

Furthermore, it has been discovered that two of the lipids in Pfizer Covid-19 vaccines are ALC-0159 and ALC-315, as confirmed by the assessment report of the Pfizer Covid-19 vaccine published by the European Medicines Agency.

2.2.1. Introduction

The finished product is presented as a concentrate for dispersion for injection containing 225 µg/ 0.45 mL (prior to dilution) of BNT162b2 (5'capped mRNA encoding full length SARS-CoV-2 Spike protein) as active substance (AS).

Other ingredients are: **ALC-0315** (4-hydroxybutyl)azanediyl)bis(hexane-6,1-diy)bis(2-hexyldecanoate), **ALC-0159** (2-[(polyethylene glycol)-2000]-N,N-ditetradecylacetamide), 1,2-

Distearoyl-sn-glycero-3-phosphocholine (DSPC), cholesterol, potassium chloride, potassium dihydrogen phosphate, sodium chloride, disodium phosphate dihydrate, sucrose and water for injections.

Source – Page 14

But both of these lipids carry manufacturer's warnings that state they are never to be used in humans or animals.

19-3

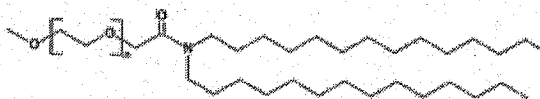
As you can see for yourself, in tiny writing at the bottom of the product inserts [here](#) and [here](#).

PRODUCT INFORMATION



ALC-0159
Item No. 34336

CAS Registry No.: 1849616-42-7
Formal Name: α -[2-(ditetradecylamino)-2-oxoethyl]- ω -methoxy-poly(oxy-1,2-ethanedyl)
MF: $(C_{24}H_{48}O)_n C_{21}H_{43}NO_2$
Purity: $\geq 95\%$
Supplied as: A solid
Storage: $-20^{\circ}C$
Stability: ≥ 4 years



Information represents the product specifications. Batch specific analytical results are provided on each certificate of analysis.

Source

What is Graphene Oxide?

Graphene Oxide is a tiny particle that is made up of carbon and oxygen atoms. It's really small – so small that you can't see it with your eyes. But even though it's small, it can be dangerous.

It is known to be toxic to some cells, and research has shown that it can cause inflammation and damage to the lungs when inhaled.

In addition, **Graphene Oxide is able to cross the blood-brain barrier**, which is a protective barrier that prevents harmful substances from entering the brain. This could potentially lead to neurological problems.

Graphene Oxide is detected in the immune system as if it were a pathogen. Once injected it has an affinity for the central nervous system, potentially causing paralysis, strokes and alteration of the nervous system.

Furthermore, the long-term effects of Graphene Oxide exposure are not yet known. There is very little research on the long-term effects of Graphene Oxide exposure in humans, which means we don't know what the potential risks are.

But thanks to the administration of the Pfizer COVID vaccine to millions of people, numerous times, we are finding out as the days pass. And sadly, both the short-term and long-term effects do not look good.

Further Evidence, Other Undeclared Substances & Deadly Consequences

Graphene Oxide is not the only toxic substance that the public should be concerned about. Because scientists have found Nanotech alongside Graphene Oxide when they have previously examined samples of Covid-19 injections.

Nanoscience and nanotechnology involve the ability to see and control individual atoms and molecules. Everything on Earth is made up of atoms—the food we eat, the clothes we wear, the buildings and houses we live in, and our own bodies.

But something as small as an atom is impossible to see with the naked eye. In fact, it's impossible to see with the microscopes typically used in high school science classes. The microscopes needed to see things at the nanoscale were invented in the early 1980s.

Once scientists had the right tools, such as the scanning tunnelling microscope (STM) and the atomic force microscope (AFM), the age of nanotechnology was born.

19-4

And scientists from Spain, have declared that nanotechnology, which has the ability to control atoms in your body, has been found in all of the Covid-19 injections alongside Graphene Oxide.

According to the Spanish scientists who examined the Covid-19 injections, **Graphene Oxide has the potential to cause strange blood clots.** This may explain why it has been proven that Covid-19 injections increase the risk of suffering thrombosis with thrombocytopenia.

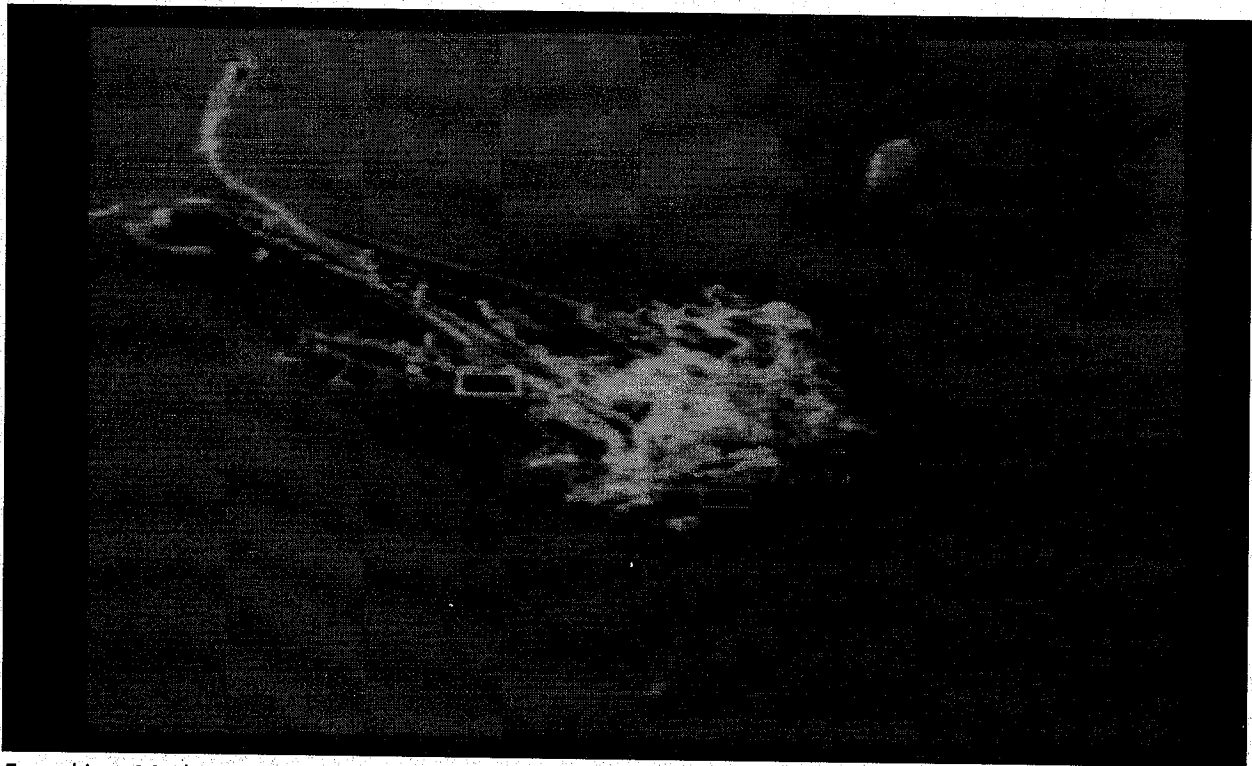
But it is not just scientists from Spain making these claims. Numerous scientists around the world have published findings where they allege they have discovered both nanotechnology and Graphene Oxide in the Covid-19 injections.

Scientists discover 'Carbon Nanotech' & 'Radioactive Thulium' in Pfizer & Moderna COVID Vaccines

After reviewing electron microscope images of elements contained in the Covid Pfizer and Moderna injections, **Dr Daniel Nagase**, a Canadian emergency room doctor, **revealed that, strangely, the contents of the Pfizer and Moderna "vaccines" show no signs of biological material, including mRNA or DNA.** (*Read more here*).

Dr Nagase's research group looked at Moderna and Pfizer samples under a regular microscope. Although there were a lot of very interesting images, they were unable to be conclusive about what exactly they were seeing. So, they used an electron microscope to determine what elements the "vaccines" contained.

Here are some of the images of what they found –



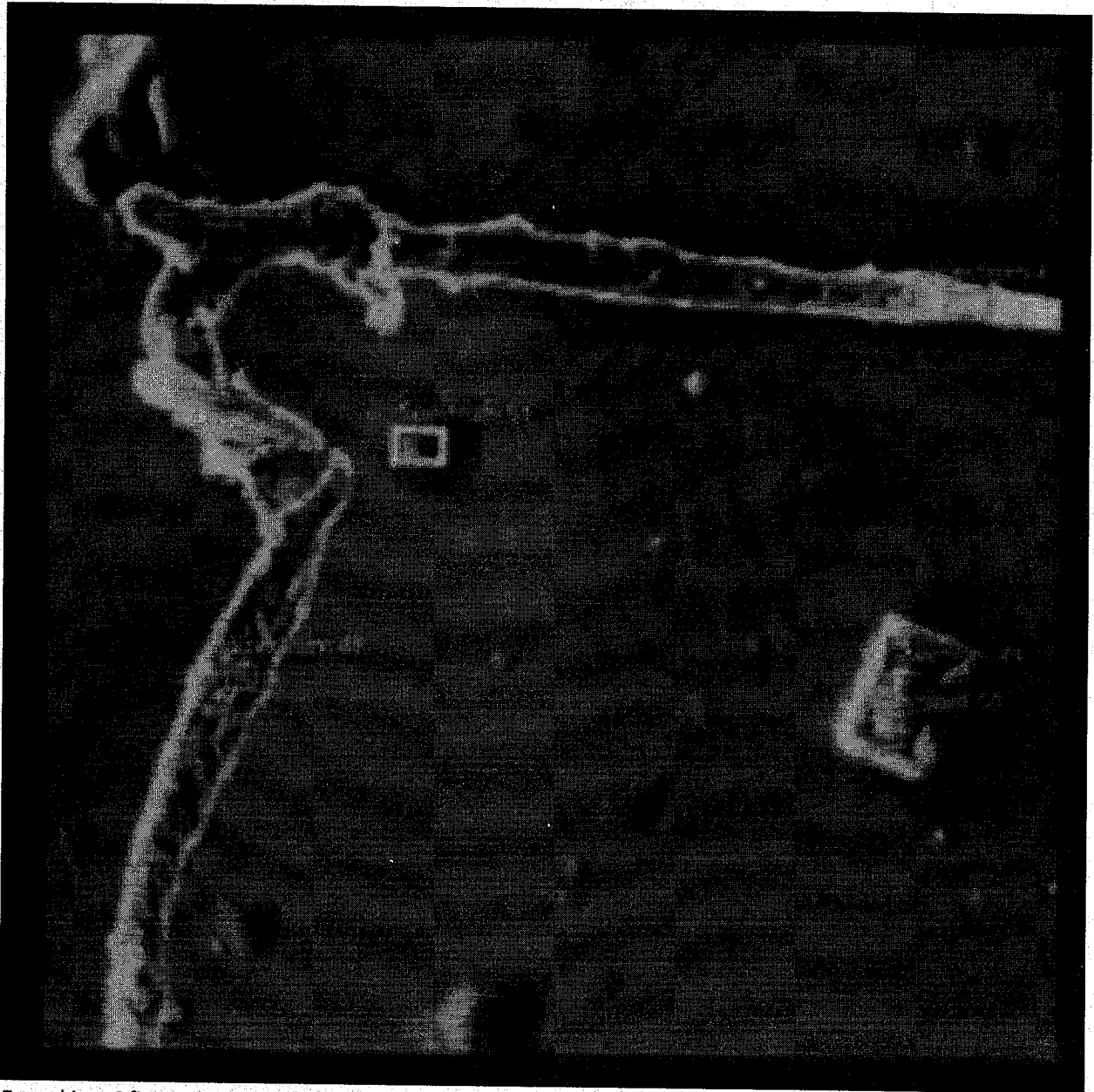
Found in a Moderna Covid "vaccine" sample

Dr. Nagase examined a "ball with the legs growing out of it" found inside a Moderna sample and had this to say –

"This shape, this ball with the legs growing out of it, for some reason has aluminium in it. And I can say with certainty that this isn't a mould spore or some other type of biological contamination, because the only thing in it is carbon, oxygen, and no signs of nitrogen, no signs of phosphorus, which would indicate something biological of origin. **So, this thing that's growing is non-biological.**"

19-5

Dr Nagase and the researchers also discovered an unusual element from the lanthanide series – thulium – in a fibre-like structure found in a Pfizer sample –



Found in a Pfizer Covid "vaccine" sample

Dr. Nagase and the researchers found a variety of shapes and structures inside the "vaccine" samples they tested – crystals, chips, strands, bulbs, spheres, fibres and balls with legs growing out of them – "we have polymorphic, which is many different forms," he said.

"They all seem to be made predominantly out of carbon and oxygen and they were in both the Moderna and Pfizer samples, and they seem to be in fibre forms. In the Moderna sample, the carbon-oxygen structures seem to be taking nanosphere forms and crystalline forms. And in the Pfizer sample ... seem to only be forming fibres and crystals.

Argentina: Researchers Discover Nanotech & Graphene Oxide in COVID Vaccines

In a presentation to the Chilean radio station *El Mirador del Gallo*, Argentine doctor Martín Monteverde presented the analyses carried out by Corona2Inspect researchers on the microtechnology found in the Pfizer Covid-19 mRNA vaccine.

Argentina's Dr Monteverde and other researchers carried out microscopic analyses of a vial of the Pfizer vaccine alongside four other Covid-19 "vaccine" types. He then sent these images to Corona2Inspect for further analysis. Corona2Inspect returned the images with their comments identifying what objects the images were showing.

You can watch a video of Dr Monteverde's teams findings below –

Argentina's Dr Patricia Aprea, Director of Evaluation and Control of the ANMAT, also accidentally admitted AstraZeneca's Viral Vector Covid-19 injection also contains Graphene during a legal case regarding a death post-Covid injection.

You can read the document where ANMAT recognised that Covid-19 vaccines contain Graphene Oxide [HERE](#) in [\(Spanish\)](#) or below, translated into English using Google –



Argentine Republic – National Executive Power
2021 - Year of Tribute to the Nobel Prize in Medicine Dr. César Milstein

Report

Number: IF-2021-120912800-APN-DECBR#ANMAT

BUENOS AIRES CITY
Monday, December 13, 2021

Reference: EXTENDED REPORT- EX-2021-45862892- -APN-DD#MS

IPP No. 015787 entitled "POZZI, Liliana
Graciela S/ investigation of causes of death"

Functional Instruction Unit No. 3 of the dept. Judiciary San
Martín.

REPORT EXPANSION

- a. The batch cited in the judicial official letter, CTMAV534, effectively corresponds to the COVID 19 Vaccine AstraZeneca Vaccine, which would have entered the Ministry of Health of the Nation through the System Covax (EX-2021-33243244- -APN-SASEMS) in April 2021
- b. This Directorate did not receive a request for the analysis of samples from that lot to carry out analytical tests.
- c. Regarding the existence of residues in the vaccine, this was answered in June 2021 according to: "Regarding the alleged finding of "residues" in the doses, this situation is inaccurate"
- d. Regarding the composition of the vaccine in question, as stated, ~~Graphene is among its components~~. It is suggested to accompany authorized labels or leaflets in which the components of the vaccine can be noted.
- e. In relation to whether there are administrative complaints before that Ministry or the ANMAT about possible adverse effects of the vaccines and, if so, what is the reported collateral damage, and also if they have become aware of phenomena of body magnetism in those inoculated post-vaccine; said information should be collected in the competent area dependent on INAME.

Click to enlarge

19-7

Doctors find Graphene is shedding from the COVID Vaccinated to the Unvaccinated, forming Strange Blood Clots & decimating Red Blood Cells

Dr Philippe van Welbergen, Medical Director of Biomedical Clinics, was one of the first to warn the public of the damage being caused to people's blood by Covid injections by releasing images of blood samples under the microscope.

In a set of slides of blood samples taken from both "vaccinated" and unvaccinated people, Dr Philippe van Welbergen demonstrated that the Graphene Oxide, contained in the Pfizer Covid-19 vaccines being injected into people by amateurs and volunteers with no adequate training, is organising and growing into larger fibres and structures, gaining magnetic properties or an electrical charge and the fibres are showing indications of more complex structures with striations.

At the beginning of July 2021, Dr. Philippe, was interviewed and he explained that when his patients started complaining about chronic fatigue, dizziness, memory loss, and even sometimes paralysis and late onset of heavy menstruation (women in their 60s upwards), he took blood samples.

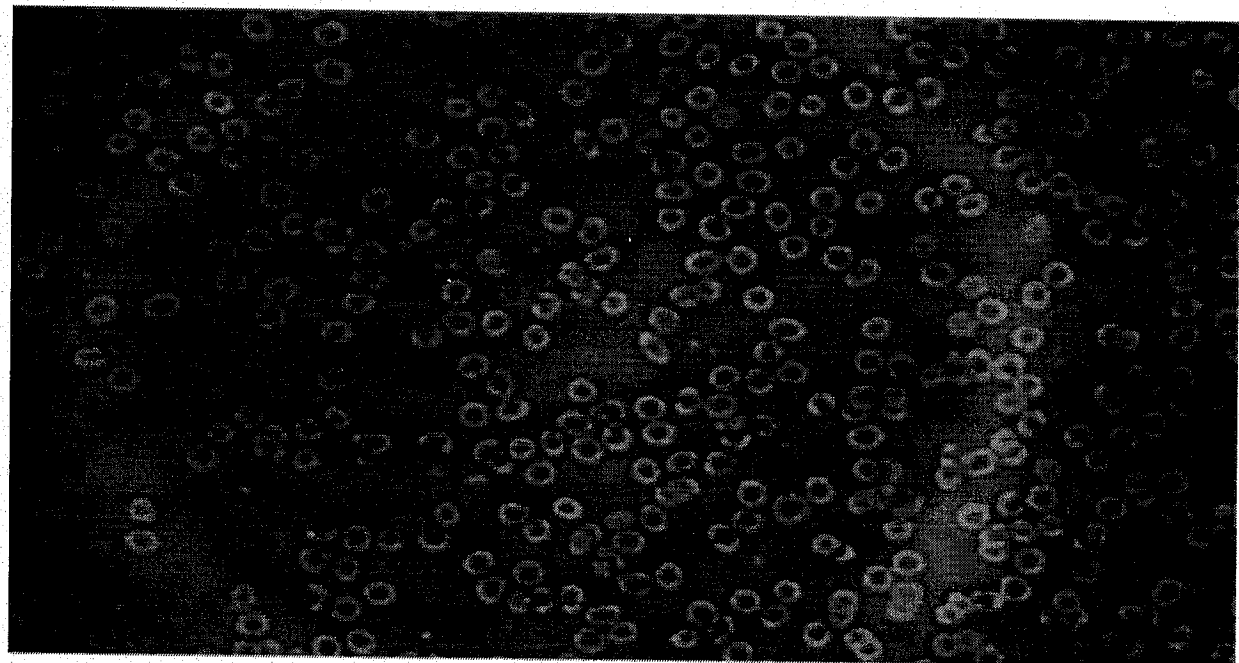
Their blood had unusual tube-like structures, some particles which lit up and many damaged cells.

Few healthy cells were visible. Until three months earlier, he had never seen these formations in blood.

We now know these tube-like structures are Graphene Oxide.

He also demonstrated that "shards" of Graphene Oxide are being transmitted from the Covid-19 vaccinated to vaccine-free or unvaccinated people, sadly destroying their red blood cells and causing blood clots. (*Read more here*).

Below is an image of typical healthy red blood cells as seen with a microscope, what blood should look like. There is no coagulation or foreign objects in it.



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Sadly fibres of this size are capable of blocking capillaries.

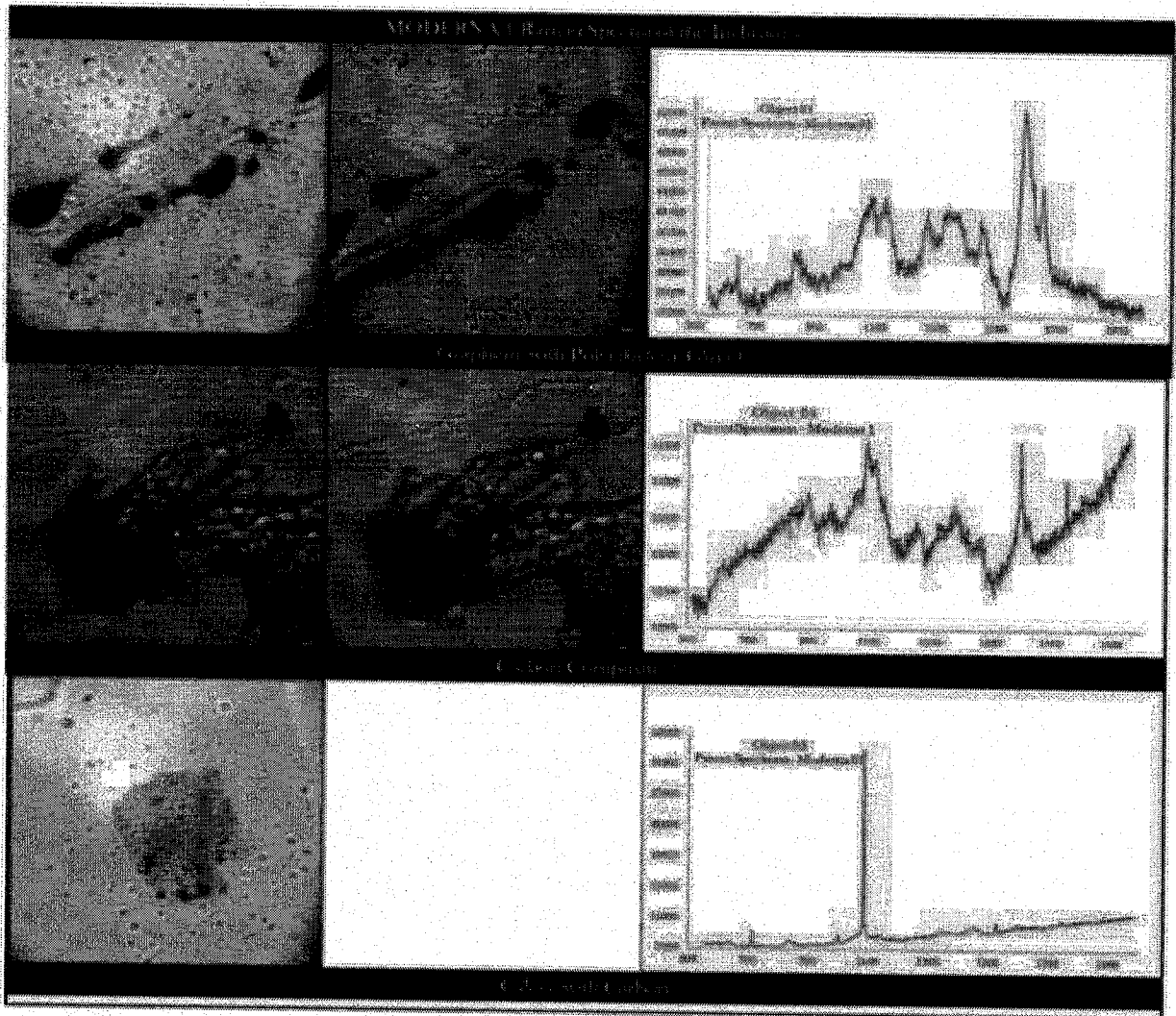
You can also see that the Graphene fibres are hollow and have swallowed up some red blood cells.

In December 2021, a British medical practitioner offered to assist in an investigation to ascertain whether the results discovered by Dr. Andreas Noack, a German chemist, and Dr. Pablo Campra, of the University of Almeria in Spain, could be replicated in the UK and also to examine the Covid-19 injection vials for toxins or unexpected contents.

The medical practitioner seized an injection vial from the fridge housed in the surgery where she works and handed it to an independent investigator.

A UK laboratory analysed the sample using Raman Spectroscopy and found Graphene, SP3 carbon, iron oxide, carbon derivatives and glass shards.

The first sample that was evaluated was the Moderna 01 which was examined by Raman spectroscopy. The investigation clearly showed that all the inclusions within the vaccine have a strong carbon signal with confirmed graphene compositions of some representative forms.



19-9

Two clear signals were obtained from two objects. The flat ribbon-like inclusions exhibited clear Graphene spectra integrated with the spectrum of glycol and other minor compounds. The other clear signal was obtained from a calcite microcrystalline form and Carbon composite forms also had a clear Graphene signal.

You can read a copy of the document encompassing a case briefing, the UNIT report and a summary of the toxicity of Graphene nanoparticles on UK Citizen 2021's website [HERE](#).

The 48-page UNIT report, '*Qualitative Evaluation of Inclusions in Moderna, AstraZeneca and Pfizer Covid-19 vaccines*', begins on page 12 of the document.

An Open Access review highlighting the toxicity of the graphene family nanoparticles can be viewed [here](#).

REVIEW

Open Access

Toxicity of graphene-family nanoparticles: a general review of the origins and mechanisms



Lingling Ou², Bin Song¹, Hulmin Liang¹, Jia Liu¹, Xiaoli Feng¹, Bin Deng², Ting Sun² and Longquan Shao^{1*}

Abstract

Due to their unique physicochemical properties, graphene-family nanomaterials (GFNs) are widely used in many fields, especially in biomedical applications. Currently, many studies have investigated the biocompatibility and toxicity of GFNs in vivo and in vitro. Generally, GFNs may exert different degrees of toxicity in animals or cell models by following with different administration routes and penetrating through physiological barriers, subsequently being distributed in tissues or located in cells, eventually being excreted out of the bodies. This review collects studies on the toxic effects of GFNs in several organs and cell models. We also point out that various factors determine the toxicity of GFNs including the lateral size, surface structure, functionalization, charge, impurities, aggregations, and corona effect ect. In addition, several typical mechanisms underlying GFN toxicity have been revealed, for instance, physical destruction, oxidative stress, DNA damage, inflammatory response, apoptosis, autophagy, and necrosis. In these mechanisms, toll-like receptors (TLR), transforming growth factor β (TGF- β) and tumor necrosis factor-alpha (TNF- α) dependent pathways are involved in the signalling pathway network, and oxidative stress plays a crucial role in these pathways. In this review, we summarize the available information on regulating factors and the mechanisms of GFNs toxicity, and propose some challenges and suggestions for further investigations of GFNs, with the aim of completing the toxicology mechanisms, and providing suggestions to improve the biological safety of GFNs and facilitate their wide application.

Keywords: Graphene-family nanomaterials, Toxicity, Toxicokinetics, Mechanisms, Physicochemical properties, Future prospects.

Covid Injection Secret Ingredients | New Zealand Scientists confirm Nanotechnology alongside Graphene Oxide

Nanotechnology and Graphene have also been found in Pfizer's Comirnaty "vaccines" by scientists in New Zealand. ([Read more here](#)).

At the end of January 2022, Sue Grey, co-leader of the Outdoors and Freedom Party, and Dr Matt Shelton from [New Zealand Doctors Speaking Out With Science](#) ("NZDSOS") put the Health Select Committee on

19-10

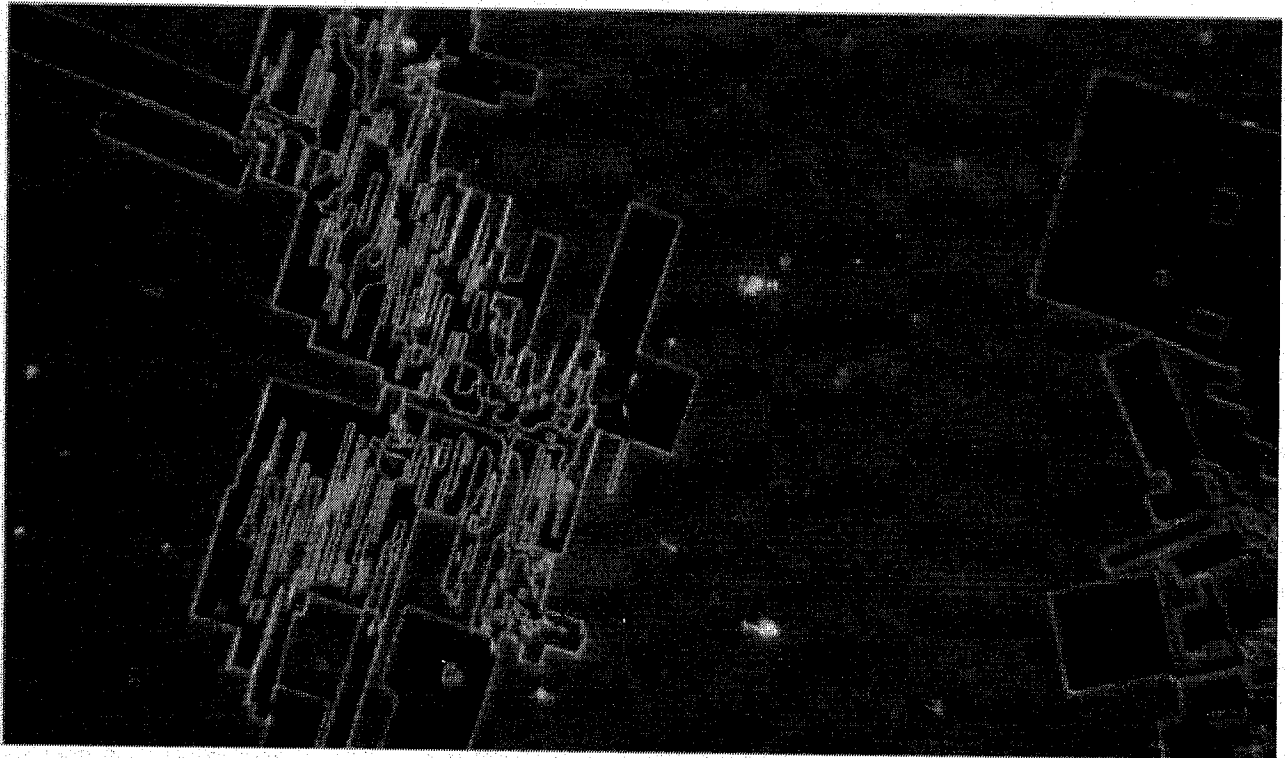
notice that serious contamination of the Pfizer vaccine has been uncovered and they needed to act immediately to stop the injection campaign.

Dr Shelton came forward to disclose the discovery of formations of nano-particles found by New Zealand scientists using specialised microscopic techniques.

None of the experts consulted had ever seen anything like this before, and none of these contaminants are listed as approved ingredients.

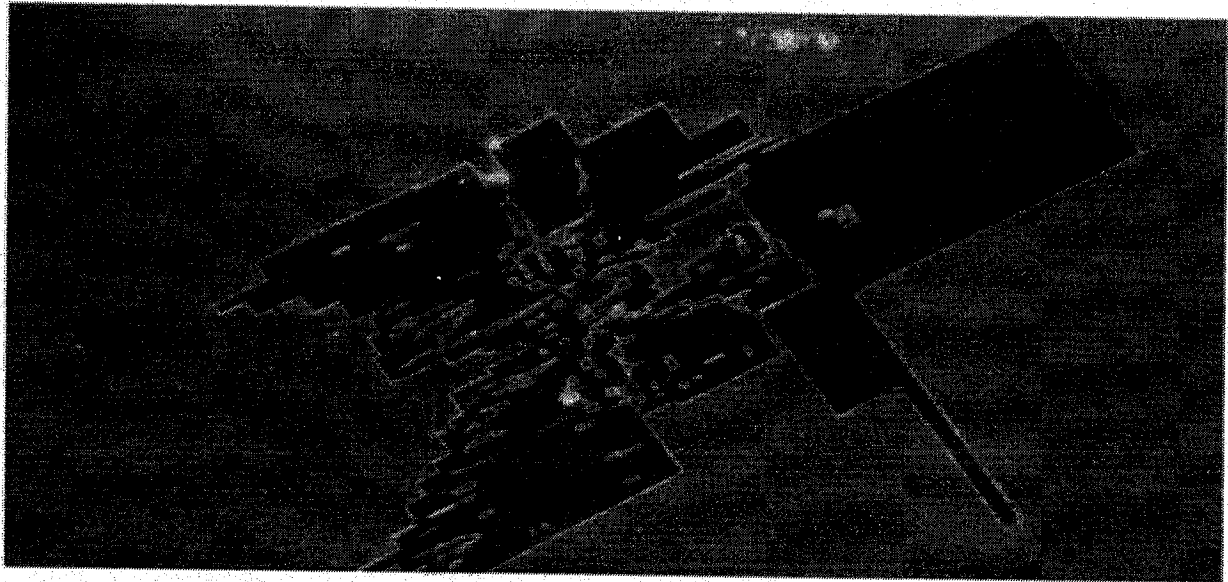
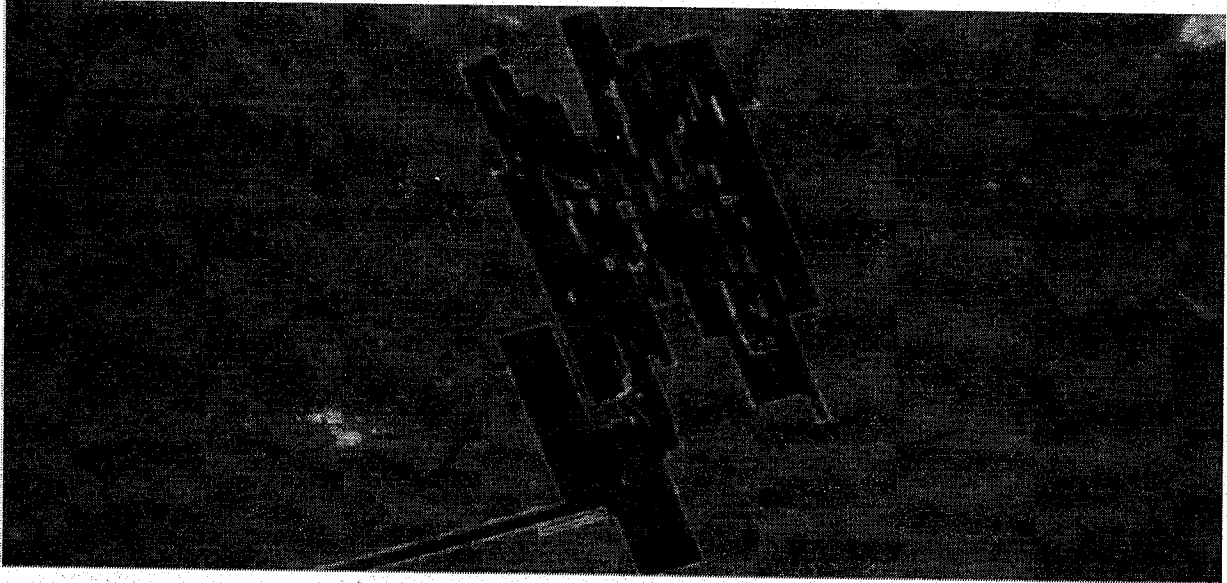
You can read the full account, with additional images and videos, [HERE](#). But below is a snapshot of what one New Zealand scientist found.

The image below was taken from one drop of New Zealand's Pfizer Comirnaty "vaccine" under a cover slip, after it was inadvertently heated lightly, and viewed the same day through dark field microscopy at low magnification, projected onto a TV monitor.



The following images were taken after a new computer with improved graphics was purchased alongside new software for the camera –

19-11



They lied to you

Despite repeated assurances from authorities and mainstream media that the Covid-19 vaccines are safe and effective, evidence has emerged time and time again that proves they have not been telling the whole truth.

The use of Graphene Oxide in the Pfizer Covid-19 vaccine has been a source of controversy and concern from the outset, with many individuals claiming that regulators and media outlets were deliberately misleading the public about its inclusion.

Despite initial denials, the documents released by the FDA, which they were forced to publish by order of the Federal Court in the USA, have confirmed the use of Graphene Oxide in the manufacturing process of the Pfizer vaccine, raising questions about who we can trust.

This revelation should cause widespread alarm and will likely fuel suspicion about the true intentions of those in charge of public health.

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SHOCKING STUDY! - VAXXED Lose 25 Years Of Life! - Government Data CONFIRMS!

Apr 1, 2023

<https://banned.video/watch?id=6428e62b551f0f61f7f11924>

Josh Sigurdson reports on the recently compiled government data by the Expose news site showing charts based on statistics proving that the heavily injected lose around 25 years of life span if they're lucky enough to even make it that far. Data shows that every years, despite the level of injections people take going down due to people catching on to the propaganda, excess deaths go up dramatically as all forms of mortality are sped up. We recently reported on the government data out of Australia showing the excess deaths in 2022 were 5162% higher than previous years. It has become apparent that this is only just beginning. In the recent study based on government data out of Cleveland, if the average age of a man is around 80 years if he's unvaxxed, the rate that vaxxed deaths are growing in comparison to unvaxxed, someone who's had 4 or 5 shots and are 30 years old today can expect to live to 55 at the oldest. This shocking data should lead to severe criminal prosecutions but of course it will not, any time soon.

21-1

Shock Study: VAXXED Lose 25 Years Of Life — Government Data CONFIRMS!

World Alternative Media | Banned.Video April 2, 2023

If a 30-year-old today had 4 or 5 COVID shots, they can expect to live to 55 at the oldest, government data suggests.

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<https://banned.video/watch?id=6428e62b551f0f61f7f11924>

Data shows that every year, despite the level of injections people take going down due to people catching on to the propaganda, excess deaths go up dramatically as all forms of mortality accelerate.

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This shocking data should lead to severe criminal prosecutions but of course it will not, any time soon.

Covid Vaccination knocks up to 2.5 Decades off a Man's life according to CDC

THE EXPOSÉ APRIL 1, 2023

The long-term consequences of Covid-19 vaccination are now being realised...

A year ago, doubly vaccinated Australians were 10.72x more likely to catch Omicron than the unvaxxed. Now they are 20x more likely and the triply or more vaxxed are 35x more likely, as the latest NSW Health stats show (see below).

Meanwhile, the latest Cleveland Clinic Data and the latest US data analysed by Josh Stirling, founder of Insurance Collaboration to Save Lives and former #1 ranked Insurance Analyst, shows a really really disturbing trend.

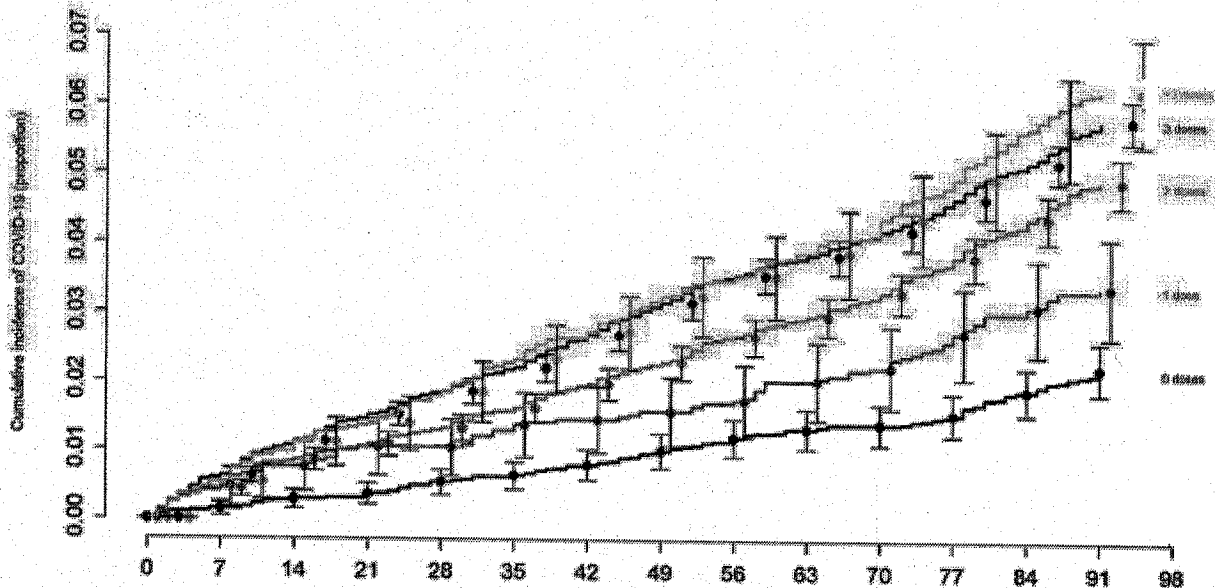
The damage to health caused by each vaccine dose does not lessen over time. It continues indefinitely.

In fact, CDC All-Cause Mortality data show that each vaccine dose increased mortality by 7% in the year 2022 compared to the mortality in year 2021.

So if you have had 5 doses then you were 35% more likely to die in 2022 than you were in 2021. If you have had one dose then you were 7% more likely to die in 2022 than you were in 2021. If you are unvaxxed then you were no more likely to die in 2022 than you were in 2021.

The Cleveland Clinic Data

Here are the Covid infection rates for the 1st 98 days from 2022 September 12, when the bivalent vaccine was first offered to Cleveland Clinic employees. It was not mandated. It was offered.



22-2

Number of doses:	Days since study start date:							
0 doses:	8198	8173	8147	8154	8082	8008	7934	7860
1 dose:	2350	2362	2388	2439	2499	2578	2654	2730
2 doses:	13804	13968	14181	14482	14880	15381	15881	16381
3 doses:	20798	21200	21602	22109	22630	23152	23674	24196
4 doses:	3538	3574	3610	3651	3692	3733	3774	3815

So on 2022September12, 6199 employees were unvaxxed, 2359 were single jabbed, 13804 were double jabbed, 20798 were triple jabbed and 3538 were quad jabbed or penta jabbed with the original vaccine, which was designed against the Wuhan Hu1 reference virus, which was NOT isolated from a Human but was generated on a computer.

The results of their study, shown graphically above, demonstrate that the more doses of the original vaccine you took, the more likely you were to catch covid. In other words the original Covid vaccine is not merely ineffective against Omicron. It is actually anti-effective.

It is therefore not a vaccine against the present strain of Covid. It is an antivaccine. It damages your immune system in a dose-dependent manner. The more shots you took, the more damage you will have done to your immune system.

The writer first saw this from PHE Vaccine Surveillance reports and published his findings to PHE themselves AND on my website and in The Expose, on 2021October10.

'The Science' has now been established by the Cleveland Clinic. Genetic vaccines damage your immune system and make you not less likely but more likely to be infected with Covid.

Not only that but they have horrendous side effects on the cardiovascular, neurological and reproductive systems as well.

They are nothing short of mandatory progressive euthanasia.

CDC All-Cause Mortality Data shows that every year, every vaccinated person becomes more and more likely to die at a rate of 7% PER JAB PER YEAR. That is a slow-acting genetic poison.

If people were recovering from the 1st jab, then it would not be having precisely the same effect as the 5th jab (namely a 7% increase in mortality). This is the long term problem. People are not recovering from the damage done by the shots in terms of excess mortality.

So taking 2021 as the base line, a 5 dosed person would be 350% more likely to die in 2031 and 700% more likely to die in 2041 and 1050% more likely to die in 2051 than an unvaxxed person. It is just like compound interest.

Using this result, we can calculate the loss in life expectancy for a 30 year old male as follows... The life expectancy of a 30 year old unvaxxed male in the UK is around 80 years. So he can expect another 50 years of life.

In statistical terms, half of his cohort are dead by 80. The life expectancy of a 30 year old quintuply vaxxed person in the UK is 56 years. Assuming UK males respond to the vaccines in the same way as US people. Alternatively quintuply vaxxed US 30 year old males have likewise lost 24 years of life expectancy.

UK life expectancy data is from Statista. In the table below we add the extra 7% mortality per jab per year to the 2020 UK levels shown in Column2. So in a 5 year period, the average increase in expected mortality would be -

- (0% + 35%)/2 = 17.5% from one jab
- (0% + 70%)/2 = 35% from two jabs
- (0% + 105%)/2 = 52.5% from three jabs
- (0% + 140%)/2 = 70% from four jabs
- (0% + 175%)/2 = 87.5% from five jabs

Life Expectancy for unvaxxed and 1-5 dosed UK males

Age Group	% chance of dying in age group unvaxxed	% chance of dying at age of group unvaxxed	% chance of dying at age of group 1 Dose	% chance of dying at age of group 2 Doses	% chance of dying at age of group 3 Doses	% chance of dying at age of group 4 Doses	% chance of dying at age of group 5 Doses
0-4	2.1	2.1	2.1	2.1	2.1	2.1	2.1
5-29	0.75	0.73 (97.9% left)	0.73	0.73	0.73	0.73	0.73
30-34	0.4	0.39 (97.2% left)	0.46 (+17.5%)	0.53 (+35%)	0.59 (+52.5%)	0.66 (+70%)	0.73 (+87.5%)
35-39	0.6	0.56 (96.8% left)	0.68 (+52.5%)	1.19 (+105%)	1.49 (+157.5%)	1.80 (+210%)	2.10 (+262.5%)
40-44	0.95	0.91 (96.2% left)	1.71 (+87.5%)	2.50 (+175%)	3.30 (+262.5%)	4.09 (+350%)	4.89 (+437.5%)
45-49	1.45	1.38 (96.3% left)	3.07 (+122.5%)	4.78 (+245%)	6.45 (+367.5%)	8.14 (+480%)	9.83 (+612.5%)
50-54	2.2	2.07 (93.9% left)	5.33 (+157.5%)	8.59 (+315%)	11.85 (+472.5%)	15.11 (+630%)	18.37 (+787.5%)
55-59	3.25	2.98 (91.8% left)	8.72 (+192.5%)	14.45 (+385%)	20.19 (+577.5%)	25.93 (+770%)	31.66 (+962.5%)
60-64	5.05	4.48 (88.8% left)	14.67 (+227.5%)	24.96 (+455%)	35.06 (+682.5%)		
65-69	8.0	6.74 (84.3% left)	24.43 (+282.5%)				
70-74	12.4	9.62 (77.6% left)	38.24 (+297.5%)				
75-79	21.6	14.69 (68.0% left)					
80-84	38.5	20.52 (53.3% left)					
85-89	68.9	22.60 (32.8% left)					
Totals		0-79 is 46.67%	0-64 is 37.67%	0-59 is 34.85%	0-59 is 46.7%	0-54 is 32.63%	0-54 is 38.74%
50% gone at		80	67	62	60	57	56

- 1 jab robs 30 year old men of 13 years
- 2 jabs robs 30 year old men of 18 years
- 3 jabs robs 30 year old men of 20 years
- 4 jabs robs 30 year old men of 23 years
- 5 jabs robs 30 year old men of 24 years

That is the price you pay for trusting the NHS, trusting the government and trusting the BBC and the Main Stream Media.

That is what Media like the Expose have been trying to prevent.

NSW Vax status 2023Jan7

The population of New South Wales in Australia was 6,505,883 in 2022. the vaccination status is as follows...

<https://www.health.gov.au/our-work/covid-19-vaccines/vaccination-numbers-and-statistics>

2023Jan7 status	0 Doses	1 Dose	2 Doses	3 Doses	4+ Doses	Total Pop
Number in NSW with at least	6,505,883	6,317,213	6,233,463	4,591,260	1,719,654	
Number in NSW with precisely	188,670	83,750	1,642,203	2,871,606	1,719,654	6,505,883
% in NSW with at least	100	97.1	95.8	70.5	45.7	
% in NSW with precisely	2.9	1.3	25.3	24.8	45.7	100

NSW Australia data for Hospital and ICU Admissions during the last 6 weeks of 2022 show dose-dependent immune system destruction

<https://www.health.nsw.gov.au/Infectious/covid-19/Pages/weekly-reports.aspx>

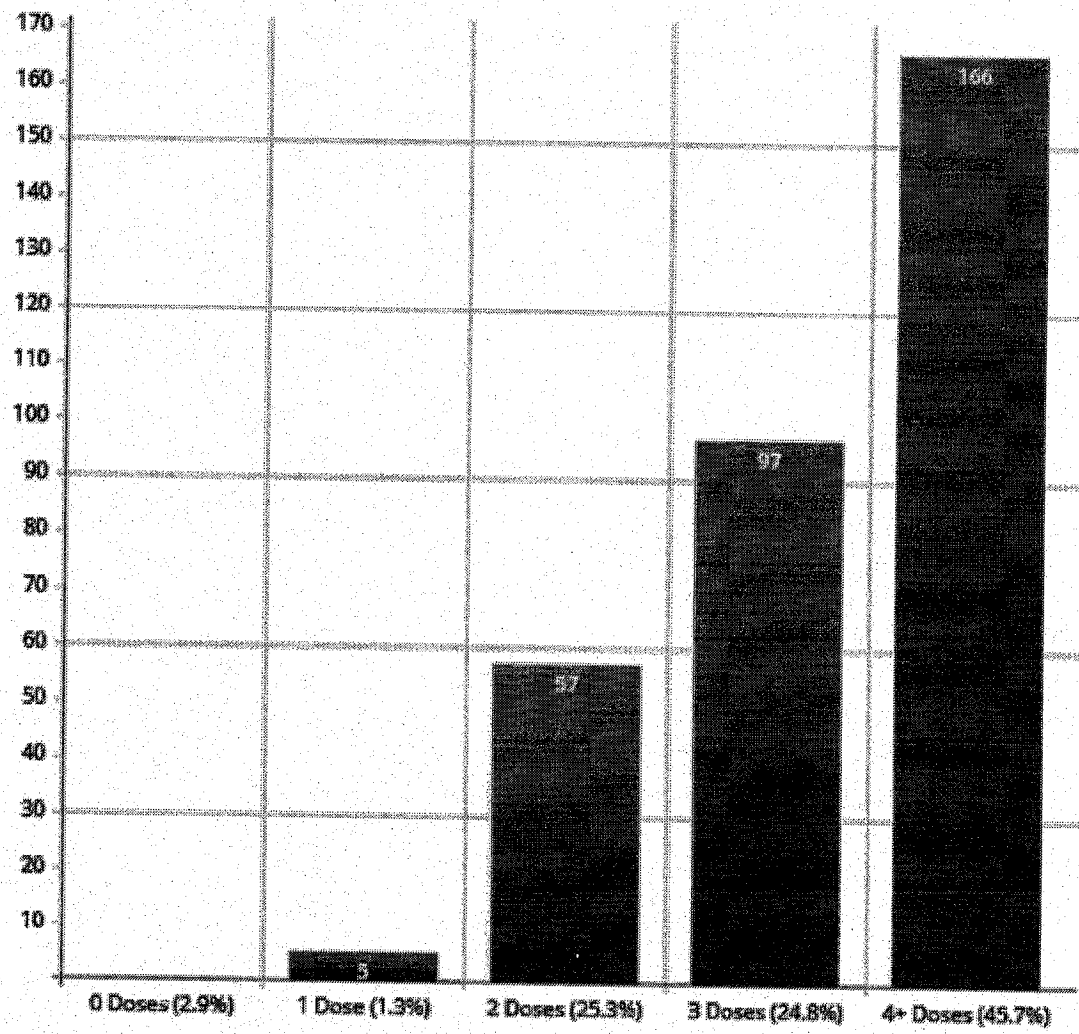
22-4

<https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221231.pdf>
<https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221217.pdf>
<https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221210.pdf>
<https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221203.pdf>
<https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221126.pdf>
<https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221119.pdf>

NSW Covid ICU admissions 2022Nov19-Dec31

NSW Australia Hospital ICU Admissions by vax status for last 6 weeks of 2022 (Nov 19-Dec 31)

<https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221231.pdf>
[-20221217.pdf](https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221217.pdf), [-20221210.pdf](https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221210.pdf), [-20221203.pdf](https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221203.pdf), [-20221126.pdf](https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221126.pdf), [-20221119.pdf](https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221119.pdf)
Total Population of NSW is 6,505,883

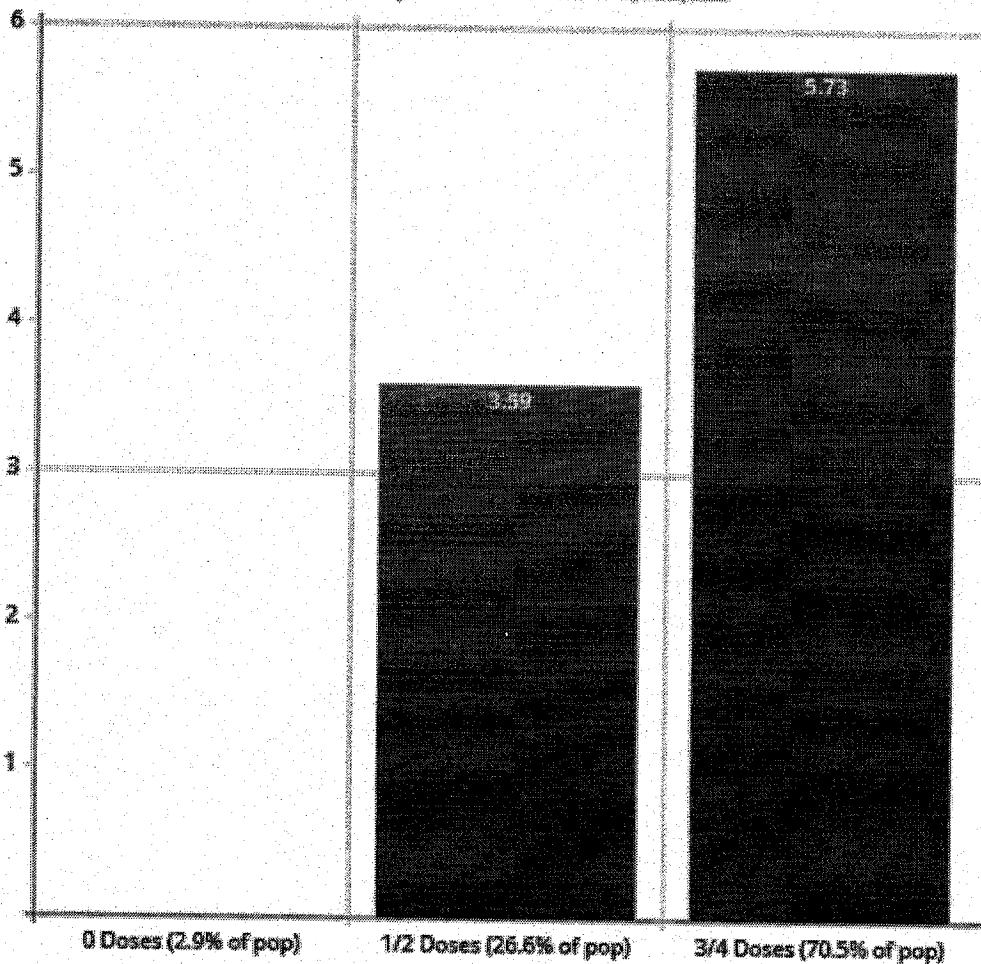


22-5

Doses	Dosed Pop	NSW %	Nov13-19	Nov20-26	Nov27-Dec3	Dec4-10	Dec11-17	Dec18-24 Dec25-31	Nov13 - Dec31	ICU Admissions per % of pop	ICU Admissions per 100k
4+	1,719,654	45.7	23	12	18	31	24	58	166	3.63	5.58
3	2,871,606	24.8	18	9	15	12	14	29	97	3.91	6.01
2	1,642,203	25.3	4	10	7	11	8	17	57	2.25	3.49
1	83,750	1.3	0	0	3	1	0	1	5	3.85	5.92
0	188,670	2.9	0	0	0	0	0	0	0	0	0
U			14	11	11	8	12	35	91		
1/2	1,725,953	26.5	4	10	10	12	8	18	62	2.34	3.59
3/4+	4,591,260	70.6	41	21	33	43	38	87	263	3.73	5.73

NSW Australia Hospital ICU Admissions per 100k by vax status for last 6 weeks of 2022 (Nov19-Dec31)

<https://www.health.nsw.gov.au/infectious/covid-19/Documents/weekly-covid-overview-20221231.pdf>
 -20221217.pdf, -20221210.pdf, -20221203.pdf, -20221126.pdf, -20221119.pdf
 Total Population of NSW is 6,505,883



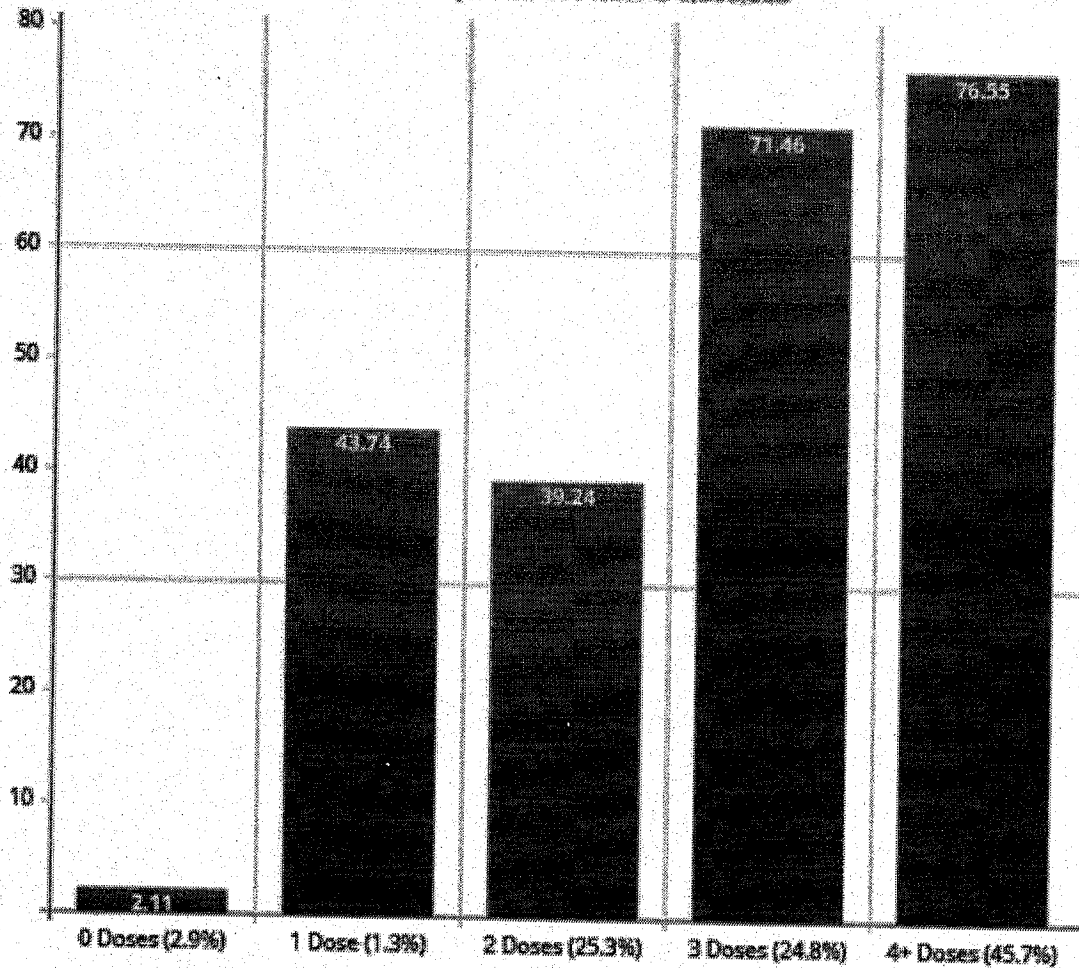
Made with Livegap Charts

22-6

NSW Covid Hospital admissions 2022Nov19-Dec31

NSW Australia Hospital Admissions per 100k by vax status for last 6 weeks of 2022 (Nov19-Dec31)

<https://www.health.nsw.gov.au/Infectious/covid-19/Documents/weekly-covid-overview-20221231.pdf>
 -20221217.pdf, -20221210.pdf, -20221203.pdf, -20221126.pdf, -20221119.pdf
 Total Population of NSW is 6,505,883



Doses	Dosed Pop	NSW %	Nov13-19	Nov20-26	Nov27-Dec3	Dec4-10	Dec11-17	Dec18-24 Dec25-31	Nov13-Dec31	Admissions per % of pop	Admissions per 100k
4+	1,719,654	45.7	214	249	296	345	362	810	2276	49.80	76.55
3	2,871,806	24.8	114	142	170	163	187	377	1153	46.49	71.46
2	1,642,203	25.3	59	80	85	95	109	218	646	25.53	39.24
1	93,750	1.3	4	6	8	3	6	10	37	28.46	43.74
0	188,670	2.9	0	3	0	1	0	0	4	1.37	2.11
U			120	129	138	186	170	364	1107		

22-7

There is the proof of immune system destruction by vaccination mediated spike proteins. We see the same pattern for Hospital admissions in Australia as we see for infection rates in Cleveland. The more shots you take the weaker your immune system becomes. And that is for the target of the therapy! The above graphs do NOT address any of the side effects.

Conclusion

The population of NSW in Australia is 6½ million people. They are a highly vaccinated group. Looking at the Australian Government data for the last 6 weeks of 2022 we see that.

- 1. Those with 1 or 2 doses are 20x more likely to be admitted to hospital with Covid than those with no doses.**
- 2. Those with 3 or 4 or more doses are 35x more likely to be admitted to hospital with Covid than those with no doses.**
- 3. Being unvaxxed provides 100% protection from having to go to the ICU. Being vaxxed gives you a 6 in 100,000 chance of being hospitalised in the ICU.**
- 4. Vaccines are unsafe and extremely anti-effective.**
- 5. Covid Vaccination is putting unsustainable pressure on hospitals and ICUs in NSW and by implication all over the world.**
- 6. The NHS in the UK will be destroyed unless vaccinations are banned immediately. It may already be too late.**
- 7. The vaccines prevent herd immunity. Herd immunity will never be reached in the vaxxed. It has already been reached in the unvaxxed**
- 8. The continuation of the pandemic is entirely caused by the anti-vaccines.**

The last time I looked at the data in NSW, for the last 6 weeks of 2021, the double vaxxed were 2.18x more likely to catch Omicron than the unvaxxed.

Here we are today, 12 months later in the last 6 weeks of 2022, and the double vaxxed are not 2.18x, but actually 20x more likely to catch the latest variant. And the triple jabbed are 35x more likely!

So there is the immune system destruction that I predicted in October 2021. There is the progressive vaccine mediated AIDS. These are farcical Monty Python kinds of numbers. As I understand it the Australian government is now going to stop classifying hospital data by vax status.

Talk about bury your head in the sand. In any event. It is too late. The cat is out of the bag. These figures are an accelerating immunological catastrophe.

The data we have analysed are for the disease that the vaccines are supposed to be protecting us from (Covid-19). They do not address the plethora of cardiovascular, neurological, immunological, reproductive and systemic side effects of the genetic anti vaccinations which cause further hospital admissions.

We have given control of our Health Services big pharma and they have destroyed those services. The day will come, if it has not already, when 50% of the patients in our hospitals are suffering from vaccine-mediated pathology.

The question then becomes, how many others in addition to the vaccine damaged are suffering from Big Pharma-mediated pathologies resulting from other Big Pharma 'medications'?

The credibility and the viability of all health care worldwide is therefore entirely dependent upon the immediate cessation of genetic vaccination.

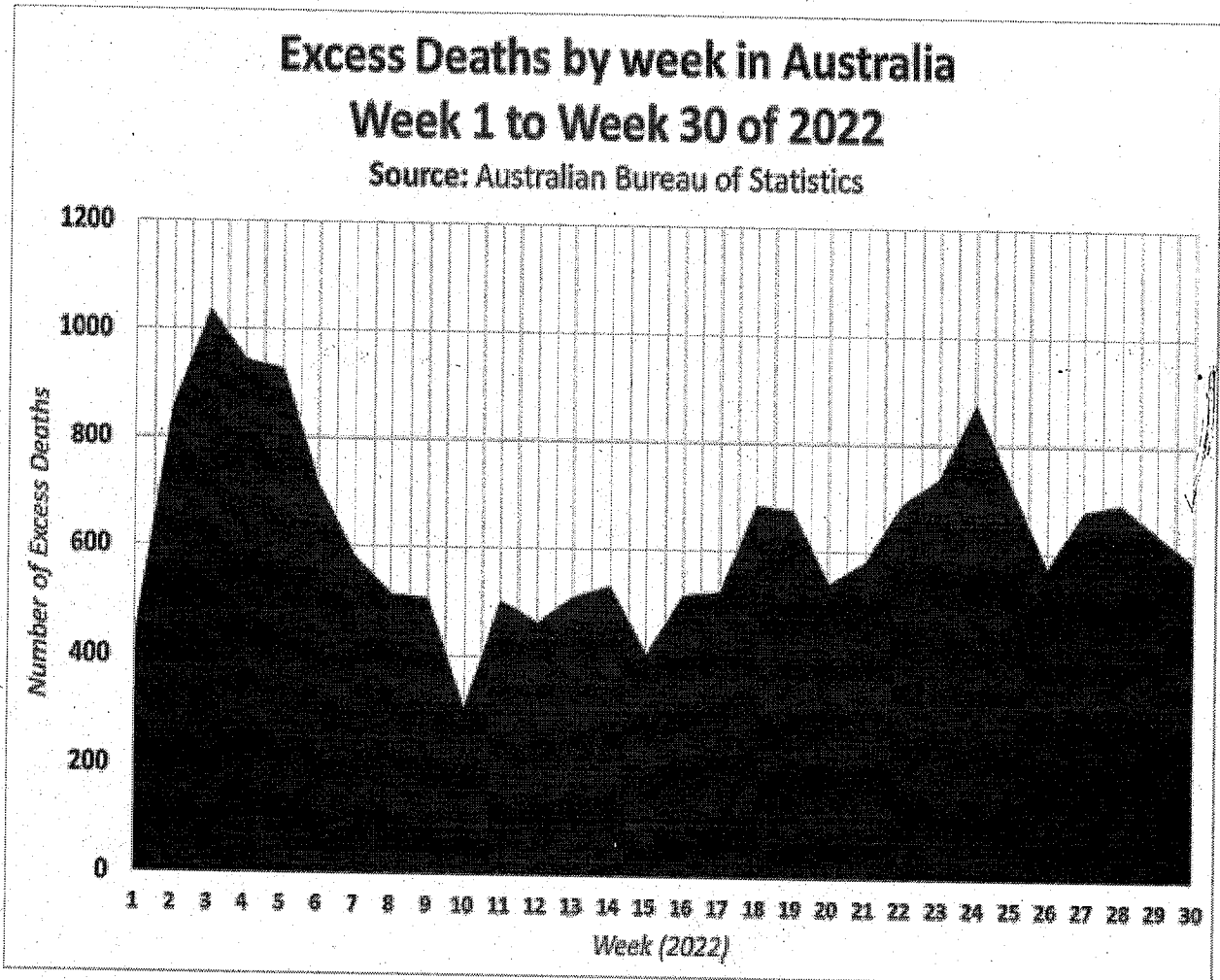
23-1

Australia suffered 15x more Excess Deaths in the first 7 months of 2022 than it did in the whole of 2020

THE EXPOSÉ NOVEMBER 26, 2022

Official figures published by the Australian Bureau of Statistics confirm that Australia recorded 15 times more excess deaths in the first 7 months of 2022 than it did throughout the whole of 2020.

Further figures also reveal the country suffered 8.5 times more excess deaths in 2021 following the roll-out of the Covid-19 injection than it did in 2020 prior to the roll-out of the Covid-19 injection.

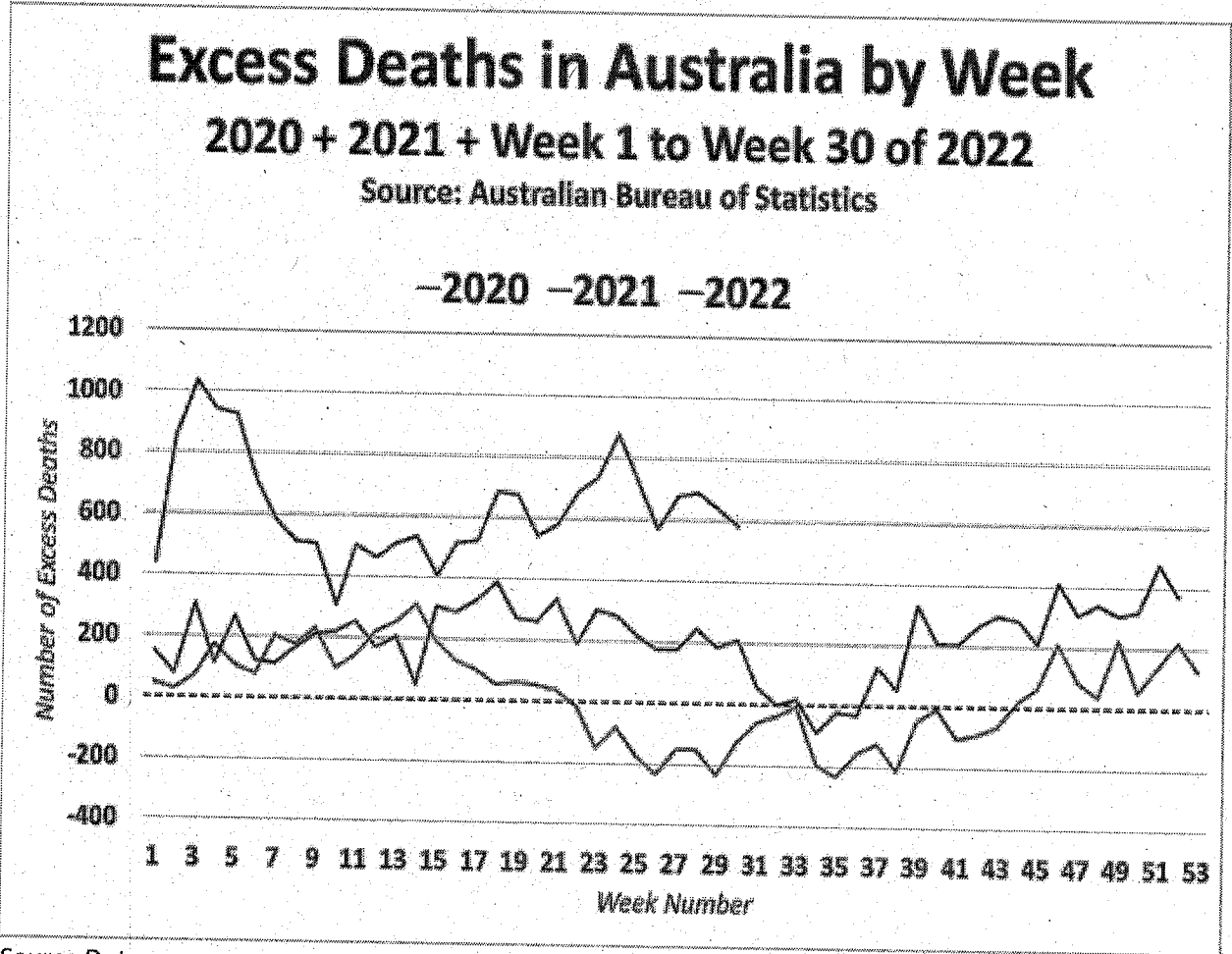


The Organisation for Economic Co-operation and Development (OECD) is an intergovernmental organisation with 38 member countries founded in 1961 to stimulate economic progress and world trade. And for some reason, they host a wealth of data on excess deaths throughout 2022. You can find that data for yourself [here](#).

The following chart has been created using the figures found in the OECD database. Figures that have been provided to the OEC by the Australian Bureau of Statistics.

23-2

And it shows excess deaths across Australia by week in 2020, 2021 and 2022 compared to the 2015-2019 five-year average.



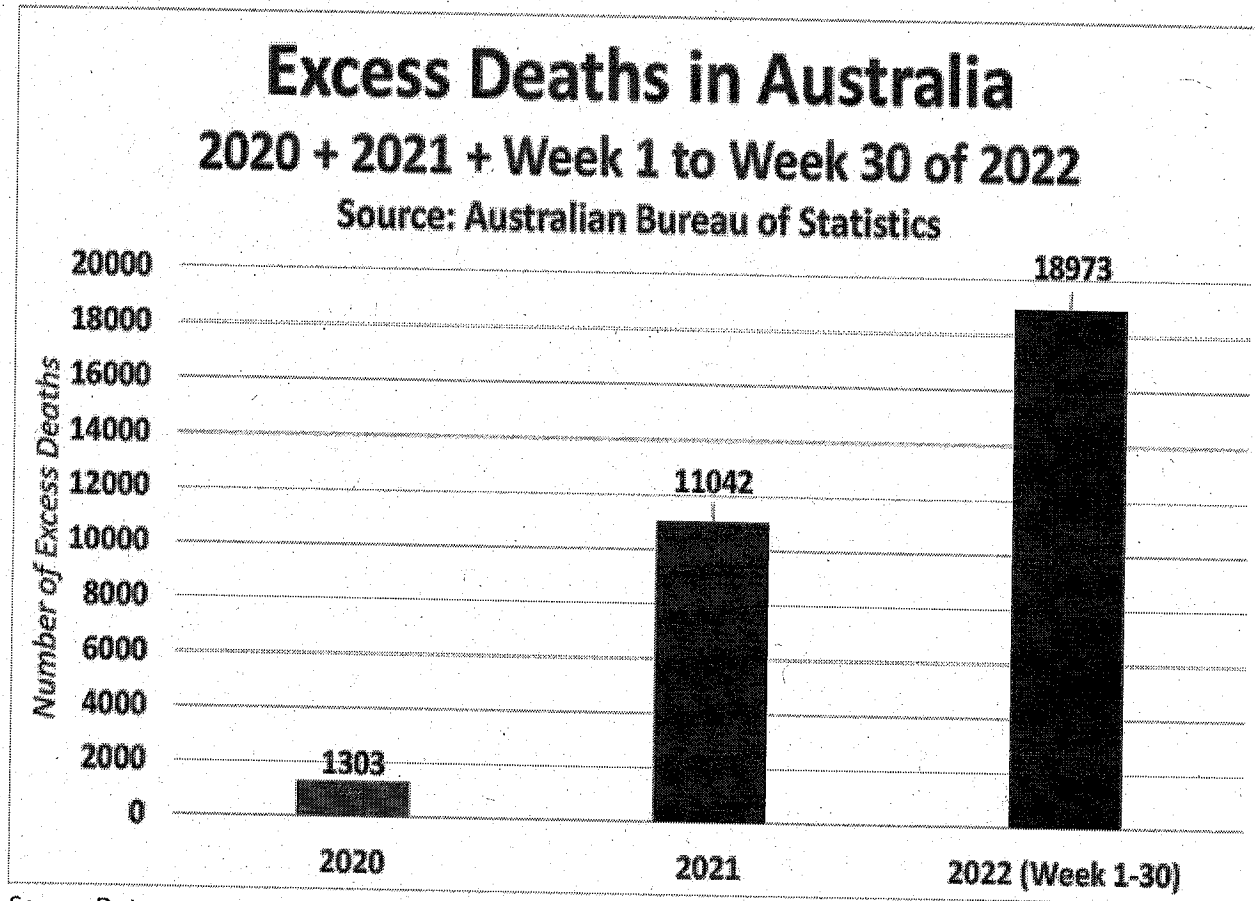
Source Data

The above chart reveals that Australia actually suffered fewer deaths than expected throughout the vast majority of 2020 at the height of the Covid-19 pandemic.

It was a different story in 2021 however, with weeks 34 to 36 being the only weeks where deaths were less than the five-year average.

But as you can see from the above, something has gone drastically wrong in 2022 because the country has suffered significant excess deaths week on week since the beginning of the year.

The following chart shows the overall totals for each year –



Source Data

Australia actually only recorded 1,303 excess deaths in 2020 whilst the world was allegedly in the midst of a “deadly” pandemic.

Unfortunately, this then increased by 747% to 11,042 deaths in 2021 following the roll-out of a Covid-19 injection that was supposed to reduce excess deaths being recorded around the world due to the alleged Covid-19 virus.

But by the end of July 2022, Australia had suffered more excess deaths in 7 months than it had in the previous two years combined, with 18,973 excess deaths, representing a 1,356% increase on 2020.

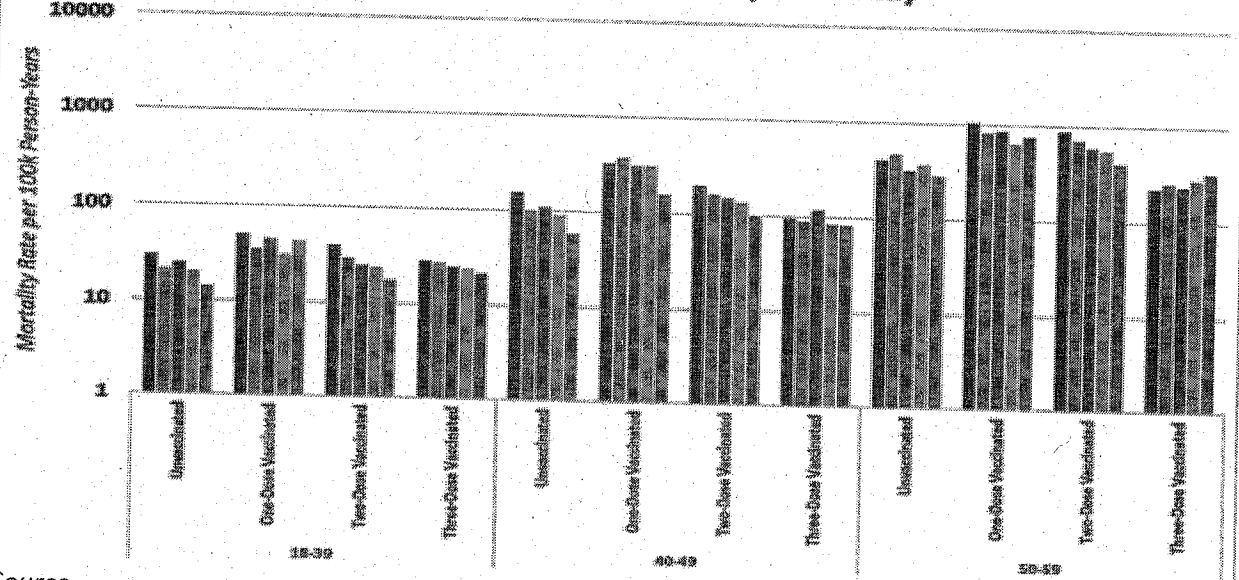
It is not known why so many people are suddenly dying across the country, but data provided by the UK Government suggests the cause may well be the very thing that was supposed to reduce deaths, the Covid-19 injections.

The data was published in July by the UK Government organisation known as the Office for National Statistics (ONS), in a report titled ‘*Deaths by Vaccination Status, England, 1 January 2021 to 31 May 2022*’, and it can be accessed on the ONS site [here](#), and downloaded [here](#).

The following two charts show the monthly age-standardised mortality rates by vaccination status for non-Covid-19 deaths in England using figures extracted from the ONS dataset –

Monthly Age-Standardised Mortality Rates by Vaccination Status by Age Group for Non-Covid-19 Deaths in England
January to May 2022

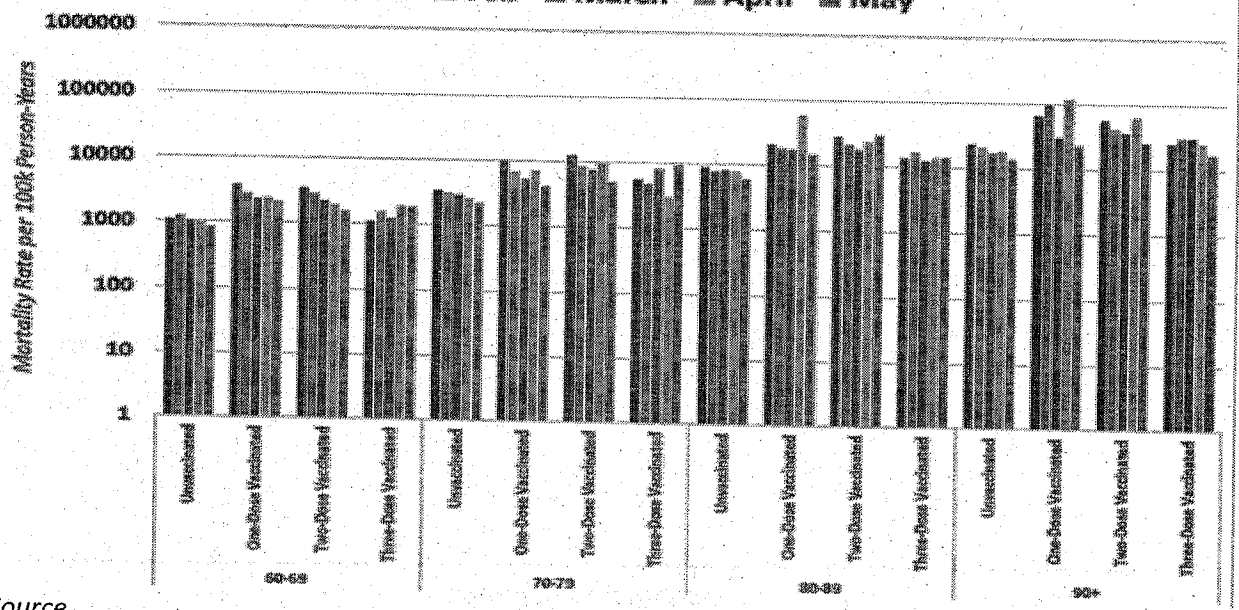
Source: (UK Gov.) Office for National Statistics
 ■ Jan ■ Feb ■ March ■ April ■ May



Source

Monthly Age-Standardised Mortality Rates by Vaccination Status by Age Group for Non-Covid-19 Deaths in England
January to May 2022

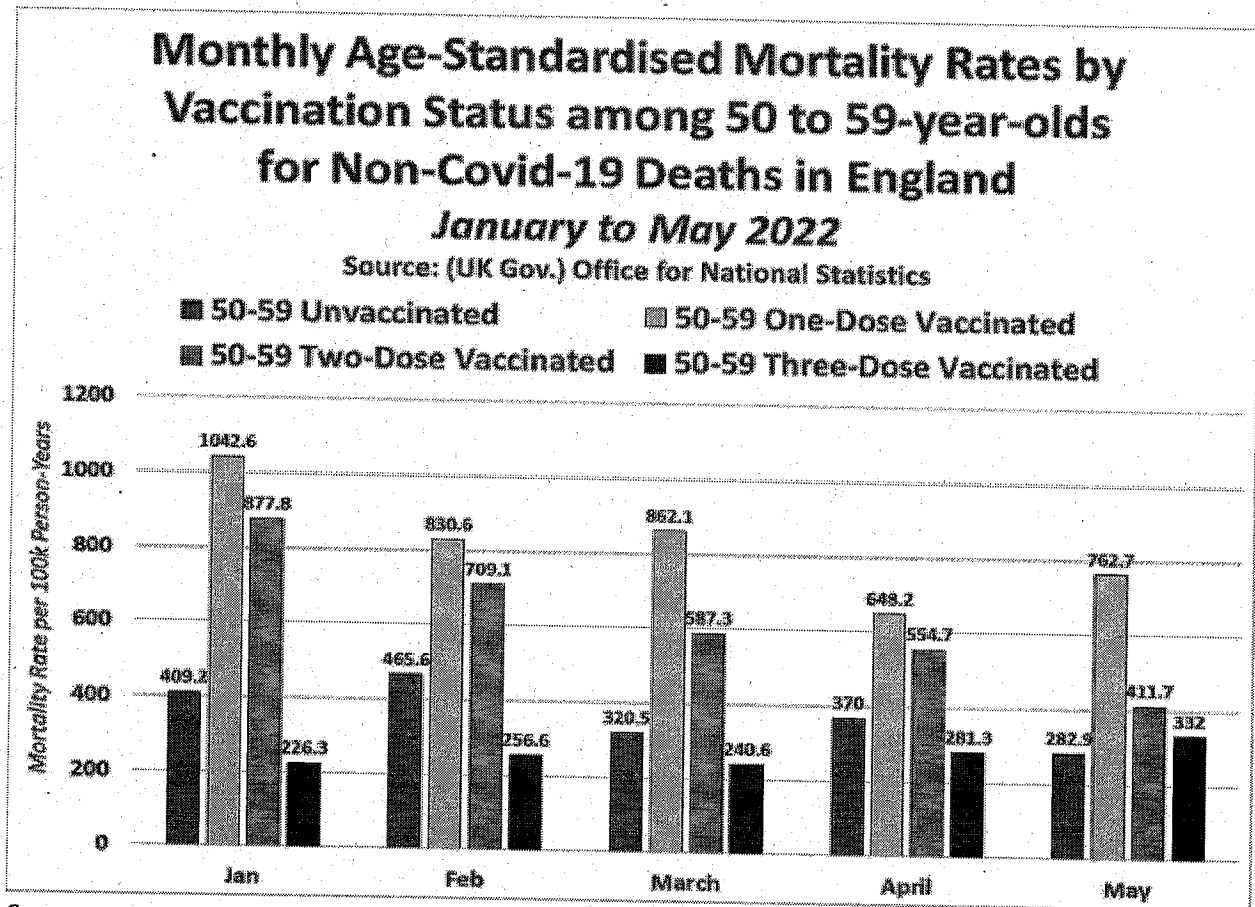
Source: (UK Gov.) Office for National Statistics
 ■ Jan ■ Feb ■ March ■ April ■ May



Source

23-5

A more detailed breakdown of the above figures by individual age groups can be found [here](#). But the following chart for 50 to 59-year-olds gives you a good idea of what the data reveals –



Source

In every single month since the beginning of 2022, partly vaccinated and double vaccinated 50 to 59-year-olds were more likely to die than unvaccinated 50-59-year-olds.

May was the worst month for partly vaccinated 50 to 59-year-olds, as they were 170% more likely to die than unvaccinated 50 to 59-year-olds.

Whereas January was the worst month for double-vaccinated 50-59-year-olds, as they were 115% more likely to die than unvaccinated 50-59-year-olds.

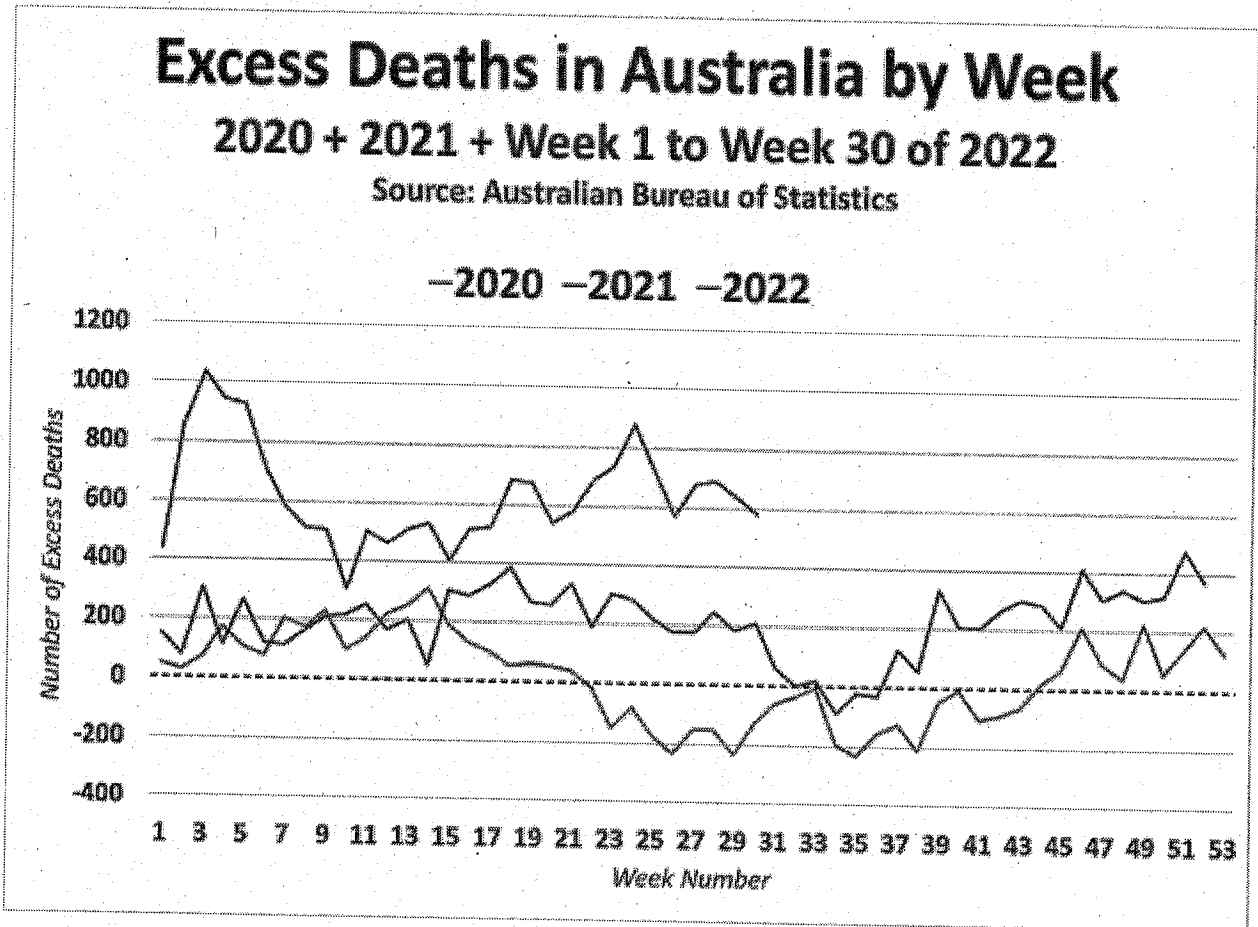
By May 2022, five months after the mass Booster campaign, triple-vaccinated 50-59-year-olds were 17% more likely to die than unvaccinated 50-59-year-olds, with a mortality rate of 332 per 100k among the triple-vaccinated and a mortality rate of 282.9 per 100k among the unvaccinated.

Therefore, by May 2022, unvaccinated 50-59-year-olds were the least likely to die among all vaccination groups.

23-6

The data published by the UK Government is indisputable evidence that Covid-19 vaccination increases a person's risk of death, and is therefore causing more deaths than would have otherwise occurred if the Covid-19 vaccine has not been rolled-out.

This is most likely why official figures published by the Australian Bureau of Statistics confirm Australia recorded 15 times more excess deaths in the first 7 months of 2022 than it did throughout the whole of 2020.



24-1

Risk Of Cardiac Death Tripled For Young Women Following AstraZeneca COVID-19 Vaccination: Study

Mar 30, 2023

Lily Zhou via The Epoch Times

The risk of sudden cardiac death in young women more than tripled following an AstraZeneca COVID-19 shot, according to a study using England's official data published on Monday.

Vahé Nafilyan, senior statistician at the Office for National Statistics (ONS), said researchers found "receiving a first dose of a non-mRNA vaccine was associated with an increased risk of cardiac death in young women."

There was no evidence that the risk of death in young people increased following vaccination with mRNA shots, such as those produced by Pfizer-BioNTech and Moderna.

The ONS compared deaths of people aged between 12 and 29 that occurred within 12 weeks of COVID-19 vaccination—the so-called risk period—to those that occurred at all times after the risk period, to estimate the risk of death following vaccination.

After cross-referencing the deaths with records of COVID-19 vaccination and test results, the ONS said there had been "no significant increase in cardiac or all-cause mortality" within 12 weeks of receiving COVID-19 vaccines.

However, a breakdown of data showed that the risk of cardiac death among young women was three times higher in the 12 weeks following any dose of non-mRNA vaccination, compared with the longer-term risk.

When only the first dose was included, young women's risk of cardiac death become 3.5 times higher within 12 weeks of vaccination.

But the ONS also noted that the subgroup who received non-mRNA vaccines "was more likely to be clinically vulnerable and may be at greater risk of adverse events following vaccination than the general population."

It also said the absolute number of deaths was small.

"According to the statistical model, 11 out of the 15 cardiac deaths in young women that occurred within 12 weeks of a first dose of a non-mRNA vaccine were likely to be linked to the vaccine; this corresponds to 6 cardiac-related deaths per 100,000 females vaccinated with at least a first dose of a non-mRNA vaccine," the ONS said.

The study also examined the effect of COVID-19 on young people, concluding that a positive test was associated with increased cardiac and all-cause mortality and that the risk

24-2

was higher in those who were unvaccinated at the time of testing than in those who were vaccinated.

Noting the limitations of the method, the study said some deaths that occurred during the period may not have been registered by the cut-off date because deaths of young people and deaths that occurred soon after COVID-19 vaccination are more likely to be referred to the coroner and "registration delays can be substantial."

Although the subgroup of deaths that occurred in hospitals were not subject to registration delays, sudden cardiac deaths mostly occur outside of hospitals and may not be captured in the data, the paper said.

Spike Protein May Be the Problem

Adam Finn, professor of paediatrics at the University of Bristol and a member of the UK's Joint Committee on Vaccination and Immunisation, said the data generated "as many questions as answers."

"The findings are somewhat unexpected, as concerns about rare cardiac side-effects—specifically myocarditis and pericarditis—have hitherto been particularly associated with mRNA vaccine second doses in males especially when the dose interval was short, whereas the signal reported here is primarily in non-mRNA first doses in females," Finn said in a statement.

He said the overall data seems "reassuring," and the increased mortality associated with a positive COVID-19 test result "raises the question whether the spike protein—which is expressed both during infection and following vaccination—is the cause."

"The next and most pressing issue that needs to be addressed is to gather more detailed information on what the nature of the reported cardiac events actually was, as this would help us begin to understand what is really being seen in these figures and might help guide future policy and vaccine design," he added.

25-1

New Idaho Bill to Charge Those Who Administer mRNA Vaccines with Misdemeanor

Jim Hoft Feb. 16, 2023

A new bill has been introduced in Idaho that would make the administration of experimental mRNA COVID-19 vaccines illegal.

Representative Judy Boyle (R-Midvale) and Senator Tammy Nichols (R-Middleton) sponsored **House Bill 154**.

Sen. Nichols introduced the new bill on the 15th of February before the House Health and Welfare Committee, according to KTVB.

According to the bill text, "A person may not provide or administer a vaccine developed using messenger ribonucleic acid technology for use in an individual or any other mammal in this state."

A person who violates the bill will be guilty of a misdemeanor.

The new legislation, if passed, would go into effect on July 1, 2023.

KTVB reported:

Nichols said during her presentation to the committee, "We have issues this was fast tracked." Nichols said there is no liability, informed consent or data on mRNA vaccines. She later clarified she was referring to the two COVID-19 vaccines, Pfizer and Moderna.

"I think there is a lot of information that comes out with concerns to blood clots and heart issues," Nichols said.

Rep. Ilana Rubel, D-Boise, questioned Nichols' statement that the vaccines were fast-tracked. She said her understanding was that the vaccines were approved and survived the testing, later approved by the FDA.

Nichols said she is finding it "may not have been done like we thought it should've been done."

"There are other shots we could utilize that don't have mRNA in it," Nichols said.

More and more medical experts, scientists, and right group advocates all over the world are now demanding that the government should stop its COVID-19 vaccination campaign due to its devastating side effects among patients.

And yet governments still turn a blind eye to one of the most atrocious crimes against humanity.

Idaho Lawmakers Seek To Criminalize Injecting Of mRNA COVID-19 Vaccines

Naveen Athrappully via The Epoch Times February 22, 2023

Republican lawmakers from Idaho have introduced a bill that will make it a crime to administer mRNA vaccines in the state, citing safety concerns, which would apply to COVID-19 vaccines manufactured by companies like Pfizer and Moderna.

“Notwithstanding any other provision of law, a person may not provide or administer a vaccine developed using messenger ribonucleic acid (mRNA) technology for use in an individual or any other mammal in this state. **A person who violates this section is guilty of a misdemeanor,**” according to House Bill 154 ([pdf](#)) presented to the state’s House Health and Welfare Committee on Feb. 15. The bill was introduced by state Sen. Tammy Nichols and Rep. Judy Boyle.

While promoting the bill before the committee, Nichols pointed out that there have been “more and more concerns rising” about the mRNA vaccines.

“We have issues that this was fast-tracked, there’s no liability, there’s no access to data, risk-benefit analysis has not been done, there’s no informed consent,” she said.

Nichols insisted that mRNA vaccines be treated in a “similar manner” to harmful drugs. She pointed out that there are “concerns of blood clots and heart issues” related to using COVID-19 mRNA vaccines which need to be addressed.

COVID-19 mRNA Approvals

At present, three types of COVID-19 vaccines exist—protein subunit, viral vector, and mRNA. Vaccines produced by Moderna and Pfizer, which have been widely distributed, come under mRNA categorization.

Around 400 million Pfizer COVID-19 vaccines and over 250 million Moderna vaccines have been administered in the United States.

According to the CDC, mRNA vaccines use mRNA developed in a laboratory to teach cells in a human body to produce a protein or part of a protein triggering an immune response. It is this immune response that then creates antibodies to fight the SARS-Cov-2 virus.

State Rep. Ilana Rubel, a Democrat, questioned Nichols about fast-track approvals granted to the COVID-19 mRNA vaccines by the Food and Drug Administration (FDA).

Rubel asked about the vaccines being initially approved under the “ordinary approval process” and subsequently passing the scrutiny of “normal tests.”

27-1

COVID-19 Vaccines Can Cause 'Permanent Disabilities,' Says German Health Minister

MAR 18, 2023 [Lorenz Duchamps via The Epoch Times](#)

Germany's Minister of Health Karl Lauterbach, who once claimed that COVID-19 vaccination is free of side effects, **admitted last week that he was wrong, saying adverse reactions occur at a rate of one in 10,000 doses and can cause "severe disabilities."**

On Aug. 14, 2021, Lauterbach said on Twitter that the vaccines had "no side effects," further questioning why some Germans refused to get vaccinated against COVID-19.

During an interview on ZDF's "Heute Journal" on March 12, Lauterbach was asked by anchor Christian Sievers about the claim he made in the summer of 2021, confronting the health minister with his previous tweet that stated the shots are virtually free of side effects.

Lauterbach responded that the tweet was "misguided" and an "exaggeration" he made at the time, noting that it "did not represent my true position."

"I've always been aware of the numbers and they've remained relatively stable ... one in 10,000 [are injured]," Lauterbach said. "Some say that it's a lot, and some say it's not so many."

Lauterbach's remark on vaccine adverse events came after the German network played a segment of several Germans who've been seriously injured after getting the shot, including a 17-year-old gymnast who previously competed in the German Artistic Gymnastics Championships before she was hospitalized for more than one year shortly after receiving the second dose of the BioNTech COVID-19 vaccine.

"What do you say to those who have been affected [by vaccine injuries]?" Sievers asked Lauterbach.

"What's happened to these people is absolutely dismaying, and every single case is one too many," Lauterbach responded. **"I honestly feel very sorry for these people. There are severe disabilities, and some of them will be permanent."**

Steve Kirsch, executive director of the Vaccine Safety Research Foundation, did not agree with Lauterbach, but he commended the health minister for making "progress" when comparing his latest remark to his previous comments regarding the safety and effectiveness of COVID-19 vaccines.

"The true rate of serious adverse events is approximately 100 times greater than the figures Lauterbach cited—'closer to 1 in 100 doses' and 'For death, it is ~1 in 1,000 doses,'" Kirsch said on Twitter.

By Oct. 31, 2022, the Paul-Ehrlich-Institut received a total of 333,492 individual case reports on suspected COVID-19 vaccine adverse reactions or vaccine side effects in Germany, according to official data (pdf) released in December 2022 by the medical regulatory body that researches vaccines and biomedicines.

"The number of individual case reports per month peaked in December 2021 and continued through the summer," according to the federal agency, which is subordinate to the German Ministry of Health.

Despite these findings, the country's health ministry website states, as of March 16, that "modern vaccines are safe and adverse effects only occur in sporadic cases."

Lawsuits Pending

As the subject of post-vaccine injuries has started to be more widely covered by some German media outlets, lawsuits have begun to roll out against BioNTech, and also against other COVID-19 vaccine manufacturers.

BioNTech has denied all responsibilities, ZDF reported.

Vaccine manufacturers such as Pfizer and Moderna have immunity from liability if something unintentionally goes wrong with their vaccines, putting them in a very strong legal position.

"It's true that within the framework of these EU contracts, the companies were largely exempted from liability and that the liability, therefore, lies with the German state," Lauterbach said.

Read more [here...](#)

28-1

Vaccine Mandates Did Nothing to Stop Spread of Covid, Study Finds

Frank Bergman February 23, 2023

Vaccine mandates that were implemented across the United States did nothing to stop the spread of COVID-19, a new study has found.

In a study conducted by George Mason University's Mercatus Center, researchers analyzed data to examine the efficacy of citywide Covid vaccine mandates in 2021.

Across the country, widespread mandates were issued for businesses, transport, and indoor public places.

However, the researchers say they found "no evidence" that these measures did anything to reduce Covid cases or deaths.

"These mandates imposed severe restrictions on the lives of many citizens and business owners," the researchers said.

"Yet, we find no evidence that the mandates were effective in their intended goals of reducing COVID-19 cases and deaths.

The researchers evaluated data from several major U.S. cities, including New York, Los Angeles, Boston, Chicago, New Orleans, Philadelphia, San Francisco, Seattle, and Washington, D.C.

"We find no evidence that the announcement or implementation of indoor vaccine mandates in the cities listed had any significant effect on vaccine uptake, COVID-19 cases, or COVID-19 deaths, and this is largely consistent for all US cities that implemented the mandate," the researchers wrote.

When Covid first emerged in America in the early winter of 2020, leaders of Democrat-led big cities forced their residents into major lockdowns.

The measures forced businesses to close and shut down entertainment and sports venues.

They also ordered everyone to wear masks.

When vaccines were rolled out to the public, those same leaders issued mandates that forced millions of people to take them.

For example, Philadelphia's Democrat Mayor Jim Kenney said in August 2021 that science shows mask and vaccine mandates would slow the spread.

"The updated policies we announced today are critical to slowing the spread of the Delta variant of COVID-19, which is more dangerous and transmissible than earlier forms of the virus," Kenney said in a statement.

28-2

"The science is clear: these measures will protect Philadelphians and save lives."

However, researchers found zero evidence to back the alleged "science."

"Our findings put into question the efficacy of city-level vaccine mandates," the researchers note.

"Indoor vaccine mandates caused large disruptions for many individuals and businesses.

"New York City, for example, fired 1,430 city workers for failing to comply with its vaccine mandate.

"A survey found that over 90% of NYC restaurants reported having customer-related challenges, such as losing customers who objected to the mandate, and 75% having staff-related challenges.

"Those are just a small fraction of the disruptions caused by the mandates.

"Most supporters of the mandates claim that the associated increase in vaccination rates, and its implied reduction in the spread of COVID-19, outweigh the cost of the disruptions," the report states.

"However, we find that the effects of the mandates on their intended outcomes are not statistically noticeable in any of the cities they were implemented in all empirical strategies used."

Vitor Melo, a postdoctoral fellow at the Mercatus Center, said the cities' "intended outcomes were to raise vaccination rates, for people to get more vaccines; and consequently, the expectation was that COVID cases and deaths would go down."

But he added that compared to cities that didn't implement mandates, the study found "there's not much to show for it," WTOP reported.

The final report added one final "key takeaway."

"Public health restrictions and regulations were widespread during the COVID-19 pandemic, and so understanding their consequences is essential," the report said.

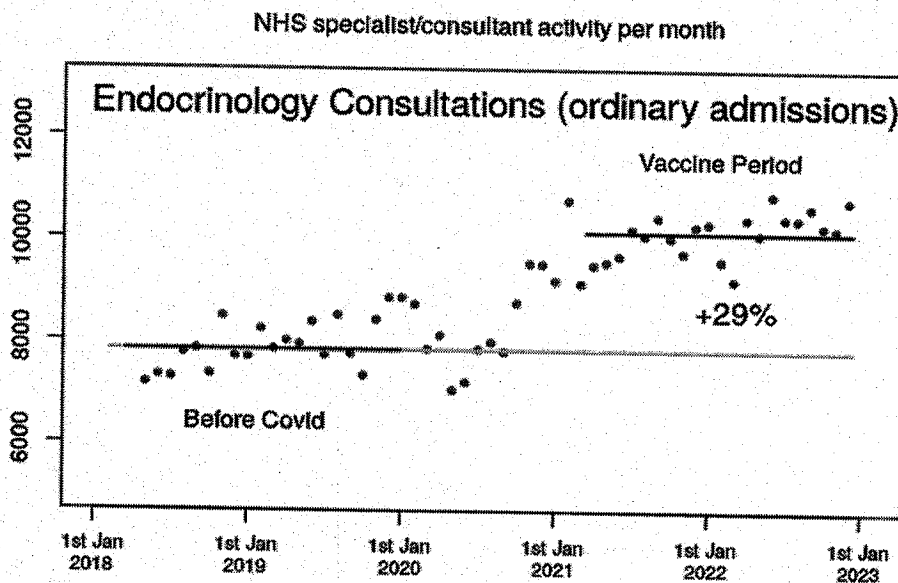
"The authors find that city-level mandates had a smaller effect on vaccine uptake (and consequently on COVID-19 cases and deaths) than nationwide mandates — and thus failed to achieve their intended objectives."

29-1

Doubling of Hormone Prescriptions Since 2020 Raises Fresh Vaccine Concerns

Daily Sceptic March 7, 2023

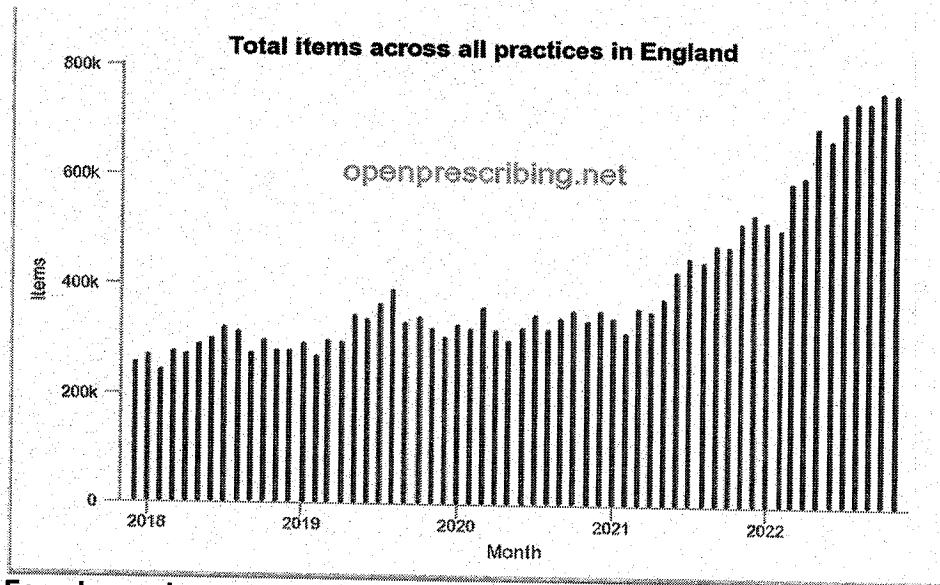
A short while back a friend mentioned in casual conversation that she'd been feeling fatigued for a while and had been referred by her GP to a consultant specialising in endocrine function. I suppose most people might have ignored this, but as it happened, when I got home I had a look at the data for the activity of hospital consultants in this field and had a bit of a surprise.



The field of endocrinology is all to do with the way hormones in the body work. The chart above suggests that something significant appears to have happened over the past three years. Intrigued, I popped over to the [OpenPrescribing website](#) to see if there had been any significant change in the prescription of drugs related to endocrine function. However, examination of these data didn't highlight any particular problem for common endocrine disorders such as those associated with impairment of the function of the thyroid gland.

There did, however, appear to be a significant statistical signal for one set of endocrine disorders in the NHS prescription data. While hormones are responsible for regulating a huge number of biological processes in the body, arguably the most common interpretation of the word 'hormone' will be with sex hormones. We don't have data for GP appointments specifically regarding dysregulation of sex hormones, but we can see what drugs they are prescribing – which for women will predominantly mean hormone replacement therapy associated with the menopause.

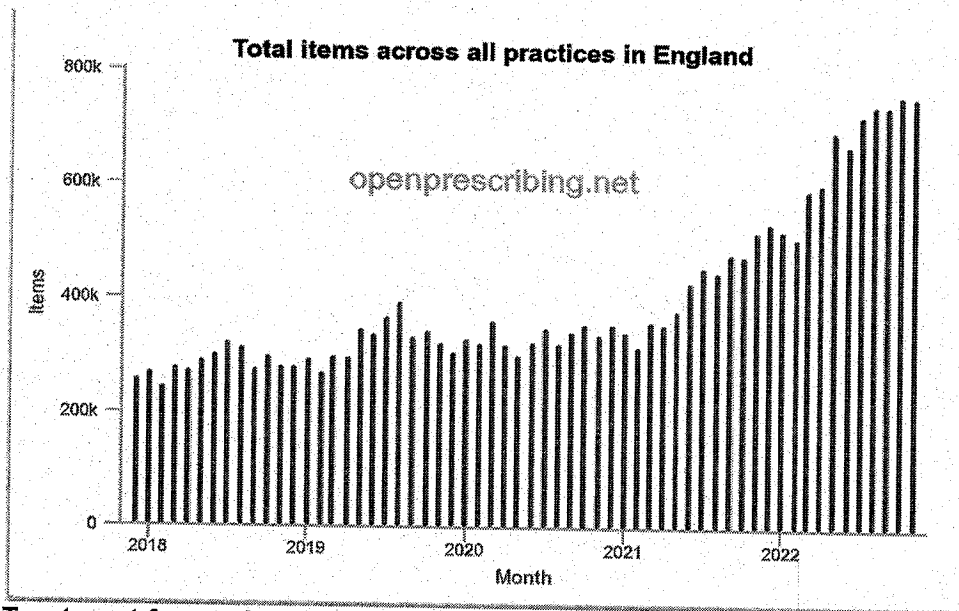
29-2



Female sex hormones

Note that the above data are specifically for prescriptions related to sex hormone dysregulation (principally HRT), and do not include contraceptive pills (which are also related to sex hormones but are included under a different code in the prescriptions medicines database).

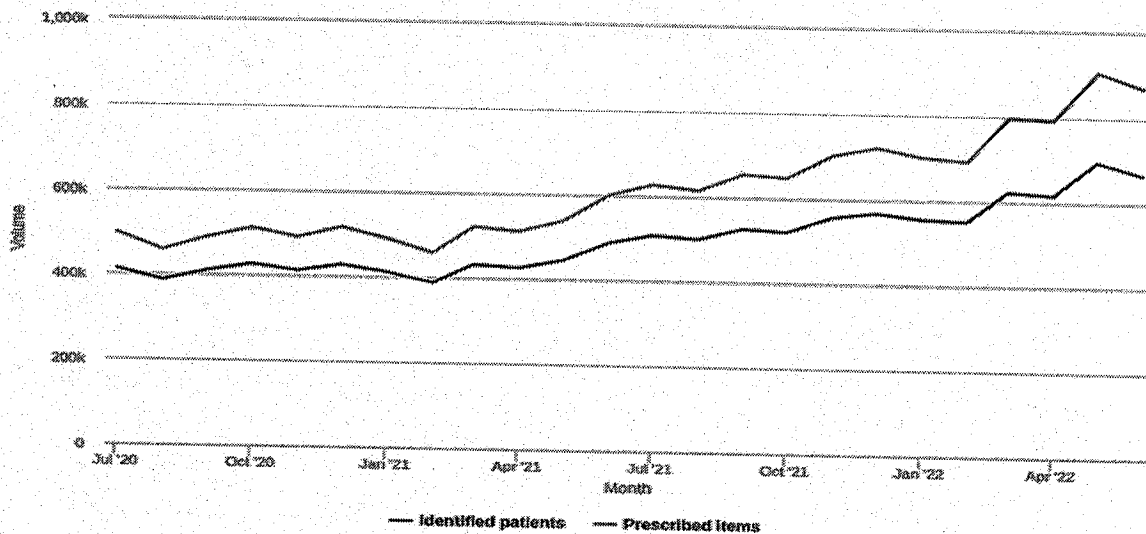
This also matches up with an increase in prescriptions related to medications for vaginal and vulval conditions, which are also strongly (but not exclusively) related to the menopause.



Treatment for vaginal and vulval conditions

Has there been a significant rise in women suffering symptoms related to the menopause since the start of 2021? A **document** issued by the NHS last year on HRT activity in the NHS since 2015 suggests that there was indeed a significant rise in activity that occurred in spring 2021. Figure 2 from that document also indicates that this wasn't simply more hormones being prescribed, but also that it was affecting substantially more women.

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The NHS document suggests that approximately 500,000 additional women had at least one course of HRT over 2021-2022 compared with 2020-2021, an increase of around one third.

The odd thing is, there wasn't any promotion of the NHS document on HRT in the press at the time – it suffered the usual fate of being hidden away in the metaphorical filing cabinet in the basement. This was doubly surprising as there has been considerable research that indicated the vaccines had an impact on menstrual cycles (see [this paper for a review](#)), and it is plausible that such dramatic changes might have some impact on the arrival and severity of the menopause. There's certainly been little outrage in the usual online forums on the potential for the vaccines to impact on female fertility. It is almost as if the Government wanted to make sure that no-one was aware of any changes in fertility that the vaccines might be responsible for. I accept that few women become pregnant when close to their menopause, but there is no doubt that the menopause marks the point where women naturally cease to be fertile, and it is also possible that something that changed the onset of the menopause in women in their late 40s might also impact on fertility of younger women (note that this is supposition – it would be useful if there were some research undertaken to investigate this potential effect, but none seems to have been undertaken despite the reduction in the number of births in the U.K. and other countries over the past 18 months).

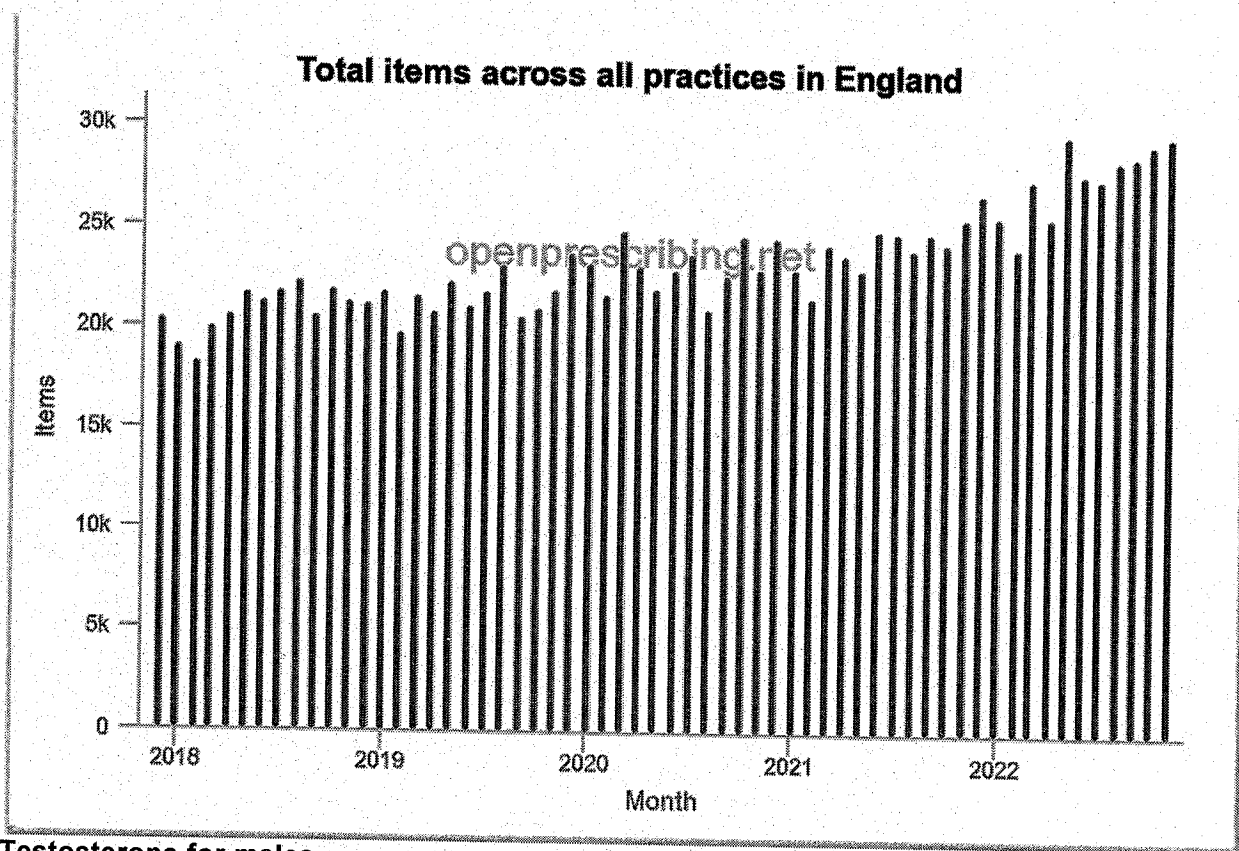
It must be stated that we don't have information on the age of the individuals being given sex hormones – it is implied that what we're seeing is more women who reach the menopause are having sufficiently deleterious symptoms to want to take replacement hormones, but there is little evidence to confirm this. It is certainly possible that there has been an increase in the numbers of women reaching the menopause at a younger age, increasing overall prescription levels. As always, we desperately need more information to fully understand what is going on here.

Way back in 2021 I wrote about the strange and dramatic increase in Yellow Card reports on menstrual irregularities that occurred during April of that year. The most plausible explanation for this was that it followed an article on BBC Radio 4's Woman's Hour all about post-vaccination menstrual irregularities where the speakers suggested to listeners that they could make a Yellow Card report if they felt that they'd had side effects following their Covid vaccination. I applaud the Woman's Hour team for highlighting this problem – physiological disorders relating to sexual encouragement in the media to get individuals to come forward and discuss their problems. Perhaps Emma Barnett might now like to revisit the story from way back then and investigate why there's also been strange and dramatic increase in women taking HRT in the post-vaccine period. Oh, and while they're there they could also investigate why this significant

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change in the health of such a large number of our population has been ignored by Government and why there has been no investigation into what might have caused it. They could also ask their audience to send in reports of the age at which they're experiencing menopausal symptoms, because it looks like this information isn't going to come from official sources any time soon.

For completeness, it wasn't just women that saw changes during that year. Data for males show a smaller, but still significant increase in the prescription of testosterone supplements over the same time period.



Testosterone for males

It should be noted that the menopause is a significant event for women and that HRT is very much a known treatment; however, men also suffer from increased sex hormone dysregulation with age, but this problem just isn't discussed as much as the menopause and changes tend to be much more spread out over multiple years. Are there many more men than indicated in the chart above who might have sex hormone dysregulation and who thus might benefit from some medical intervention but who just don't know how to interpret the signs?

As an aside, I don't like to rely too much on strange internet conspiracy theories but one possible link from the Covid vaccines to sex hormonal dysregulation came to light in a **recent sting video** featuring a Pfizer employee. In this video the employee claims that he doesn't understand why Pfizer's Covid vaccine has had an impact on menstrual cycles and female sex hormones in general. While we should not place too much weight on a single undercover recording, it certainly creaks open a Pandora's box in terms of who knew what and when...

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30 -1

Findings conflict with CDC's claim that vaccine never enters nucleus

Art Moore March 1, 2022

Findings conflict with CDC's claim that vaccine never enters nucleus

Contrary to the CDC's claim that the mRNA COVID-19 vaccines do not "change or interact with your DNA in any way," a new Swedish study finds Pfizer's shot goes into liver cells and converts to DNA.

It's the first time that researchers have shown in vitro – or inside a petri dish – how an mRNA vaccine is converted into DNA on a human liver cell line, the Epoch Times reported.

It's precisely what health experts and fact-checkers said for more than a year could not occur.

Dr. Peter McCullough, an internist, cardiologist and epidemiologist who is one of the leading critics of the COVID vaccines, said the findings have "enormous implications of permanent chromosomal change" that could drive a "whole new genre of chronic disease."

The CDC assures Americans that the mRNA and the spike protein it produces in COVID-19 vaccines to create an immune response "don't last long in the body." On its website, the agency states: "Our cells break down mRNA and get rid of it within a few days after vaccination. Scientists estimate that the spike protein, like other proteins our bodies create, may stay in the body up to a few weeks."

Further, the CDC says on a web page titled "Myths and Facts about COVID-19 Vaccines" that the "genetic material delivered by mRNA vaccines never enters the nucleus of your cells."

However, the researchers at Lund University in Malmö, Sweden, found that the mRNA vaccine enters human liver cells and triggers the cell's DNA in the nucleus to increase the production of the LINE-1 gene expression to make mRNA.

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The whole process occurred rapidly, within six hours, concluded the study, which was published by the university's Department of Clinical Sciences.

Pfizer did not comment on the study's findings, the Epoch Times reported, stating only that its mRNA vaccine does not alter the human genome.

"Our COVID-19 vaccine does not alter the DNA sequence of a human cell," a Pfizer spokesperson told paper in an email. "It only presents the body with the instructions to build immunity."

Earlier this month, as WND reported, a peer-reviewed study published in the prestigious journal Cell by researchers at Stanford University found that the spike protein created by the COVID vaccines remains in the body much longer than believed and at levels higher than those of severely ill COVID-19 patients.

The Stanford researchers tested the duration of the protein in the body for 60 days and found that it lasted at least that long.

Dr. Robert Malone, the key inventor of the mRNA technology platform that later was used in the Pfizer-BioNTech and Moderna vaccines, described the implications of the Stanford study as a potential "health public policy nightmare" in an analysis on his Substack page.

The Swedish researchers also concluded the spike proteins expressed on the surface of the liver cells through the vaccine could target the immune system and possibly cause autoimmune hepatitis. They noted "case reports on individuals who developed autoimmune hepatitis" after getting the Pfizer shot.

The authors of the study cited the case of a healthy 35-year-old female who developed autoimmune hepatitis a week after her first dose of the Pfizer COVID-19 vaccine. The researchers said there is a possibility that "spike-directed antibodies induced by vaccination may also trigger autoimmune conditions in predisposed individuals."