

COVID-19 vaccines may cause organ damage; pathologists ask for autopsies to investigate inoculation programs

Description

After thousands of people died following inoculation with COVID-19 vaccines, a pathologist finally asks: Where are the autopsies to investigate organ damage caused by the spike protein? The U.S. Food and Drug Administration previously ignored warnings before the vaccines have been distributed that they could likely cause organ damage. The data was published before and after the program was initiated, showing that spike protein can damage the microvasculature.

An analysis of 789 professional athletes who tested positive for COVID-19 showed no adverse cardiac events, however, the vaccine reporting system, VAERS, showed that 11,793 people had heart attacks or were diagnosed with myocarditis or pericarditis after their vaccinations. The list of people reporting adverse events has been growing as well.

A video from America's Frontline Doctors White Coat Summit showed <u>pathologist Ryan Cole outlining</u> <u>many health challenges</u> associated with the experimental genetic therapy injection program. With thousands of people dying from COVID-19 vaccines, where are the autopsies to investigate the program?

In July, the U.S. military published a study in which they asked whether or not myocarditis was a possible adverse event following an mRNA COVID-19 vaccination.

They identified 23 men diagnosed with myocarditis within 4 days of getting the shot and determined that there was a diagnosis of myocarditis after vaccination in the absence of other identified causes.

Despite finding myocarditis in previously healthy individuals following the shot, the writers only recommended vigilance, adding that citizens should not diminish overall confidence in vaccinations during the pandemic.

Millions may experience potential injuries or death following COVID-19 vaccination

In early 2020, clinicians, scientists and health experts warned that millions of people may experience potentially permanent or <u>long-term injury or death after a COVID-19 vaccine shot</u>. Dr. J. Patrick Whelan, a pediatric rheumatologist, previously warned the FDA of the microvascular injury that the vaccine may cause to different organs. Whelan specializes in treating children with multisystem inflammatory syndrome, which is also associated with coronavirus infections.

While he did not dispute the potential benefit of vaccines to stop the spread of the virus, he did caution that recipients may experience permanent damage to their microvasculature. (Related: <u>The</u> coronavirus may actually be a vascular – and not a respiratory – disease.)

At the time, the main concern was based on data scientists and doctors who reported infections with COVID-19 affecting multiple organs beyond the lungs. This information is particularly important because the study demonstrated that the spike protein associated with SARS-CoV-2 could damage the endothelial function and can cause damage to the endothelial cells lining the circulatory system.

The information was not discussed in the media and was not considered by the FDA. It remains buried as government agencies try to push for full vaccination in the U.S.

Other studies also demonstrated that it was not the virus that was causing endothelial damage that led to organ damage such as in the heart, liver or kidney of COVID-19 patients, but that it was the spike protein that was used in a genetic therapy shot program.

Researchers are still studying how the spike protein affects the endothelial cells, and ultimately, damages the heart muscle. Even as researchers identify the pathway of spike proteins to damage the endothelial cells, it is being ignored by those who continue to push for public vaccination that does not effectively keep people from getting the disease, or stop them from spreading.

The <u>FDA</u> approved the <u>Pfizer COVID-19</u> vaccine in <u>August</u> despite many issues. For instance, vaccines were found to more likely kill than save people. While the vaccine reduced COVID-19 deaths by 50 percent, it comes at a cost of increasing deaths from other problems such as cardiac arrests, showing that the net benefit is at a negative. Pfizer's own studies, for instance, showed that deaths from COVID were reduced by a factor of 2, but the saving was offset by deaths from cardiac arrests, which went up by up to four times.

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