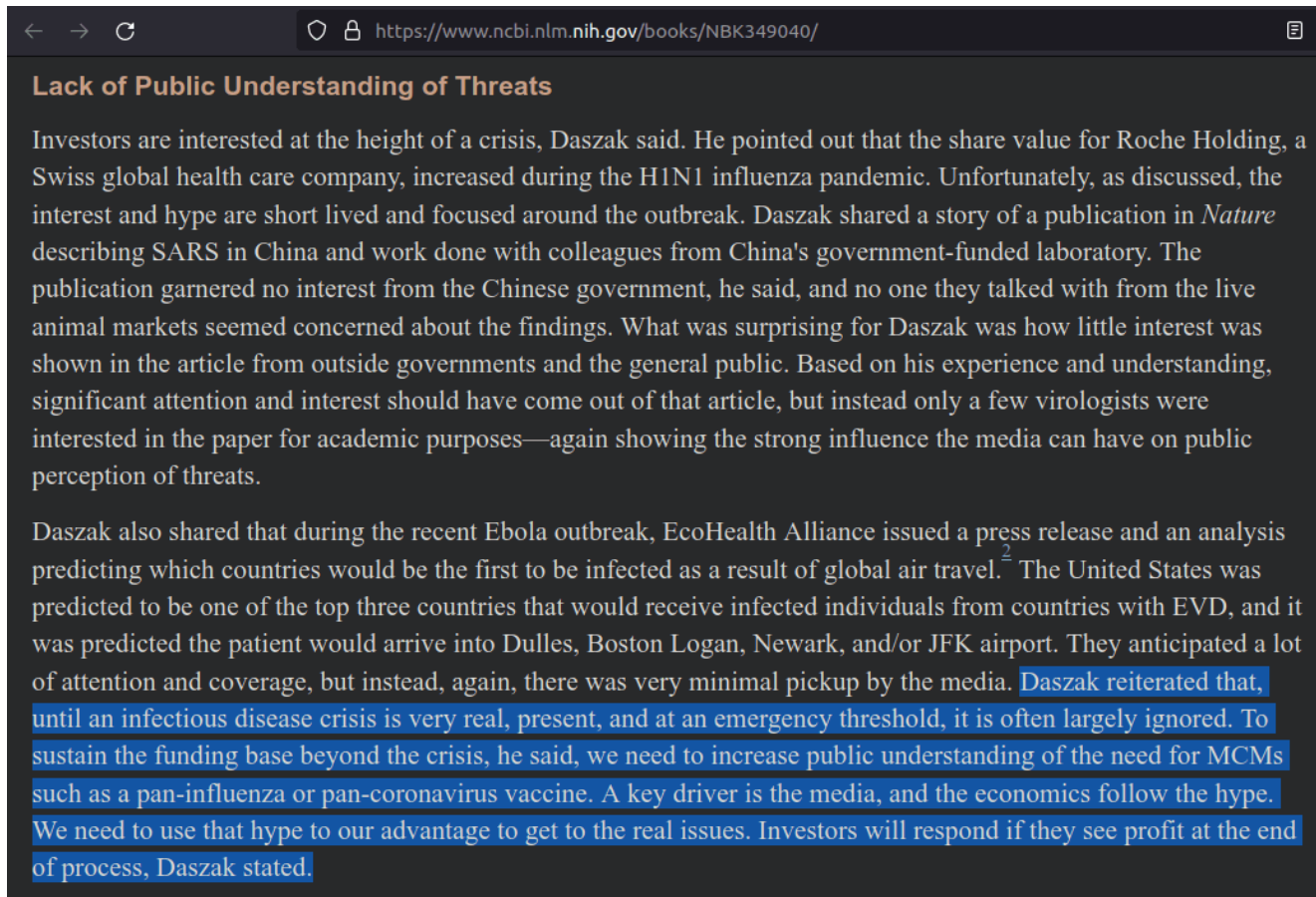
<https://www.zerohedge.com/political/wuhan-scientists-planned-release-chimeric-covid-spike-proteins-bat-populations-using-skin>

<https://drasticresearch.org/2021/09/21/the-defuse-project-documents/>

22 October, 2021:

“NIH Admits Funding Gain-Of-Function COVID Experiments; Gives EcoHealth Five Days To Report Data”

<https://www.zerohedge.com/covid-19/nih-admits-funding-gain-function-covid-experiments-gives-ecohealth-five-days-report>



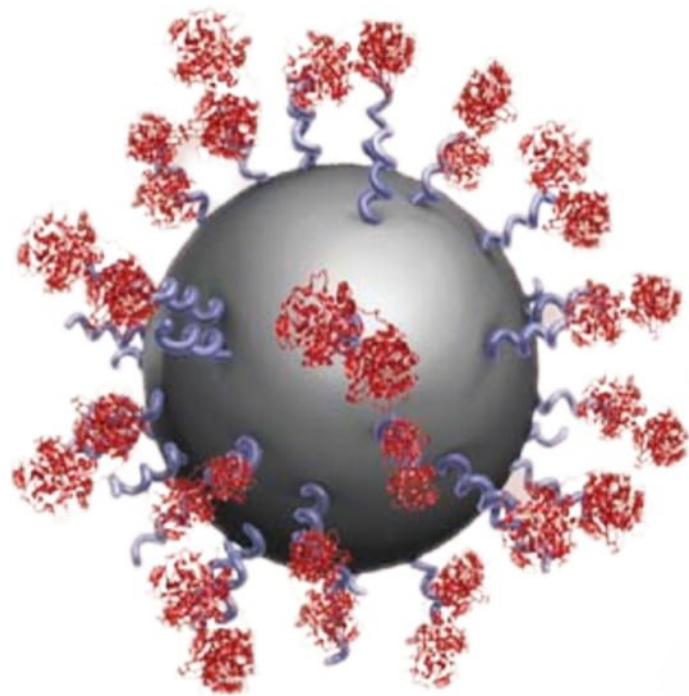
The screenshot shows a web browser window with the address bar displaying <https://www.ncbi.nlm.nih.gov/books/NBK349040/>. The page title is "Lack of Public Understanding of Threats". The main text discusses investor interest during crises, citing a story about SARS in China and a press release from EcoHealth Alliance during the Ebola outbreak. Several lines of text are highlighted in blue.

Lack of Public Understanding of Threats

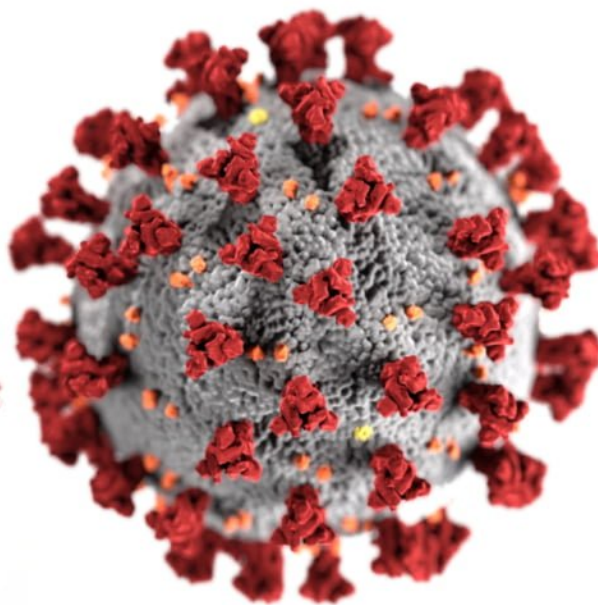
Investors are interested at the height of a crisis, Daszak said. He pointed out that the share value for Roche Holding, a Swiss global health care company, increased during the H1N1 influenza pandemic. Unfortunately, as discussed, the interest and hype are short lived and focused around the outbreak. Daszak shared a story of a publication in *Nature* describing SARS in China and work done with colleagues from China's government-funded laboratory. The publication garnered no interest from the Chinese government, he said, and no one they talked with from the live animal markets seemed concerned about the findings. What was surprising for Daszak was how little interest was shown in the article from outside governments and the general public. Based on his experience and understanding, significant attention and interest should have come out of that article, but instead only a few virologists were interested in the paper for academic purposes—again showing the strong influence the media can have on public perception of threats.

Daszak also shared that during the recent Ebola outbreak, EcoHealth Alliance issued a press release and an analysis predicting which countries would be the first to be infected as a result of global air travel.² The United States was predicted to be one of the top three countries that would receive infected individuals from countries with EVD, and it was predicted the patient would arrive into Dulles, Boston Logan, Newark, and/or JFK airport. They anticipated a lot of attention and coverage, but instead, again, there was very minimal pickup by the media. **Daszak reiterated that, until an infectious disease crisis is very real, present, and at an emergency threshold, it is often largely ignored. To sustain the funding base beyond the crisis, he said, we need to increase public understanding of the need for MCMs such as a pan-influenza or pan-coronavirus vaccine. A key driver is the media, and the economics follow the hype. We need to use that hype to our advantage to get to the real issues. Investors will respond if they see profit at the end of process, Daszak stated.**

The images below serve to illustrate the remarkable visual similarity between nanoparticle protein corona's ([source](#)) and the “coronavirus” SARS-CoV-2 “spike” protein ([source](#)).



Transferrin-functionalised
silicon-oxide nanoparticle



"Coronavirus"
SARS-CoV-2



John McAfee 
@officialmcafee



Replying to @whotookmaname

Do NOT, under any
circumstances, take the
vaccine!!!

11:00 AM · Feb 5, 2020 · Twitter for Android

644 Retweets **142** Quote Tweets **1,384** Likes

Related Videos

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| [Perfectum Venenum](#)

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