

Virus Vaccine Update!

3/10/21

Along with the rest of the world I have been watching developments as hundreds of millions of people worldwide are getting vaccinated. Yes, it's true and GREAT that these shots are working, for now, to prevent massive numbers of people worldwide from being sick with the COVID-19 virus by boosting each person's immunity system through the roof. The vaccinations appear to be working to a great "immediate" extent. I'm pleased to note for the first time the media is starting to slowly admit this is not a vaccine but rather a Drug Treatment but is doing that in a very roundabout way. They're omitting any mention of an actual COVID-19 antibody because the current vaccines can't produce these antibodies to make the vaccine a real Vector Vaccine and not a drug treatment, which it is. It seems the added SARS-CoV-2 protein slice does assist in the boosting of the immunity system - very high! As an example of the changing "marketing image" of the vaccine, a few days ago this appeared on the Accu-weather.com website under "Health." It appears to have originated from the Bloomberg website:

*More than 50 million Americans have received at least one dose of a coronavirus vaccine, and in addition to helping the immune system fend off the virus, the vaccines can cause some notable side effects. In many cases, any vaccine can leave the injection site feeling sore, but the vaccines developed by Pfizer and Moderna can lead to other side effects. **Headache, chills, fever and joint and muscle pain are some side effects in people after receiving one of these vaccines**, but, according to a Bloomberg health report, experiencing some side effects may actually be a good thing. "In learning to recognize the pathogen, the body goes through the same immune reaction as it would if it had met the pathogen for real, producing many of the same reactions said Peter English, a consultant in communicable disease control in the U.K. However, people should not avoid getting vaccinated due to possible side effects as feeling lousy for a day or two after being vaccinated is much better than a longer battle against the virus itself.*

Bloomberg noted that people who have had COVID-19 in the past might have more pronounced side effects than those who have not contracted the virus. Additionally, younger adults have reported more systemic reactions to the vaccines than older people who are at least 65 years of age.

What causes these side effects? When I went in search of the answer, there was very, very little and next to nothing to find. The Cleveland Clinic states the side effects are caused by the vaccine coming in contact with the SARS-CoV-2 protein slice which is a part of all three vaccines including Johnson & Johnson's. Later in this article we will list, try to analyze and understand its ingredients. They say the side effects are a "good thing." What do they mean when they say it's a "good thing"? Looking for that answer on the Internet, again there was no clear answer other than the vaccines are currently working for the most part. Seems all those inoculated are not contracting COVID-19. But at the CDC website I found this! The CDC is NOW, for the first time calling the three vaccines "Pfizer-BioNTech COVID-19 Vaccine, Moderna COVID-19 Vaccine and Johnson & Johnson's Janssen COVID-19 Vaccine." This is truly remarkable considering they are NOT COVID-19 "Vector Vaccines" but just a super Immunity Boosting drug treatment. Why they added the title "COVID-19" is hard to understand unless you think in terms of marketing to the reluctant segment of the public. But this isn't about putting a smiling face on a box of cereal to sell to Americans, is it? Considering that none of these vaccines contain any part of a dead COVID-19 virus or its protein. Instead it contains the dead SARS-CoV-2 Virus protein to act as a big time triggering mechanism to put a person's immunity system into total full blast. Getting back

to the phrase "good thing," the AARP website quotes William Moss, M.D., executive director of the International Vaccine Access Center at the Johns Hopkins Bloomberg School of Public Health. *"In some ways, these mild to moderate reactions are "a good thing," Moss says, "because they are a sign that the immune system is responding to the vaccine."* Yes, without a doubt, I'll bet any amount of money Dr. Moss is 100% correct. The Immunity System is really responding at full throttle.

In all my current searching there is no mention of any vaccines creating true **antibodies for COVID-19** itself. The only people that would have these particular antibodies would be those who recovered from COVID-19. They should not require the vaccine since their immunity system is already full of COVID-19 antibodies to ward off this virus without sending the person's immunity system into super-duper total overload, one would think! It leads me to wonder why are they allowing or telling people who recovered from COVID-19 to still get the vaccine? This is what W.H.O. says about that: *"Because COVID vaccines have only been developed in the past months, it's too early to know the duration of protection of COVID-19 vaccines. Research is ongoing to answer this question. However, it's encouraging that available data suggest that most people who recover from COVID-19 develop an immune response that provides at least some period of protection against reinfection – although we're still learning how strong this protection is, and how long it lasts."* So, those who have recovered from COVID-19 have some unknown degree of antibodies for some unknown period of time. It's clear that people all over the world who have recovered from COVID-19 and getting the inoculation are now taking part in a worldwide medical research experiment to determine the answer to what effect these vaccines have on those who have recovered from COVID-19. If you are one of these people and you're re-infected with COVID-19 you will be an important player in this research. Oh, and by the way, did you give your consent to be part of this Immunity Boosting Drug Treatment's Trials Tests and Experiment?

I keep wondering, why not place the COVID-19 protein slice into a REAL true Vector Vaccine? Let the body create its natural antibody defense against COVID-19. I looked for almost an hour on the Internet using Google and Bing but could not find a direct answer, not anything close to an answer! It's another unanswered question to add to the list. My untrained common sense tells me it has something to do with the four Strains that make this virus twice as deadly as the most deadly to humans two Strain version virus. The two Strains are, as I previously mentioned, the very most deadly known virus to humans. My common sense conclusion is the virus's Variants are so very different from one another that a particular developed antibody to one COVID-19 variant will not offer protection against a different Variant attack. With so many "different" variants emerging so quickly, is medical science, at this time, left with ONLY one way to fight this disease and that's to push the heck out of a person's immunity system and hope for the best, by hoping in some short period of time a new method to create a real COVID-19 Vector Vaccine is developed or some other better treatment?

Let's look at the Johnson & Johnson product.

Ingredients in the Johnson & Johnson COVID-19 Vaccine

Active ingredient:

- Recombinant, replication-incompetent adenovirus type 26 expressing the SARS-CoV-2 spike protein

Excipients:

- citric acid monohydrate

- trisodium citrate dihydrate
- ethanol
- 2-hydroxypropyl- β -cyclodextrin (HBCD)
- polysorbate-80
- sodium chloride

So what is Recombinant, replication-incompetent adenovirus type 26"? The answer: **"Recombinant adenovirus serotype 26 (Ad26) and Ad35 vaccine vectors protect nonhuman primates against ebolavirus."** Whoa, so this is a vaccine that will protect Monkeys or Apes from contracting the Democratic Republic of the Congo's Ebola Virus. Further looking, I found this at the National Center for Biotechnology Information under "Recombinant adenovirus serotype 26 (A26)." *In the series of studies presented, we show that Ad26 and Ad35 vectors generate robust antigen-specific cell-mediated and humoral immune responses against EBOV GP and that Ad5 immune status does not affect the generation of GP-specific immune responses by these vaccines. We demonstrate partial protection against EBOV by a single-shot Ad26 vaccine and complete protection when this vaccine is boosted by Ad35 1 month later. Increases in efficacy are paralleled by substantial increases in T- and B-cell responses to EBOV GP.* These results suggest that Ad26 and Ad35 vectors warrant further development as candidate vaccines for EBOV. Wow, OK, I think I get it! This Ad26 will simulate a person being infected with EBOV that's the Ebola Virus and "Substantial increase in T and B cells" for sure! Yeah, I would think Ebola would get your immunity system really rocking! Has anyone heard the word "Ebola" on CNN, MSNBC or FOX?

Next, what is "expressing the SARS-CoV-2 spike protein" mean? Here's what I found at:

https://www.akronchildrens.org/files/990648/file/johnson_and_johnson_vaccine.pdf

"COVID Janssen (Johnson and Johnson) Vaccine (Ad26.COV2.S)

Talking Point - As of 3/2/21

The vaccine contains the RNA that codes for the SARS-COV-2 spike protein (the protein against which antibody must be made to produce immunity to SARS-COV-2 infection) inserted into another virus called adenovirus type-26 (Ad26). While natural Ad26 virus can cause mild infection in humans (e.g., cold symptoms, pink eye), the vaccine virus has been modified, so that it is not capable of making copies of itself in humans. After injection, the virus will enter the host cells and cause them to produce the SARS-COV-2 spike protein. The host's immune system can then recognize and begin to produce antibodies against this viral antigen. The antibodies are protective against future SARS-COV-2 infection. Because the virus cannot copy itself, the host cell cannot produce additional infectious virus. Therefore the vaccine cannot cause SARS-COV-2 infection nor can it cause adenovirus type-26 infection"

Aha! So with a little genetic engineering to blend SARs-COV-2 with Ebola makes this a super "one shot" deal. Yes, I do think a little SARS-COV-2 and Ebola will blast your immunity system to the max of maximum in one shot instead of two shots required by Pfizer-BioNTech and Moderna.

Next, the other ingredients:

What is Citric Acid Monohydrate? *Citric Acid Monohydrate is a tricarboxylic acid found in citrus fruits. Citric acid is used as an excipient in pharmaceutical preparations due to its antioxidant properties. It maintains stability of active ingredients and is used as a preservative.*

What is trisodium citrate dihydrate? *It contains a sodium citrate. Sodium salts of citric acid that are used as buffers and food preservatives. They are used medically as anticoagulants in stored blood, and for urine alkalization in the prevention of KIDNEY STONES.* Why a need to put an anti-Kidney Stones drug in this injection or an anticoagulant for blood? Is there potential for Blood Clots? Whoa again, are they saying this shot has the potential to cause Kidney Stone and damage or Blood Clots? More questions.

What is Ethanol? *Ethanol, also called alcohol, ethyl alcohol and grain alcohol, is a clear, colorless liquid and the principle ingredient in alcoholic beverages like beer, wine or brandy. Because it can readily dissolve in water and other organic compounds, ethanol also is an ingredient in a range of products, from personal care and beauty products to paints and varnishes to fuel. Because ethanol is effective in killing microorganisms like bacteria, fungi and viruses, it is a common ingredient in many hand sanitizers. The U.S. Centers for Disease Control and Prevention (CDC) recommends the use of hand sanitizers in situations where soap and water is not available. Practicing hand hygiene is also an important part of helping to stop the spread of COVID-19. Using hand sanitizers or alcohol based hand rubs (ABHR) can help to inactivate SARS-COV-2 the strain of coronavirus that causes COVID-19.* First of all, SARS-COV-2 doesn't cause COVID-19 whatsoever! The two are very similar but not the same that's for sure. COVID-19 is caused by COVID-19 or if you want to look deeper it was caused by a Bioweapons lab in China and released either intentionally or accidentally (in my opinion). I think, the only reason for having Ethanol in the mix would be to kill any bacteria, fungi or viruses and to act as a preservative. I am sure it will not reduce the impact or effect of the Recombinant, replication-incompetent adenovirus type 26 expressing the SARS-CoV-2 spike protein will have on the immunity system.

What is 2-hydroxypropyl- β -cyclodextrin? *"The influence of 2-hydroxypropyl-beta-cyclodextrin (HBCD) exposure on post-thaw spermatozoa prior to freezing using acrosome integrity and the parameters of motility was studied. Acrosomal status was monitored by means of FITC-labelled peanut agglutinin, and the motility parameters were assessed using a computer-assisted sperm motility analysis (CASA) system. The spermatozoa were exposed to HBCD over a period of 3 h, during which the cells were slowly cooled from 25 to 5°C, and then frozen into pellets. The percentage of frozen-thawed spermatozoa with intact acrosomes in 40 mM HBCD group was approximately three-fold higher than that of the control. The motility and progressive motility values of the frozen-thawed spermatozoa were found to increase significantly with increased HBCD concentrations. On the other hand, further addition of cholesterol-3-sulfate to the BF5 extender containing 20 mM HBCD resulted in a drastic decrease in the percentage of spermatozoa with intact acrosomes, and decreased motility and progressive motility, suggesting that cholesterol-sulfate probably counter-acted the protective action of HBCD. In conclusion, the results of the present study indicate that HBCD protected boar spermatozoa against freeze-thaw damage, possibly by means of stimulating the efflux of membrane cholesterol."* I believe this particular ingredient is added to act as a preservative during storage at freezing cold temperatures.

What is polysorbate-80? This ingredient has many applications in medicine. It is used as part of Chemotherapy for brain cancer since it helps deliver medications to particular locations in the body. You can Google this ingredient and see it's wide range of use. There are some sites that suggest this ingredient "might" be helpful with influenza vaccines. What I focused on is this website that stresses more of the Polysorbate 80 medical risk in terms of nonimmunologic anaphylactoid reactions. An allergic reaction to this can be very serious and fatal. Exactly why this is in the mix or what does it do? I couldn't find that answer anywhere whatsoever. I'm clueless on this with regard to the Johnson & Johnson vaccine.

<https://www.sciencedirect.com/science/article/abs/pii/S1081120610610241>

What is sodium chloride? This is just saline (saltwater) that was used as a placebo in the Johnson & Johnson trials. I believe the Sodium Chloride acts as a liquid injectable medium carrying the other ingredients.

Let's summarize where we are in the United States with these vaccinations. We know for sure the vaccines are working to boost the immunity system to its maximum level possible in each person. This will effectively attack any bacteria, fungi or virus that enters a person's body. This includes both COVID-19 and the common cold.

The only other area of American medicine that I can find where "tinkering" with a person's immunity system is evident is in the battle against Cancer. This is a science that is helping to improve the effectiveness of new and improved Chemotherapy. Aside from improving Chemotherapy medications, the science is also developing drugs that can make the Immunity System attack specific and exact Cancer cells. NOT at all like the current virus vaccines that are just pumping up the Immunity System to attack anything and everything it thinks is "foreign" to the human body. Currently, this new science is being used very cautiously as a last resort for certain types of cancer in very seriously ill cancer patients. You'll find this amazing reading and very educational on the subject of "Targeting" particular cancer cells and you can get a better and clearer understanding of the current Virus Vaccines. It's well written in simple layperson's language and somewhat easy to understand. Please look over this American Cancer Society website:

<https://www.cancer.org/treatment/treatments-and-side-effects/treatment-types/immunotherapy/what-is-immunotherapy.html>

I believe this is now a wait and see period. The main concerns about the three vaccines, in essence, are a considerable series of unanswered questions. Unanswered for only two possible reasons. Either no one knows the answers or the answers are being kept from the American public.

There are several dangers involved that I recognize. Not wanting to repeat what has been noted previously, I'll skip going into those fine details again.

1. The issue is trisodium citrate dihydrate in the Johnson & Johnson shot, a medication used to prevent Blood from Clotting and its ability to dissolve Kidney Stones. Why is that included?
2. Cytokines Storm (sometimes spelled Kytonkines). This is an infliction that medical science can't explain the causes of. This is a person's immunity system becoming "hay wired" and it attacks healthy, good elements within the human body like a virulent disease and is almost always fatal. This has occurred to people long before the arrival of COVID-19. It's more likely to happen in senior citizens than younger people. It's likened to Lupus, but a hundred fold more serious and deadly. Lupus is a disease that occurs when your body's immune system attacks your own tissues and organs (autoimmune disease). Inflammation caused by Lupus can affect many different body systems — including your joints, skin, kidneys, blood cells, brain, heart and lungs. Lupus can be difficult to diagnose because its signs and symptoms often mimic those of other ailments. Some people are born with a tendency toward developing Lupus, which may be triggered by infections, certain drugs or even sunlight. While there's no cure for Lupus, drug treatments can help control symptoms. In very severe cases Lupus can be fatal. I believe the fatal cases are most likely the Cytokine Storm. You will not see many, if any, death certificates stating the cause of death as Cytokine Storm. You might see Lupus listed in known Lupus patients. But, keep in mind that out of control fatal Lupus can be or might be Cytokine Storm. For example, if the out of control immunity system attacks say, the Liver. The death certificate will note Liver Failure, not Cytokine Storm mainly because that person was being treated for a diagnosed Liver issue before finally succumbing to the Liver Failure. This might be a glimpse into the issue of senior

citizens with underlying elements dying at a very high rate. They are in nursing homes for a reason and mostly with underlying medical issues.

Questions abound, questions I can't seem to find. I'm not sure whether doctors and/or medical scientists know the answers and if they do, they are not saying!

How long will it take after Pfizer, Moderna and the Johnson & Johnson treatments before the immunity systems return to normal levels?

What are the different time frames, for different age groups, for Bone Marrow to replace the T-lymphocytes and B-lymphocytes that were drained out of a person's Thymus Glands, Spleen and Lymph Node System?

How long will a person's boosted immunity system stay "Boosted" to ward off COVID-19?

After our immunity system returns to normal, if there is no Vector Vaccine available, will the American public need to "re-boost" their immunity system again?

How often can a person get similar inoculations having had the current series to Super Boost their immunity system without causing a long-term possible damage to the immunity system?

Is it possible for the four-strain COVID-19 virus to be so smart that it can mutate into a variant form that will defeat the human's immunity system to survive? Especially if continuing to boost human immunity multiple times creates a weaker immunity response?

I am sure you could go on, as I have in the past and come up with a whole lot of your own questions. If any of you plan on being in the presence of a doctor in the near future, maybe you might take some notes and ask the doctor some of these questions. I would REALLY appreciate hearing details and learning.

Here is some latest COVID-19 news you might not know about.

The New England Journal of Medicine reported the Red Skin Patch delayed reaction after Moderna vaccine "Is nothing to worry about at all. It will go away on its own," said Dr. Kimberly Blumenthal on TV. She said, "It's a reaction of the immune system working and not an infection." Well, we know that! Dr. Blumenthal what is causing the immune system to create the Red Skin Patches?

Pharmaceutical Company Merck & Ridgeback say they will have a home treatment for COVID-19 with pills to take early on that stop the virus. They claim to be ready with this in five to six months. We will see.

The CDC reported that most COVID-19 people hospitalized and needing ventilators or having died were overweight or obese - 27.8% admitted are overweight and 52% are obese. More than 42% of the U.S. population is considered obese.

Thank you for taking the time to read this and all my other Virus Vaccine information.