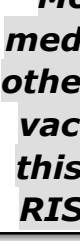


By physicians who have been trained in the most comprehensive medical education on earth, whose goal is to restore and maintain health, and whose highest professional allegiance is to our patients.

COVID VACCINE Considerations [More](#)



COVID-19 VACCINE Considerations

Colleen Huber, NMD, February 21, 2021, updated March 23, 2021

Most of the links below are from medical journals, the FDA, CDC, and other entities that generally support vaccination, yet the information in this article shows how EXTREMELY RISKY the COVID-19 vaccines are.

In my family, we have a rule: If you consider having an experimental medical procedure done,

1. Don't even think of insisting that anyone else have it done, inside or outside the family, because they control their own bodies and health decisions, not you; and
2. Be sure you have read about and can explain in your own words all of the known risks of that procedure before embarking on it. Also, consider potential future risks.

I ask that you, the reader, at least take time to consider the above, and at least consider reading information in the links below, before submitting to this experimental medical procedure.

Is the COVID vaccine experimental?

Pfizer and Moderna make the COVID-19 vaccines in the US. The FDA granted "emergency use authorization" for these vaccines (herein "COVID injections," because they are unlike conventional vaccines).

Emergency use authorization is **required by law** to be made **only** if there are no effective treatments for COVID-19.

• **But are there effective COVID-19 treatments?**

100s of studies done around the world have established, and repeatedly confirmed, fast, **effective, well-tolerated treatments for COVID-19** that are in widespread use. I briefly summarize them [here](#).

• **General risk vs benefit**

An emergency experimental vaccine cannot be assumed to be safer than a virus with a very high survival rate, such as COVID-19. The average survival rate for **NO** COVID treatment at all is 99.74%, and we have very successful treatments available, which should easily achieve universal survivability from COVID, if widely available. Where does 99.74% survival come from?

Dr. John Ioannidis is the most widely cited scientist in the world.

His estimate in June 2020 of a **0.26% infection fatality rate** is now confirmed around the world. 100% - 0.26% = 99.74% average survival rate.

Does the COVID injection work?

The COVID injection is not even known to stop the spread of COVID. Dr. Larry Corey, who oversees National Institutes of Health COVID-19 vaccine trials said on 11/20/20: **"The studies aren't designed to assess transmission. They don't ask that question, and there's really no information on this at this point in time."**

<https://www.medscape.com/viewarticle/941388>.

The FDA confirms that the 1st vaccine dose correlates with **increased COVID-19 infections**. "Suspected COVID-19 cases that occurred within 7 days after any vaccination were 409 in the vaccine group vs 287 in the placebo group." This data comes from Pfizer itself. See p 42 of <https://www.fda.gov/media/144245/download>

What happened to the animals in the studies?

This technology has been tried on animals, and in the animal studies done, **all the animals died**, not immediately from the injection, but months later, from other immune disorders, sepsis and/or cardiac failure. There has never been a long-term successful animal study using this technology. **No experimental coronavirus vaccine has succeeded** in animal studies. In this study, coronavirus vaccine caused **liver inflammation** in test animals.

Specific risks of COVID injections,

in roughly chronological order of side-effect manifestation:

• **Polyethylene glycol (PEG)**

is one of the ingredients. This has been correlated with **anaphylactic shock**. **So the CDC is now recommending intubation kits at vaccination sites.**

• **Cationic lipid coating of mRNA**

is known for **many years** to be **toxic**, because these (+) charged fats interact with the (-) charges on our amino acids, our cell membranes and the phosphates of our DNA. Cationic lipids are attracted to and are destructive toward:

- o **Lungs**,
- o **Mitochondria, red blood cells, white blood cells,**
- o **Liver,**
- o **Immune and nervous systems function** (This is the likely cause of the Bell's Palsy and tremors that are seen in vaccine victims.)

• **mRNA:**

Unlike a traditional vaccine, of injected, inactivated virus intended to stimulate antibody response, the COVID injection on the other hand is completely different in this respect. It uses messenger RNA (mRNA), which is a **blueprint for your cells to create COVID-like (spike) proteins**. Then your cells begin to make these COVID-like proteins. However, those proteins, in turn, stimulate your body to make antibodies against them. So now **your body has been turned into a munitions factory for both sides of a war:** The bad guys (COVID-like spike proteins) and the good guys (the antibodies fighting against them). However, before you pledge allegiance to the good guys, as you will see below, the good guys can be more lethal to the vaccinated person.

• **History of mRNA injections:**

This technology had disastrous results in dengue fever vaccines in the past. **Dengue vaccine is a mRNA vaccine**. When this was used in children in the Philippines, **many vaccinated children had far worse outcomes than unvaccinated children** when they were later exposed to dengue, and many died. **Prosecution for homicide** resulted. However, this had previously been known to happen with ferrets and with cats. In all cases, the vaccinated animal or human became **more vulnerable to worse disease** when confronted with it. It is expected that the relatively mild COVID-19 illness, with a survival rate of 99.74%, may reduce to a much lower survival rate and become a truly lethal disease in vaccinated people when they later become infected with it. **There are no peer-reviewed published human trials of mRNA vaccines at all,** and no mRNA vaccine has ever been FDA approved. That's how new the technology is.

• **mRNA can affect DNA.**

One of the most worrisome risks with a mRNA vaccine is what can happen with reverse transcriptase. This is an enzyme in every cell, and it can theoretically lead to the **mRNA creating changes in the cells' DNA**, a process known as viral retro-integration. Although this possibility has been thought unlikely, MIT and Harvard scientists found it happened [here](#). If some of the 30 trillion or so cells in your body become **permanent COVID factories**, what is the long-term impact on your health, and would you want that outcome?

• **Antibody dependent enhancement (ADE) problem:**

Prior attempts to create a coronavirus vaccine killed all the test animals, after they were later infected with wild virus. Here's what happened: mRNA instructed the mammals' cells to produce the spike proteins of the coronavirus. Then, later, when the animals confronted the wild virus, **the intense build-up of antibodies had been stockpiled, and their sudden and overwhelming release killed the test animal**. These risks have been documented in Nature, Science and Journal of Infectious Diseases. Here's a study from [Nature](#) on that.

• **ADE mechanism:**

ADE is a form of pathogenic priming, meaning the vaccine can result in a more severe disease, which has been seen in prior attempts at making coronavirus vaccines. The antibodies made can be neutralizing (which inactivate a virus, and that's good), but antibodies are a problem when they are non-neutralizing, because then these antibodies carry active viruses directly to macrophages, which then become infected. This is how ADE happens.

This antibody dependent enhancement (ADE) leads to:

- **increased viral replication** (more viruses to make you sick); and
- **more severe disease**

• **ADE result:**

These macrophages tend to go to the lungs and **fill the lungs, causing overwhelming inflammation and airway obstruction** (as found later on autopsy). However, the augmented antibodies also attack similar-looking proteins on internal organs, resulting in **cytokine storm and death** or **auto-immune disease and organ failure**. **"Cats that showed high titers following vaccination succumbed at later timepoints to fatal disease."**

• **What about miscarriages, and why have men been advised to freeze their sperm prior to getting the injection?**

Both men and women are at risk for possibly permanent infertility, because the spike protein of a coronavirus "looks" to the immune system similar to Syncytin-1, an essential protein in the placenta. This stimulates antibodies to fight the placenta, and possibly sperm. Mid-term miscarriages, which are normally very rare, have occurred in women who have been vaccinated for COVID. SARS-CoV-2 viral particles have been found to **linger in the testicles of men** after recovery from infection.

• **Why are COVID vaccinees MORE likely to spread COVID than the unvaccinated?**

Virologist Geert Vanden Bossche PhD, who worked for the Bill & Melinda Gates Foundation, recently warned the World Health Organization (WHO) that **"We are currently turning vaccinees into carriers shedding infectious variants."**

• **Why is it more dangerous to vaccinate against COVID-19 than other viruses?**

Because COVID-19 virus uses the ACE-2 receptor to get into your endothelial cells, including those lining the blood vessels. This creates an inflammatory reaction that the great majority (99.74%) have survived even without treatment, and even more who used known, effective treatments. (See page 1.) So if you have been exposed to the virus, and then get vaccinated, it is almost certain that the vaccine will cause new inflammation and damage to endothelial cells lining your blood vessels, and we have seen short-term abnormal blood clotting in people who have gotten the vaccine. But the more likely problem is launching new disease in the blood vessels. **Dr. H Noorchashm MD, PhD says, "... the vaccine is almost certain to do damage to the vascular endothelium."** He explains [here](#).

Israel is at this writing the most heavily COVID-vaccinated country in the world. The findings of infectious disease experts are reported [here](#), in which they determined, from the Israeli data, that the COVID injection causes:

• **"...mortality hundreds of times greater in young people compared to mortality from coronavirus without the vaccine, and dozens of times more in the elderly..."**

How to protect yourself and your family

• **Always read the Product Package Insert.**

This is required by law to be included with packaging of all vaccines, and **US Informed Consent law protects your right to be fully informed prior to any medical procedure, and your right to reject any medical procedure. 45 CFR § 46.116.** These are universal principles enshrined in the Nuremberg Code and the Universal Declaration of Human Rights. Here is the [Pfizer insert](#), and here is [Moderna's](#). I strongly recommend reading ALL of it carefully with your family before you make a decision regarding whether to have the COVID injection.

• Discuss the considerations above, as well as other information you have heard about the COVID injection in a relaxed, unhurried setting with your loved ones.

Make sure that you are not pressured into a procedure that you may regret in the future. If you choose to defer or reject the COVID injection, know that you are not alone, and many healthcare workers have done the same.

"I've heard Tuskegee more times than I can count in the last month - and, you know, it's a valid, valid concern." Dr. Nikhila Juvvadi, a hospital chief clinical officer.

• **Share this page** with others who are also considering the vaccine.

• **If your employer or school attempts mandatory vaccination,**

show this information to them. **Federal law prohibits employers** and others from requiring vaccination, such as the COVID injection, that is under EUA (explained above). You should also consult your attorney to look into state and federal law prohibiting forced medical procedures. **NVIC.org** and **ICanDecide.org** may also have helpful information.

• **If you have read and understood this article, and the warnings in all the scientific studies linked, you can now see that taking the COVID injection is an act of extreme and reckless self-destruction. As a physician, I strongly advise against this vaccine, regardless of brand, for everyone, without exception.**

• **If on the other hand, you find that the scientific information in this paper is overwhelming,**

there is another way to look at COVID virus vs COVID vaccine risks. How many famous people died within 2 weeks after taking the COVID vaccine?

Famous people who died of COVID, who weren't already gravely ill, or hospitalized for other illnesses	Famous people who died within 2 weeks after taking the COVID VACCINE
None	Hank Aaron
	Larry King
	Rush Limbaugh
	Marvin Hagler

Statement of interests

The author has served as an expert witness in court cases involving questions of safety regarding vaccines.

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Dr. Huber's research interests since early 2020 have focused on questions of safety regarding masks. Most of these peer-reviewed articles are in [Primary Doctor Medical Journal](#).

