



The World Foundation for Natural Science

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Restoring and Healing the World through Responsibility and Commitment in accord with Natural and Divine Law!

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SARS-CoV-2 vaccines: should you get one, every year? – Part 1 of 2

“Vaccination is a barbarous practice, and it is one of the most fatal of all the delusions current in our time, not to be found even among the so-called savage races of the world. Its supporters are not content with its adoption by those who have no objection to it, but seek to impose it with the aid of penal laws and rigorous punishments on all people alike...

“I cannot also help feeling that vaccination is a violation of the dictates of religion and morality... The vaccine is a filthy substance, and it is foolish to expect that one kind of filth can be removed by another...

“Those who are conscientious objectors to vaccination should stand alone, if need be, against the whole world, in defense of their conviction.”

Mahatma Gandhi wrote this in “A Guide to Health” in 1921. Now, 100 years later, the Covid-19 so-called pandemic, as declared by the World Health Organization, has brought vaccines into sharp focus. A global, multi-billion dollar drive funded by governments, corporations and philanthropic foundations to produce a vaccine that is meant to protect against SARS-CoV-2, the “novel” coronavirus. Until a vaccine is administered, the pandemic has given governments the opportunity to remove many freedoms and human rights around the world. With over 200 vaccines in various stages of development and with governments placing pre-orders in the hundreds of millions already, we must wonder what is really going on? In the UK, the Secretary of State for Health, Matt Hancock, has already contracted AstraZeneca (in June 2020) to bring into mass production its vaccine (a joint venture with Oxford University). The so-called ‘Oxford’ vaccine has yet to complete its safety trials, was halted in its progress by severe adverse health reaction in at least one individual, yet the UK Government has asked for millions to be produced already – just in case it gets the seal of approval. If this seems like putting the cart-before-the-horse, or a fait accompli, then it probably is. In other words, is the UK population going to be ‘offered’ the Oxford vaccine whatever the

outcome of its trials? This appears to be the case because Birmingham was told to prepare for mass vaccinations by early November 2020, though at time of writing this is looking more like late December–early 2021. It is to receive two vaccines: “Ambush” and “Triumph” (the names given to the UCL and Oxford vaccines). Some 800,000 people are expected to be vaccinated en masse.¹⁾ Makers of the Oxford vaccine anticipate every adult in the UK could be vaccinated by Easter 2021.²⁾

Governments regularly rubber stamp vaccine approval irrespective of trial results. In the world of so-called pandemics, such as the H1N1 (swine flu) outbreak in 2009, many governments were forced to buy up billions of vaccines in the event of a pandemic because they had agreed sleeper contracts wherein in the event of a pandemic being called – by the World Health Organization – those governments with contracts had to honour them, no matter what. **The result of the H1N1 pandemic in the UK was the Government having to pay out £60 million of taxpayer money in compensation for GlaxoSmithKline’s Pandremix vaccine injuries that caused narcolepsy and cataplexy in 60 children**³⁾. Other nations were affected. Swedish children were also injured from the same vaccine (three times the rate of narcolepsy was found among those children vaccinated than those unvaccinated with Pandremix⁴⁾ and it is reported that despite knowing of the side effects, the Irish Government rolled out GSK’s Pandremix and granted GSK immunity from prosecution.⁵⁾ It has taken 10 years for the Irish Government to pay out after lawsuits and it is expected the costs could amount to 4m euros.⁶⁾ The take up of the GSK vaccine in Germany was low and great doubts about its safety were already raised in 2009. It appears the vaccine was not licensed in Germany or Switzerland.⁷⁾

The cost of compensation – which the UK and US governments ‘offer’ to those damaged by vaccines – falls therefore on the taxpayer. There is more than enough evidence to show this is the case – **that vaccines do cause harm to otherwise healthy individuals.**⁸⁾ Despite this, the Covid-19 vaccine arms race is running wild throughout the world. Russia claim to have succeeded. China is already vaccinating its ‘key workers’ and the military; a nasal spray vaccine is also in development. As a nasal spray, there is opportunity for other vaccines, such as the influenza vaccine to piggyback off the Covid-19 vaccine.⁹⁾ In America, President Trump had demanded a vaccine be available at “warp speed”, that is, produced at record pace, and before the Presidential elections in November 2020. This did not materialise but it seems vaccines may become available around December. **Vaccines normally take 10-15 years to be produced. The Covid-19 vaccines are being rushed through in just one year-to-18 months.** Why the rush is not clear. Has vaccination become a political issue rather than a health one? Dr Anthony Fauci, a member of the US Government Covid Taskforce is the face of the pro-vaccine campaign in the US. Yet as a government official, he is leading the development of the

Moderna mRNA Covid vaccine, partly funded by the Gates Foundation¹⁰). The line between government and corporation in the United States (and in the UK) has become very murky.

Side effects without responsibility

What's even more odd at least in the UK was the announcement that the Government are expecting to promote an "unlicensed" vaccine. What this implies is that a Covid-19 vaccine will be administered to the UK without actual Government approval. To quote the BBC from 28 August 2020¹¹).

"There are also plans to strengthen the Medicines and Healthcare products Regulatory Agency (MHRA)'s powers to roll out an unlicensed vaccine rapidly if one becomes available before the new year.

In addition... to amend the Human Medicine Regulations 2012 ... to protect companies that manufacture and distribute the vaccine, should it cause any harm.

This is to prevent them from bearing the risk caused by decisions made by government to roll out unlicensed vaccines, in order to protect the health of the public."

This does not make any sense! The goal, according to the BBC, is to roll out unlicensed vaccines and to protect the companies who made them from prosecution in case something goes wrong, like side effects that cause harm! Yet this is done "in order to protect the health of the public." An unlicensed product, should it cause harm, may actually only protect the Government – who could say: we didn't give it approval i.e. a license, so you can't blame us! **If a license is granted, then it must have demonstrated its safety. Then if harm is caused, someone must be liable.** It's like being in a car accident with a driverless car. It's hard to claim against an insurer when there isn't a driver! Do you seek compensation from the manufacturer, the passengers, the government?

If this is the case in the UK, rest assured this is the case elsewhere.¹²) The WHO has already – under the influence of Bill Gates – insisted that pharmaceuticals are immune from prosecution globally, wherever they roll out their vaccination programme especially with mRNA vaccines. Will unlicensed mRNA vaccines be unleashed everywhere?

Research is on-going in how to convince people to take untested and potentially very dangerous unlicensed (or indeed licensed) vaccinations.¹³) This is a dangerous situation. Over the last year or two there have been concerted efforts to label those who question the safety and effectiveness of vaccination as, according to the UK Prime Minister Boris Johnson, "nutjobs"¹⁴). **Yet, is it not a human right to question what is good for our bodies and to reject that which is not?** Even the WHO admits vaccines cause outbreaks of disease that it is meant to eradicate.¹⁵) With all of the above taken into consideration,

is it really the case that vaccines are the only solution to pandemics? Read The World Foundation for Natural Science [article](#) on exactly this topic.¹⁶⁾ Let us now look at the specifics of RNA vaccines.



RNA: ribonucleic acid and us

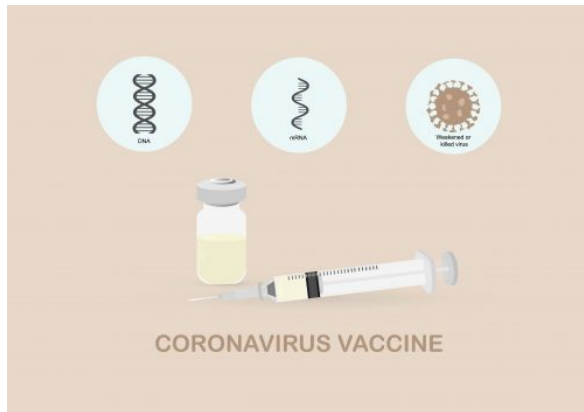
Let us return to the point of the article and that is the ‘new’ type of vaccine being proposed, the RNA (ribonucleic acid) changing vaccine. Traditional vaccines contain a whole host of inert and active strains of viruses, and many other unpleasant ingredients. The concept behind the vaccine is that the inert viruses need to be switched on for your body to develop antibodies and hence immunity to the virus you are being vaccinated against. However, the switch or adjuvants are themselves unhealthy: thimerosal (mercury) and aluminum hydroxide, as well as many more. Heavy metals are of themselves toxins and can have a damaging effect on the immune system by weakening gut flora or even poisoning the gut, causing issues with perception to point of the most severely affected not progressing in their development or even falling into a ‘dark hole’ where communication outside that darkness seems close to impossible. I am referring to autism.¹⁷⁾ Not everyone is harmed to that extent because everyone’s immune systems are at different strengths and stages of development. **Children are most injured from such vaccines, especially toddlers.**

RNA vaccines are very different in that the active goal of the vaccine, rather than inject a virus into you, is to change your DNA through gene edited RNA that makes your body produce a protein that is meant to defend against a virus, in this case Covid-19. Alterations to RNA that are done in a laboratory have hazardous results. Research and outcomes from genetic engineering over the last 40 years demonstrate this clearly.¹⁸⁾

What is DNA? These are the very basic building blocks for instructing our bodies to function. RNA is a specialised form of DNA, that sends messages to DNA telling it what proteins to form. It was thought that by controlling DNA, we can control life because life fatalistically gives you the DNA you have, and you are stuck with it. This dogmatic thinking, promoting the Darwinian view of survival of the fittest DNA, is wrong. Yes, we need fit DNA but our bodies are more influenced by what is around us. Our environment

changes our cells and our DNA. Our environment is not only the physical world but also the world of our feelings, and our thoughts. We can change our own DNA by right thoughts, right emotions and right actions. The scientific field studying this is epigenetics.¹⁹⁾ It has been postulated convincingly that electricity and electromagnetic radiation cause diseases and pandemics, not viruses.²⁰⁾

The Risks of Rushing Vaccine Development



Research into coronaviruses has been conducted for many years. DNA sequencing of many coronaviruses (avian, human, bovine, murine and two porcine) has occurred, including investigations in how coronavirus RNA and mRNA can be modelled.²¹⁾ As such, it could be expected that given so much is already known about coronaviruses, the novel coronavirus SARS-CoV-2 would have its genome mapped

relatively quickly.²²⁾ So producing a vaccine ought not to be too difficult? **There has been no success in producing a coronavirus vaccine over the last thirty years.**²³⁾

The global rush to be the first to produce a vaccine is fraught with danger. As explained by *Time* magazine²⁴⁾.

“The quest to develop a vaccine for a new infectious disease is a gamble at best; nearly four decades after HIV was discovered, there is still no effective vaccine against that virus. SARS-CoV-2 is so new to the scientific community that it’s not even clear yet what the human body needs to prevent infection—or if such a thing is even possible.”

It is also the case that viruses adapt and mutate very quickly. Even if a vaccine would work and would be safe, its target virus has long changed, which makes the vaccine useless because it was last year’s virus, and this year’s is different. **Vaccines cannot be developed faster than viruses change. Coronavirus vaccines have been in development for 30 years but all have had serious side effects or they have simply failed.**²⁵⁾ The difficulty in producing a vaccine – if we hypothesize that vaccines actually work – is in isolating the genome and then purifying it in order to work out an effective and safe counter. As the SARS-CoV-2 genome was so quickly mapped, perhaps there are other issues afoot in identifying a medical solution.

Given the headstrong rush to push an unlicensed vaccine onto the world, accepting so readily something that may change our DNA irrevocably would be extremely risky. Given that Covid-19 seems to only seriously affect the frail, very elderly and those with severe co-morbidity or weak immune systems; is not all we are seeing a massive or even deliberate overreaction? **The evidence from the US Centers for Disease Prevention**

and Control is that the survival rate from those who contract Covid-19 is, in age range: 0-19 99.997%, 20-49 99.98%, 50-69 99.5%, 70+ 94.6%. ²⁶⁾ Almost no one – as a percentage of the population – is dying from Covid-19 (or with Covid-19) other than those over 70 who contract it and have other severe underlying health problems. **So is this really a pandemic, something to fear?** The 2009 fake H1N1 swine flu pandemic comes to mind. The WHO changed its definition of the term ‘pandemic’ one month before declaring the H1N1 influenza pandemic. The WHO definition prior to the change read: “An influenza pandemic occurs when a new influenza virus appears against which the human population has no immunity, resulting in several simultaneous epidemics worldwide with enormous numbers of deaths and illness.” One month before declaring the H1N1 a pandemic, the WHO’s definition changed to this: “An influenza pandemic may occur when a new influenza virus appears against which the human population has no immunity.” The WHO article continues: “Months later, the Council of Europe would cite this alteration as evidence that WHO changed its definition of pandemic influenza to enable it to declare a pandemic without having to demonstrate the intensity of the disease caused by the H1N1 virus.”²⁷⁾ **A fake pandemic does not mean a fake virus** but it does mean that the measures to counter something that is no more virile than seasonal flu are all out of proportion. Sleeper contracts with pharmaceuticals comes to mind also. Perhaps it would be worth considering how much money the pharmaceuticals could earn, how much their backers, such as the Bill & Melinda Gates Foundation could earn, from this? And to what extreme measures could they push governments in order to achieve their aims? Every person on the planet to be vaccinated? Bill Gates said it himself: “Until we get everybody vaccinated globally, we won’t be able to go back to normal.”²⁸⁾ (More on BMGF can be found [here](#).)

What’s in the new vaccine?

No one outside of the pharmaceuticals is entirely sure. The idea of the RNA vaccine is that it places a string of ribonucleic acid into the cells of the body. That string is meant to “transfect” the cells of the body into producing a protein that will attack the SARS-CoV-2 virus – should you have it. So, as Bill Gates has said, the injected DNA and RNA might “turn your body into its own vaccine manufacturing unit.”²⁹⁾ This is a pipe dream and quite repulsive – **10 years of DNA and RNA vaccine making has led to no good results**; that much is clear because all previous mRNA vaccines developed have failed to obtain a license for use otherwise they would have been allowed long ago. That is, they did not get the results hoped for. We now have the other issue of what might also be in the RNA vaccines, put there by design, that we are not informed about? It is the case that the WHO has illegally sterilized African women through vaccines by including in the vaccines agents that cause sterilization. According to the information on mRNA vaccines made public, they are designed to force the normal cells of your body to create the SARS-CoV-2 spike protein. This is a glycoprotein that attaches to the normal ACE2

receptor of cells. This is very unusual because it does this so easily, as if pre-ordered for the part. In theory, before this enters a cell, your immune system should mount a response by producing antibodies. However,

“According to researchers at University of Pennsylvania and Duke University, mRNA vaccines have potential safety issues, including local and systemic inflammation and stimulation of autoreactive antibodies and autoimmunity, as well as development of edema (swelling) and blood clots.”³⁰⁾

This does not look good and helps explain why no mRNA vaccines have ever been approved previously. Yet, governments are not even hesitating to permit pharmaceuticals complete freedom to produce whatever they wish. Given that our DNA could be permanently altered, there are concerns arising that we are going to be part of a transhuman experiment where DNA can be altered almost at will.³¹⁾ Whether this is going to be the case or not is questionable but there are serious questions that remain entirely unanswered by vaccine manufacturers of exactly what is in their vaccines, especially those that produce a new protein. What will that new protein do to the cells it enters?

Much of the effort into producing a vaccine is in a technology called gene editing.

This technology is similar to the approach taken in gene editing in animals and plants, something the European Union has classified as genetic modification in that the process of gene editing under law creates products that would not have occurred naturally and therefore must be regulated in the same way as genetic modification is.³²⁾

End of Part I - To be continued

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