Should We Take the Vaccine Against Covid-19?

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NO!





WHY?

- 1. The vaccine is HAZARDOUS.
- 2. Efficacy is highly questionable.
- 3. The vaccine manufacturers and promoters cannot be trusted.
- 4. The science behind vaccination is highly questionable.
- 5. The risks far outweigh potential benefits.

WHY?

- 6. There are much better alternatives in managing the Covid-19 pandemic.
 - a. Strengthening the immune system.
 - b. Viable treatment and supportive modalities.
 - c. Addressing the social determinants of the pandemic.

HAZARD - something that is dangerous and likely to cause damage

Danger signals that show the hazards:

- The vaccines being developed proceeded to clinical trials without completing the necessary pre-clinical and animal studies.
- 2. The danger that the vaccine might actually "enhance" the pathogenicity of the virus was ignored.

- 3. Initial clinical trial results for the COVID vaccine of Moderna and Oxford/Astra-Zeneca already show serious adverse events but were ignored.
- 4. The RNA vaccine technology used has never been used before in humans.
- 5. mRNA vaccines are incompletely understood. Potential safety concerns include local and systemic inflammation, biodistribution and persistence of expressed immunogen, autoimmunity, blood coagulation and pathological thrombus formation, among others.

6. Another danger of mRNA vaccines is the use of biotech "carrier systems" involving lipid nanoparticles (LNPs) and coating with polyethylene glycol(PEG). LNPs "encapsulate the mRNA constructs to protect them from degradation and promote cellular uptake" and rev up the immune system. LNPs could contribute to one or more of the following: immune reactions, infusion reactions, complement reactions, opsonation reactions, antibody reactions or reactions to the PEG, as well as adverse reactions within liver pathways. PEG can also provoke severe neuropsychiatric symptoms in offsprings, including mood swings, rage, phobias and paranoia. Investigators are now questioning biocompatibility and warning about PEGylated particles' promotion of tumor growth and adverse immune responses that include "probably underdiagnosed" lifethreatening anaphylaxis.

- 7. The adenoviral vector Covid-19 vaccines are also still experimental and have not been used before in mass vaccination for infectious diseases.
- 8. Virus-vectored vaccines could undergo recombination with naturally occurring viruses and produce hybrid viruses that could have undesirable properties affecting transmission or virulence. Possible outcomes of recombination are practically impossible to quantify.

9. Genetically engineered vaccines carry significant unpredictability and a number of inherent harmful potential hazards, such as: immunopathological reaction, autoimmunity, long-term tolerance, persistent infection and latent infections, emergence of mutant types of viruses, enhanced pathogenicity and unexpected serious adverse events (including death).

- 10. There is also the potential to transfer or recombine genetic material from genetically engineered viruses or GE virus-vector vaccines to individual germ line cells.
- 11. There could be chromosomal integration or insertional mutagenesis, resulting in alterations of gene expression or activation of cellular oncogenes, thus raising the possibility of inducing cancer.

- 12. New, hybrid virus progenies may have completely unpredictable characteristics, including virulence reversion.
- 13. The risks of recombination was raised in a meeting convened by the World Health Organization (WHO) in 2003. "Recombination of a live virus-vectored vaccine with a circulating or reactivated latent virus could theoretically generate a more pathogenic strain."

- 14. Vaccines produced with cell cultures are often contaminated with naked nucleic acids, genomic fragments, retroviruses and other foreign materials that carry uncertain but potentially serious hazards.
- 15. Many candidate Covid-19 vaccines are produced on what is called "immortal" cell lines or cancerous types of cells that could spread cancer-promoting material into the human recipient.

16. US FDA stated in its website (08-10-2020): "In some cases the cell lines that are used might be tumorigenic... Some of these tumor -forming cell lines may contain cancer -causing viruses that are not actively reproducing. Such viruses are hard to detect using standard methods. These latent, or "quiet," viruses pose a potential threat, since they might become active under vaccine manufacturing conditions."

- 17. The manufacture of vaccines often use aborted fetal cells which contain cell debris and fetal DNA (together with its epigenetic modification) which cannot be fully eliminated during downstream purification, potentially causing cancer and autoimmunity in the Vaccinated.
- 18. The danger of rushing a vaccine and allowing corporate interests driven by market forces to address people's health needs have been shown in the recent past.

Dengvaxia Fiasco



- 18. The Dengvaxia vaccine fiasco in the Philippines: many of the vaccinated suffered or died after a botched mass vaccination program. According to The Chief Pathologist of the Public Attorney's Office, 153 of those vaccinated with Dengvaxia had died as of February 18, 2020.
 - In fast-tracking vaccine clinical safety trials of HPV (Human Papilloma Virus) vaccine, the producers spiked their placebos with neurotoxic aluminum adjuvant and cut observation periods. Numerous adverse events, including life-threatening injuries, permanent disabilities, hospitalizations and deaths, were later reported after vaccination with the HPV vaccines.

19. The history of vaccination is replete with scientific evidence of adverse effects through enhanced pathogenicity, mutation, recombination, induced immune system dysfunction, and various non-specific effects following vaccination despite regulatory approval and prior clinical trials.

20. Safety assessments under the corporate dominated scientific milieu are grossly inadequate and oftentimes erroneous. Studies and clinical trials are done or sponsored by the very companies who sell the vaccines. There are no independent studies that could validate the claims of the vaccine manufacturers.

- 1. The main indicator used to assess efficacy is the ability to induce production of antibodies which has not been shown historically to be a reliable indicator for actual clinical efficacy.
- 2. The virus elicits a complex array of immunopathologic reactions that are not accounted for by the vaccines.
- 3. Pre-clinical/clinical studies are inadequate, often show conflicting results and cannot be reliably extrapolated to actual clinical situations.

- 4. Existing data on Covid-19 recovered patients show that the antibodies wane over a short period of time and exhibit large patient variability in antibody levels.
- 5. Reinfection of Covid-19 patients who have recovered are common, showing lack of development of immunity from their encounter with the virus.

- 6. Previous experience show that many vaccines deemed "safe and effective" by the WHO, governments and mainstream medicine have actually been proven to be unsafe and ineffective in the long-term.
- 7. The Covid-19 virus shows a high frequency of mutation such that an "effective" vaccine developed for the current strains of the circulating virus will most likely not be effective for the mutated future virus strains.

8. There are still a lot of unknowns and uncertainties in the characteristics of the Covid-19 virus that could alter current assessments of safety and efficacy. Even if current clinical trials are deemed "successful" by mainstream medicine and institutions, it cannot be scientifically valid to conclude that the vaccines have been "proven" "safe and effective", especially over the long-term.

The Vaccine Manufacturers and Promoters Cannot Be Trusted

- 1. Vaccine manufacturers have a history of criminal and other malfeasance including fraud, conduct of unethical clinical trials, tax evasion, bribery, misrepresentation and others.
- 2. Big Pharma, WHO, US CDC, UNICEF, governments and medical authorities have misled the public about vaccines.
- 3. Big Pharma exerts effective control over vaccine research, funding, information, policies, and practically everything related to vaccines.

Sanofi Record of Criminal Behaviour

- A whistleblowing former paralegal at drug giant Sanofi is now claiming she was aware of "many instances" where Sanofi lawyers destroyed documents to avoid turning them over to opponents in prior legal cases.
- Ponte's suit, filed last year, claims she learned of an alleged scheme at Sanofi to pay more than \$30 million in kickbacks to promote the company's diabetes drugs. The suit came a year after the France-based drug company already agreed to pay more than \$100 million to the U.S. federal government to settle other claims related to alleged kickbacks to doctors, and seven months after Sanofi agreed to pay a nearly \$40 million fine in Germany in connection with two employees who were convicted there of paying bribes to boost drug sales.

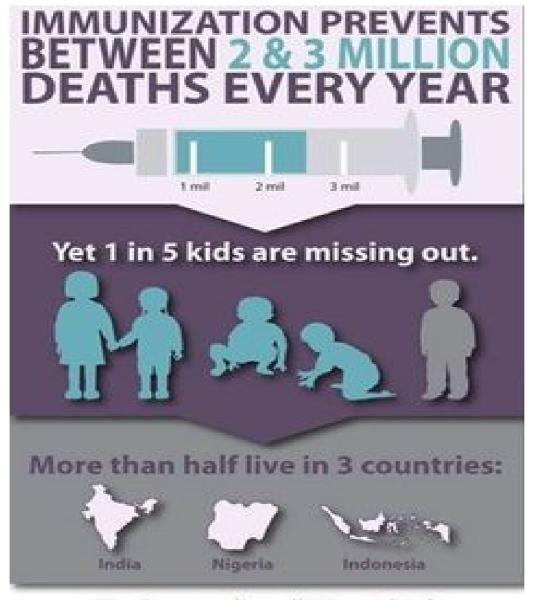
https://www.cnbc.com/2015/11/20/sanofi-whistleblower-lawsuit-kicks-into-higher-gear

Big Pharma Record of Malfeasance

June 19 2014, Logroño, Spain: Attorney Don Manuel Sáez Ochoa filed a criminal complaint against Merck-Sanofi Pasteur Laboratories, Spanish National Health authorities ... for injuries and disabilities suffered by Zuriñe after the administration of Gardasil. The complaint states that (the company) failed to use an inert placebo during clinical trials, thereby manipulating data and marketing Gardasil under false pretences. Despite complaints of several young women with similar new medical conditions after Gardasil injections, the Spanish health authorities ignored calls for a moratorium...health authorities had adequate knowledge regarding the potential harmful effects of Gardasil and chose to recommend administration of the HPV vaccine anyway.

https://healthimpactnews.com -Gardasil Vaccine: Spain Joins Growing List of Countries to File Criminal Complaints

What do Big Pharma and authorities say?



Vaccines save lives. #RUuptodate?





What is the basis of the claim?

The 2.5 million estimate has always been cited by public health organizations and can be traced back to the 2009 WHO report State of the world's vaccines and immunization, written primarily by commissioned journalist John Maurice, whose clients, apart from WHO, included vaccine supplier GAVI, the Vaccine Alliance and vaccine manufacturer Novartis. No scientific study has been cited to backup the claim.

What are the facts?

- -According to data collected by the Institute for Health Metrics and Evaluation (IHME) at the University of Washington in Seattle, more than two-thirds of children under five years of age who die each year die of causes other than diseases for which vaccines are available.
- -The number of children under five years old dying every year has fallen from 12.7 million in 1990 to 8.8 million in 2008. – WHO-UNICEF

What are the facts?

- -Which means that during the 18 years preceding the WHO's 2009 report, the number of children under five years of age dying prematurely had dropped by an average of 216,666.7 annually.
- -The best the WHO could have been able to say in 2009 was that vaccines prevented just under 217,000 deaths of children in this age range, worldwide in one year.

What are the facts?

Since more than two-thirds of children under five years of age who die each year die of causes other than diseases for which vaccines are available, the corrected estimate should be 217,000 divided by 3 or **72,333/yr**, which is still an over-estimation of preventable deaths by vaccination because this does not take into account deaths due to causes other than being unvaccinated and deaths of the vaccinated.

https://thevaccinereaction.org/2019/02/do-vaccines-really-prevent-2-5-million-children-from-dying-each-year/

CDC cover-up of their own findings

CDC experts knew that Thimerosal (mercury) in vaccines was damaging children. Dr. Tom Verstraeten, a CDC epidemiologist had analyzed the agency's massive Vaccine Safety Datalink database containing thousands of medical records of vaccinated children. He declared: "We have found statistically significant relationships between exposure [to mercury in vaccines] and outcomes. At two months of age, developmental delay; exposure at three months, tics; at six months, attention deficit disorder. Exposures at one, three and six months, language and speech delays — the entire category of neurodevelopmental delays."

CDC cover-up of their own findings

Instead of making this important information public, authorities hatched a plan to produce additional "studies" that denied such a link. In fact, vaccine proponents had the audacity to claim in subsequent papers that mercury in vaccines not only doesn't hurt children but that it actually benefits them! In the topsy-turvy world of overreaching vaccine authorities, the welldocumented neurotoxic chemical mercury somehow makes children smarter and more functional, improving cognitive development and motor skills.

-Vaccine Safety Tricks and Tips by Neil Z. Miller, 2013

Big Pharma cover-up of serious adverse effects

Even when a serious adverse event is detected, this is usually swept under the rug. For example, initial clinical trial results for the COVID vaccine of Moderna reportedly showed that three of the 15 human experimental subjects in the high dose group suffered serious and medically significant symptoms. Moderna, however, concluded that the vaccine was "generally safe and well tolerated" which the corporate dominated media dutifully reported, covering-up the real danger from the vaccine.

Vaccine Safety Mis-Information from the Center for Disease Control (CDC), U.S.A.

- 1."The safety of vaccines is thoroughly studied before they are licensed for public use."-**False**
- 2."There is not a plausible biologic reason to believe vaccines would cause any serious longterm effects." - False
- 3. "Receiving combination vaccines or several different vaccines during one visit is safe and offers the quickest protection against multiple diseases." False

Vaccine Safety Mis-Information from the Center for Disease Control (CDC), U.S.A.

- 4. "Vaccination is a highly effective, easy way to keep your family healthy." False
- 5."We all need vaccines throughout our lives to help protect against serious diseases. Immunization is our best protection against these diseases." **False**
- 6."Your child's immune system produces immunity following vaccination the same as it would following "natural" infection with a disease. The difference is that the child doesn't have to get sick first." **False**

Summary Observations

The credibility of the CDC, WHO, public health authorities and mainstream health professionals have been seriously eroded because of corporatization, conflicts of interests, dishonesty, corruption and misrepresentation. People have good reasons to be wary of vaccines. Too much reliance on vaccines to address infectious diseases is not congruent with the current body of scientific knowledge about the immune system, microbial ecology and the intimate relationship of humans with the environment.

1. The reductionist thinking and science behind the vaccination dogma is outmoded. At that time, there was barely an understanding of the infinitely complex nature and behaviour of the immune system, interrelationships of humans, microbes and environment, social determinants and other factors. It was not known that viruses and other microbes have been playing important role in the evolution and survival of all life forms, performing critical physiologic functions that maintain homeostasis and a robust immune system.

2. Rather than cultivating harmony and coexistence, the money-making power elite institutions and their agents, including the corporate-controlled medical establishment, have pushed for mass vaccinations with the aim of total elimination of target microbes. This thinking is not only irrational but also contrary to contemporary objective scientific knowledge.

- 3. "it is considered unethical to conduct randomized trials with already recommended vaccines to measure their overall effect on morbidity even though these effects were never measured...
- two vaccines may have completely different effects when administered simultaneously...
- Although tens and thousands of studies assessing disease-specific, antibody-inducing effect of vaccines have been conducted, most people have not examined whether vaccines have non-specific effects because current perception excludes such effects."

⁻ Benn CS, Netea MG, Selin LK, Aaby P, 2013. Trends Immunol. 2013;34(9):431-439 doi:10.1016/j.it.2013.04.004

3. In other words...

- -No randomized clinical trials on recommended vaccines have been done to measure overall effects on morbidity.
- -Two vaccines given at the same time do not behave as if they were given singly at different times.
- Most scientists study only the antibody-inducing effects but have not studied non-specific adverse effects of vaccines because it is just assumed that there is no such adverse effects.

⁻ Benn CS, Netea MG, Selin LK, Aaby P, 2013. Trends Immunol. 2013;34(9):431-439 doi:10.1016/j.it.2013.04.004

Balancing Risks and Benefits



The risks far outweigh potential benefits

1. The foregoing discussion (The vaccine is HAZARDOUS, Efficacy is highly questionable, The vaccine manufacturers and promoters cannot be trusted. The science behind vaccination is highly questionable) clearly show that the risks of taking any Covid-19 vaccine in the pipeline far outweigh the potential benefits. In addition, the following historical examples of vaccine risks should alert us that the risks are real and are not trivial.

The risks far outweigh potential benefits

2. Rigorous safety assessment, including adequate, double-blind, randomized, and true placebo-controlled clinical trials and an honestto-goodness risk-benefit assessment, have never been done by the manufacturers or supposedly reputable institutions recommending the vaccines. Safety has always been based on flawed assumptions and corporate science, not on real science.

The risks far outweigh potential benefits

3. Study in Guinea Bissau, Africa

Children vaccinated with DTP w/ or w/o OPV Vs Children Not Yet Vaccinated

Compared deaths within 3-5 month of age Period analysed: 1981-83

Mortality: Vaccinated Vs Unvaccinated

Unvaccinated = 4.5 (Mortality Rate) Vaccinated = 21.6 (Mortality Rate); Mean Hazard Ratio = 6.7

Mogensen SW, Andersen A, Rodrigues A, Benn CS, Aaby P. <u>The Introduction of Diphtheria-Tetanus-Pertussis and Oral Polio Vaccine Among Young Infants in an Urban African Community: A Natural Experiment</u>. EBioMedicine. 2017;17:192-198.

4. Deaths After Pentavalent Vaccine (India)

Vaccinated - 1,806,459 Deaths = 51 or 1 in 35,420.71

Yet, the oft-repeated claim of the vaccine industry, the CDC, governments, mainstream medical authorities and mainstream media is that death caused by vaccination is only 1 in a million!

5. Various disease related genes activated after vaccination

Infants after DtaP-polio-Hib vaccination at 3 and 5 months:

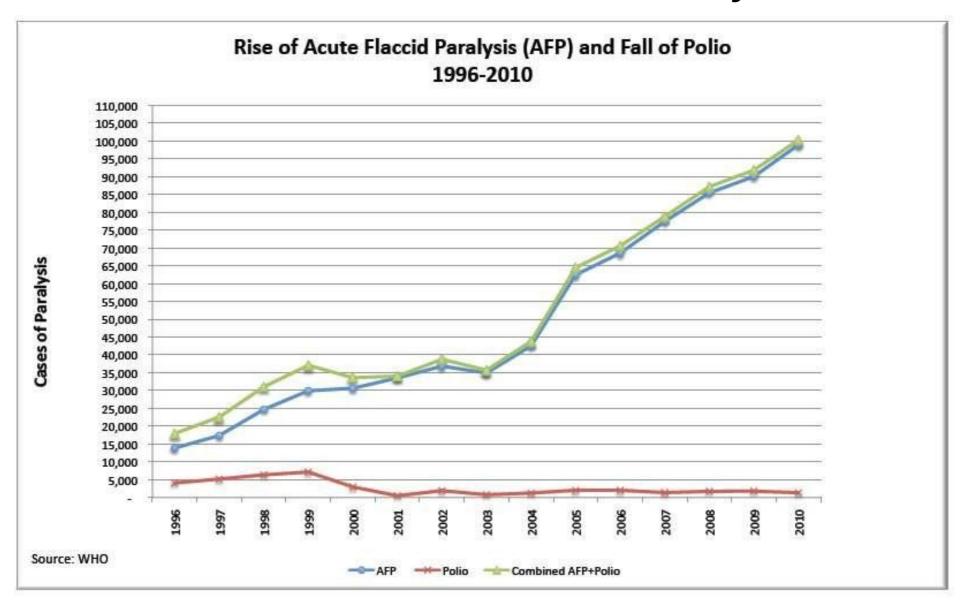
- a. 33 allergy-related genes activated
- b. 66 asthma related genes activated
- c. 67 cancer genes were up-regulated
- d. 25 immunological disease genes upregulated.
- Lahdenpera, 2008. PMID 18336961

6. Vaccines and Immune Disease

Adjuvants and preservatives included in vaccines enhance the pathogen specific immune responses and the potential of noxious effects of adjuvants for the recipient humans and animals. They not only enhance antigenic stimulation but also are capable of inducing auto-antibodies,inflammation, aberrant manifestations of arthritis, neuronal damage, encephalitis, myocarditis, vasculitis sclerosing lipogranulomas, siliconescleraderma, SLE (Systemic Lupus erythematosus), RA (rheumatoid arthritis).

-Vaccines and Autoimmunity. Yehuda Shoenfeld, Nancy Agmon-Levin and Lucija Tomljenovic, Editors. 2015. Wiley Blackwell Publishers. ISBN 978-1-118-66343-1

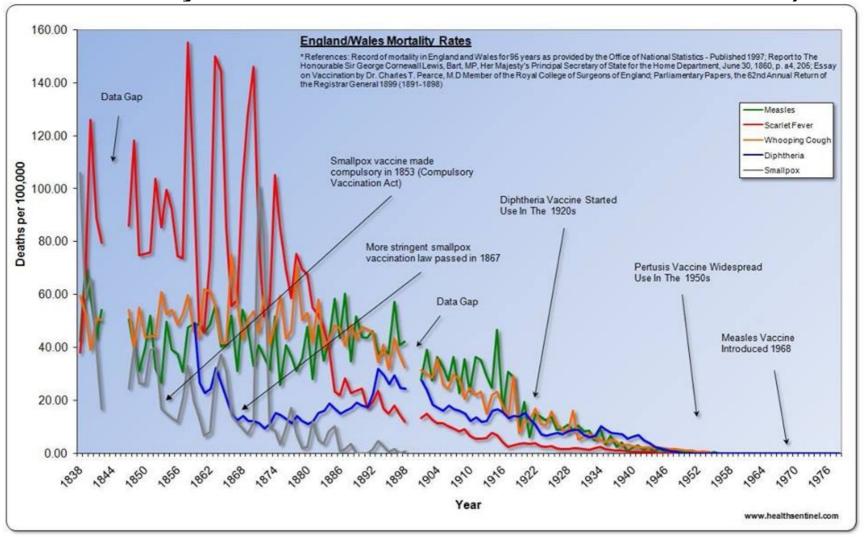
7. Polio Falls, Acute Flaccid Paralysis Rise



http://drsuzanne.net/wp-content/uploads/2012/07/Smoke-Mirrors-and-the-%E2%80%9CDisappearance%E2%80%9D-Of-Polio-_-International-Medical-Council.pdf

8.Disease Mortality Rates Over the Years

(Mortality rates for infectious diseases have declined drastically even before the advent of vaccines)



Humphries, S. & Bystrianyk, R.. (2014). Dissolving Illusions: Disease, Vaccines, and the Forgotten History. CreateSpace Independent Publishing.

There are much better alternatives in managing the Covid-19 pandemic.

- a. Protecting and strengthening the immune system.
- b. Viable treatment and supportive modalities.
- c. Addressing the social determinants of the pandemic.

1. Avoid or manage physical disruptors of the immune system:

- Ionizing radiation (X-rays; Cosmic radiation; Food contaminated with radionuclides, ex. Salmon, tuna, etc.; radioactive materials; nuclear power plants, nuclear weapons, high background radiation areas.
- Non-ionizing radiation(EMF): telecom, 5G, Emf emitting gadgets, microwave ovens, high voltage lines and equipment, etc.
- Physical injury, trauma, lack of sleep, extreme physical activity, physical restraint, isolation, suffocation, heat stress, cold stress, crowding, etc.

2. Avoid or manage chemical disruptors of the immune system:

- Pesticides (chlorpyrifos, glyphosate, paraquat, carbofuran, cypermethrin,etc)
- Petrochemicals, industrial chemicals(ex. toluene, methylene chloride, benzene, etc.) persistent toxic substances (plastics, flame retardants, etc), air pollutant emissions, heavy metals (e.g. mercury,lead, arsenic, cadmium, etc), endocrine disruptors, cleaning agents, synthetic food additives, nanoparticles, etc.

- 3. Avoid or manage biological disruptors of the immune system:
 - Genetically Modified Organisms (microbes, plants, etc)
 - Pathogenic microbes (viruses, bacteria, fungi, etc)
 - Parasitic organisms
 - Nutritional deficiencies
 - Underlying disease or abnormality
 - Too much or too little exercise

4. Avoid or manage spiritual/psychological disruptors of the immune system:

- -Psychological torture, bullying, oppression, threats, etc.
- -Fanaticism, exceptionalism, racism, bigotry, prejudice.
- -Selfish, arrogant, condescending behavior
- -Lack of social consciousness
- -Silence in the face of social oppression and violations of human rights
- -Ignorance, subservience, apathy and defeatism in the midst of social injustice and exploitation
- -Utter disregard of humanistic qualities, moral and spiritual values

5. Avoid or manage social disruptors of the immune system:

- -Systematically imposed social dominance and control.
- -Outright occupation, neo-colonialism, semi-feudalism, Imperialism, monopoly capitalism, neo-liberalism.
- -Chronic dependency and underdevelopment, poverty, worsening social inequity
- -Dictatorship, authoritarianism, militarization, national security and perpetual terror war doctrine.
- -Corporate control of science and technology, health systems, essential public utilities and industries, land and agricultural resources, food production and distribution, etc.

5. Avoid or manage social disruptors of the immune system:

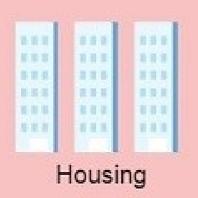
- -Corporate control of telecommunications, media, education, entertainment, sports, cultural events, etc.
- -Exploitation, disempowerment and displacement of communities and indigenous peoples.
- -Discrimination and exploitation of women, children and other groups.
- -Widespread violation of human rights
- -Global superpower rivalry leading to ever-increasing threats of biowarfare pandemics and nuclear annihilation.

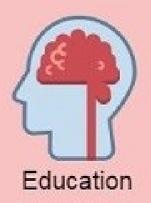
Social Determinants of Health

The social determinants of health are the conditions in which we are born, we grow and age, and in which we live and work.

These include...

















Each of these factors impact on our health and wellbeing

A fairer society is a healthier society

1. Ensure adequate general nutritional status

2. Nutrient supplementation as needed

- 2.1. Vitamin C
- 2.2. Vitamin A
- 2.3. Vitamin D
- 2.4. Other vitamins (E, B complex, etc.)
- 2.5. Omega-3 fatty acids
- 2.6. Essential minerals (zinc, selenium, magnesium)

- 3. Fruits, vegetables, medicinal plants and other nutrient supplementation (antioxidant, anti-inflammatory, anti-viral, immunomodulatory, etc.)
- 3.1. Citrus and other fruits (lime, lemon, orange, guava, kiwi, mulberry, etc)
- 3.2. Vitamin A rich vegetables (ex. moringa leaves, okra, radish, jute leaves (saluyot), taro leaves, chilies, carrots, beet, etc)



- 3.3. Omega-3 fatty acid rich foods (fish oil, nuts, seeds)
- 3.4. Mineral rich foods (fish, meat, nuts, legumes)
- 3.5.Medicinal plants (ex. Andrographis paniculata, Euphorbia hirta, Vitex negundo, Cannabis sativa, Curcuma longa, Zingiber officinale, Alium sativum, Melissa officinalis, Eucalyptus spp., Menthae spp., Thymus vugaris, Origanum vulgare, Ocimum basilicum, Piper nigrum, Hibiscus sabdariffa, Morus alba, Spondias pinnata, Phyllanthus emblica, etc.)
- 3.6. Seaweeds

3.5. Medicinal plants:



4. Maintain a healthy microbiome at all times

- 4.1. Avoid inappropriate use of antibiotics, antimicrobials, antiseptics.
- 4.2. Liberal intake of microbiome friendly foods (high fiber foods: vegetables, seaweeds, mushrooms, fruits).
- 4.3. Intermittent intake of fermented foods, drinks, probiotics and prebiotics (fermented vegetables and fruits, kimchi, miso, yogurt, kefir, etc).
- 4.4. Avoid too much intake of sugary foods, fatty foods, processed foods with synthetic chemical additives; meat, processed cow's milk, salty food, junk food.
- 4.5. Eat regularly a biodiverse and balanced diet.

- 5. Homeopathy
- 6. Acupuncture
- 7. Mindfulness meditation
- 8. Yoga
- 9. Tai chi/ Qi gong
- 10. Appropriate exercises
- 11. Others

Some drugs used empirically in the treatment of Covid-19

- 1. Interferon alpha/beta
- 2. Convalescent plasma
- 3. Hydroxychloroquine/chloroquine
- 4. Azythromycin
- 5. Ivermectin
- 6. Ramdesivir/ Favipiravir/Lopinavir
- 7. Tocilizumab/Leronimab
- 8. Stem cell
- 9. Chinese medicine (combinations)
- 10. Others

Some general measures to address the most fundamental threats to the immune system

- 1. Precautionary, preventive, and protective measures (laws, policies, governance, etc. at all levels), immediate and long-term, against as many threats as possible especially during the most vulnerable developmental period of the immune system (i.e.,conception, fetal development, birth, infancy and childhood).
- 2. Mass awareness raising and education of the people, especially would be mothers, on the extreme importance of the immune system on the health and survival of succeeding generations of humankind.

Some general measures to address the most fundamental threats to the immune system

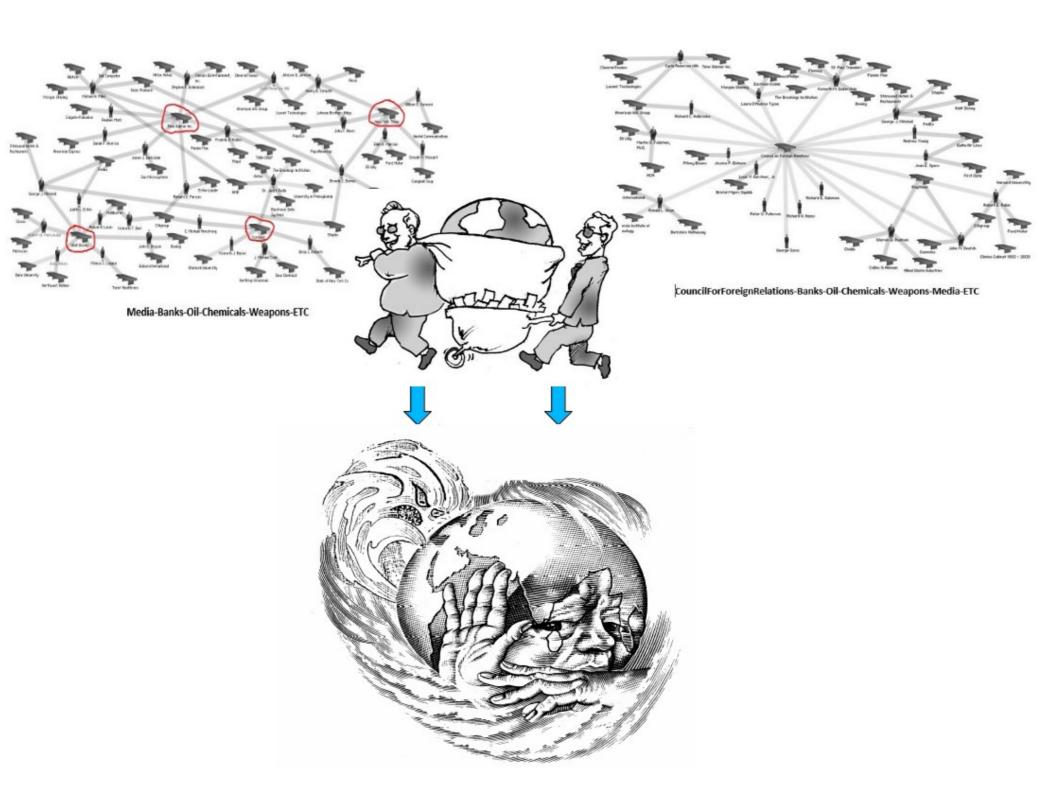
- 3. Confront the underlying social/structural threats to the immune system and people's health at the local, national, regional and international levels.
- 3.1. Build, unify, and strengthen people's movements for social justice and equity, genuine peace basic human rights, civil and political rights, environmental justice, toxics-free future, etc.
- 3.2. Struggle for the dismantling of the neoliberal, corporate globalization world order.
- 3.3. Struggle for the implementation of genuine agrarian reform and rural development.

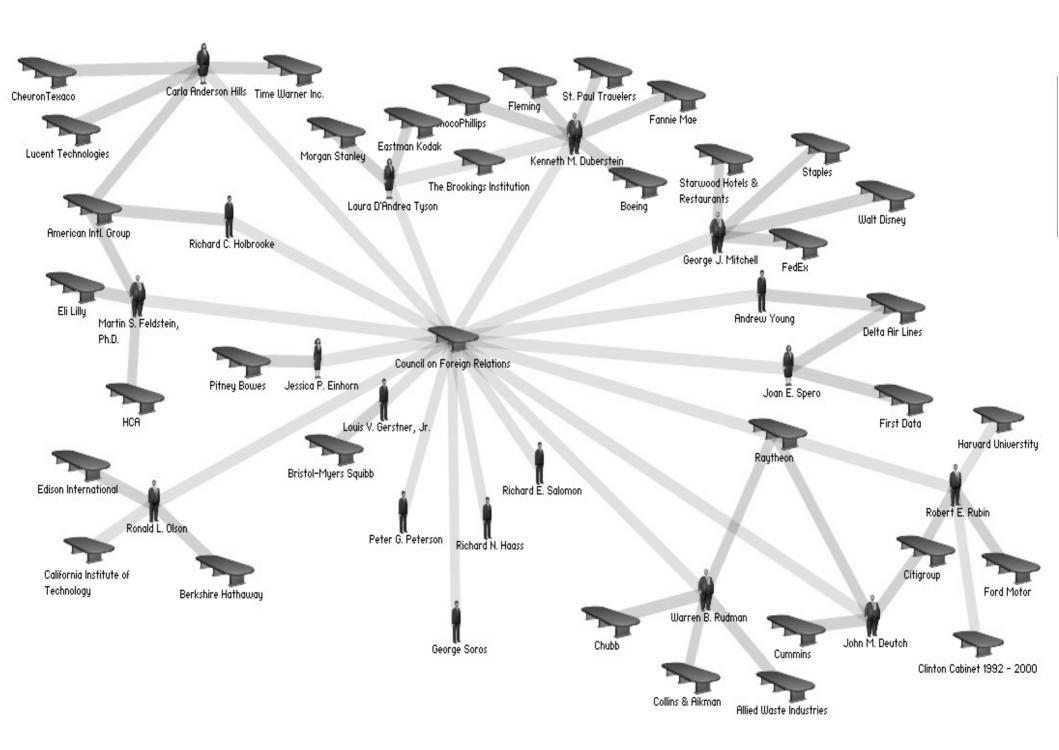
Some general measures to address the most fundamental threats to the immune system

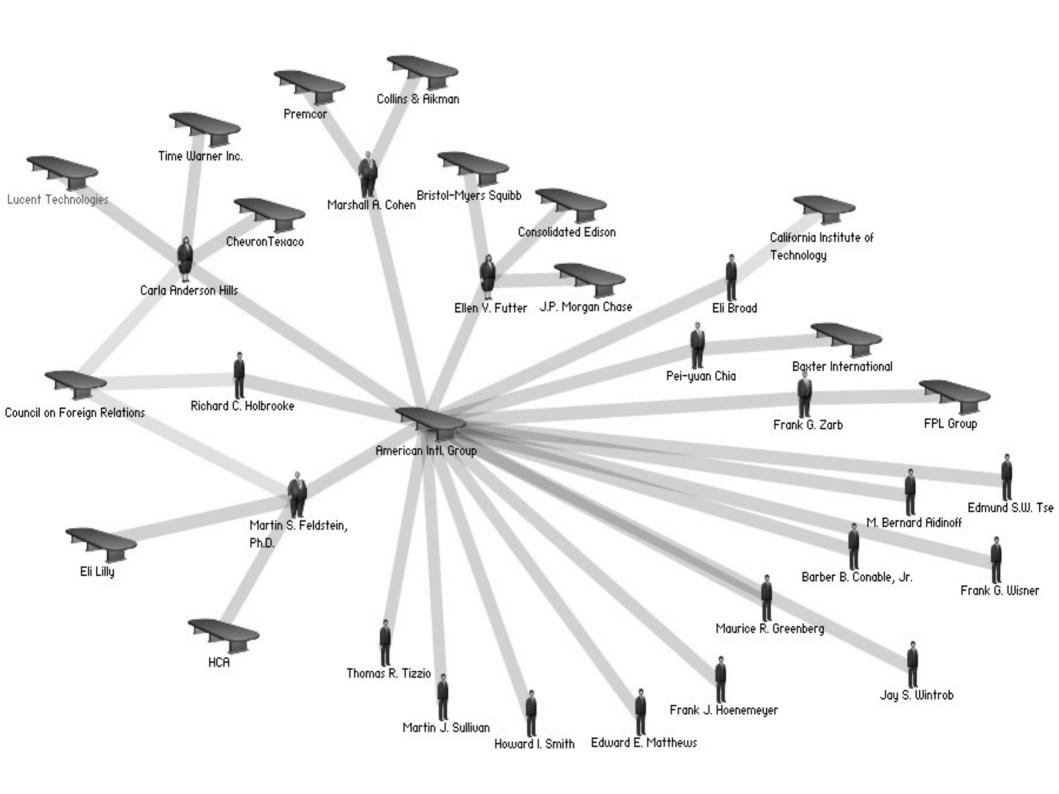
- 3.4. Ensure the enjoyment of socio-economic rights (i.e., gainful and safe employment, health, education, housing, etc.
- 3.5. Struggle for women and children's rights, indigenous and other sectoral rights.
- 3.6. Propagate a progressive and liberative mass culture.

Socio-economic Context









So, what needs to be done?

- A wareness raising
- N etworking among groups
- T echnical capacity building
- Information exchange/monitoring
- **D** eepening of understanding
- O rganizing concerned people
- T ransformative action
- E mpowerment of people

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