

The Killer in the Bloodstream: the “Spike Protein”

Description

This is a pretty long pair of articles on the **spike protein**, but well worth it we believe in trying to understand what’s really going on with this manufactured virus crisis.

It isn’t enough to simply feel vindication that the virus is finally being revealed to be a ‘leaked’ bioweapon. If its properties are really so harmful, then was it leaked or **disseminated**? Dissemination is the hypothesis we favour given our coverage of the ‘pandemic’ during 2020, the absence of patient zeroes anywhere, and the curious simultaneous appearance of it globally.

The first extract, somewhat technical in nature, is by **Josh Mitteldorf** from *Unthinkable Thoughts. The Spike Protein*. The second is a **Mike Whitney** piece first published through *Unz*.

There are two main elements to bear in mind here:

1. the spike protein as part of the *constructed* virus was **designed to be harmful**
2. they then made a genetic treatment (‘vaccine’) to **cause our bodies to create trillions of copies of it**

And there’s a third:

The ‘vaccine’ has been designed so that the spike protein ISN’T easily destroyed BEFORE the immune system response can be made. Bless them...

If so, has this been a 9/11 equivalent against each and every one of us?

Note in the Mitteldorf piece, **the coronavirus has been specifically designed to do 2 things:** a) enter our cells more easily, by b) breaking off the spike proteins, which are then disseminated throughout the bloodstream to create additional havoc. A double whammy.

Unthinkable Thought. The Spike Protein

JOSH MITTELDORF

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Instead, I'll try to follow the scientific and medical implications of the hypothesis that **COVID is a bioweapon.**



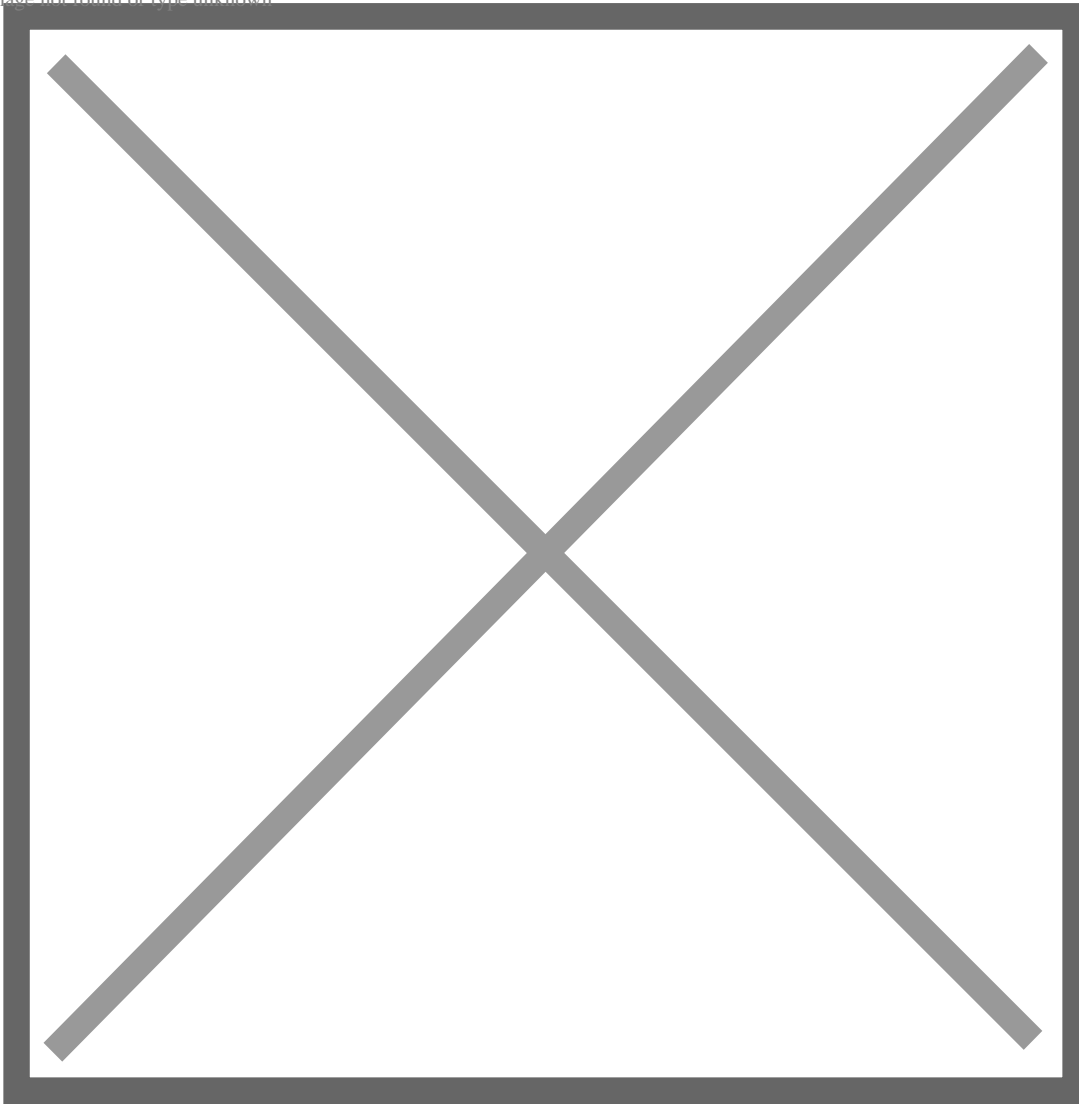
The spike protein is the part of the virus structure that

interfaces with the host cell. SARS 1 and SARS 2 viruses both have spike proteins that bind to a human cell receptor called ACE-2, common in **lung cells but also present in other parts of the body**. Binding to the cell's ACE-2 receptor is like the wolf knocking at the door of Little Red Riding Hood's grandmother. "Hello, grandmama. I'm your granddaughter. Please let me in." The virus is a wolf wearing a red cape and hood, pretending to be an ACE-2 enzyme molecule seeking entrance to the cell.

In order to enter the cell, the virus must break off from the spike protein and leave it at the doorstep, so to speak. This is an important and difficult step, as it turns out. **Unique to the SARS-CoV-2 virus is a trick for making the separation.** Just at the edge of the protein is a **furin cleavage site.** Furin is an enzyme that snips protein molecules, and it is common in our bodies, with legitimate metabolic uses. A furin cleavage site is a string of 4 particular amino acids that calls to furin, "hey — come over here. I'm a protein that needs snipping."

The most compelling evidence for a laboratory origin of COVID is that **coronaviruses don't have furin cleavage sites,** and until last year, this trick has never evolved naturally.

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How we think about natural disease

The classical understanding of a viral or bacterial disease is this: A parasite is an organism that uses the host's resources for its own reproduction. It is evolved to reproduce efficiently. If it has co-evolved with the host, it may be evolved to spare the host's health, or even to promote it, because **this is the optimal long-term strategy for any predator or parasite**. But newly-emerged parasites can do well for awhile even if they disable or kill their hosts, and this is the kind of disease that is most damaging to us. The damage is done because the (young) virus's strategy is to reproduce rapidly and disperse itself into the environment where it can find new hosts. The virus has no interest in harming the host, and was not evolved to this end, but this is a side-effect of commandeering the body's resources for its own reproduction.

How engineered diseases can be different

A bioweapon virus is designed to cause a certain kind of harm.

- *What kind of harm?* It depends on the projected use for the weapon.
- *Doesn't the virus have to reproduce?* Probably, for most weapon applications; but a bioweapon is not necessarily designed for rapid reproduction. A bioweapon can be designed as a "sleeper" to remain dormant for months or years, or to cause incremental disability over a long period.

If COVID had evolved naturally, we would expect that its spike protein would be adapted to mate well with the human ACE-2 receptor. There's no reason to suspect it being otherwise biologically active. But if COVID is engineered, it may be that **the spike protein itself has been designed to make us sick.**

One reason this is significant is that **the vaccines have all been designed around the spike protein**, assuming that the spike protein were metabolically neutral. If the virus had been naturally evolved, this is a reasonable assumption. But if it came from a laboratory (whether it leaked or was deliberately released) the **spike protein might be actually be the agent of damage. There are several reasons to suspect that this is the case.**

The Spike Protein as an Active Pathogen

Back in February, 2020, [this article](#) noted that the spike protein was not perfectly optimized to bind to human ACE-2 and put this forward as an proof that "SARS-CoV-2 is not a purposefully manipulated virus." But if someone were designing the virus to cause harm, the spike protein would be a convenient locus for the damage vector, so the spike might have been designed with twin purposes in mind, binding and toxicity. **The spike protein appears in many copies around the "crown" of the coronavirus. Since each copy has a furin cleavage site at its base, many spike proteins will break off into the bloodstream.** We now have several reports and hypotheses concerning the spike protein as an active agent of damage. The spike protein is suspected of causing **blood clots**, of inducing **long-lasting neurological damage**, and of causing **infertility**. Many anecdotes describe injuries to un-vaccinated people who have been in close proximity to vaccinated, prompting speculation about "shedding" the spike protein.

"Individuals with COVID-19 experience a vast number of neurological symptoms, such as headaches, ataxia, impaired consciousness, hallucinations, stroke and cerebral hemorrhage. But autopsy studies have yet to find clear evidence of destructive viral invasion into patients' brains, pushing researchers to consider alternative explanations of how SARS-CoV-2 causes neurological symptoms....

If not viral infection, what else could be causing injury to distant organs associated with COVID-19? **The most likely culprit that has been identified is the COVID-19 spike protein released from the outer shell of the virus into circulation.** Research cited below* has documented that the viral spike protein is able to initiate a cascade of events that **triggers damage to distant organs in COVID-19 patients.**

Worryingly, several studies have found that the spike proteins alone have the capacity to cause widespread injury throughout the body, without any evidence of virus.

What makes this finding so disturbing is that the COVID-19 mRNA vaccines manufactured

by Moderna and Pfizer and currently being administered throughout the U.S. **program our cells to manufacture this same coronavirus spike protein** as a way to trigger our bodies to produce antibodies to the virus.” [\[Global Research article, Feb 2021\]](#)

Note: the Astra-Zeneca and J&J vaccines are also based on the spike protein, and cause the spike protein to be created in the vaccinated person.

“Research cited below” refers to [this study in Nature](#) which reports that the spike protein, injected into mice, crosses into the brain, where it causes neurological damage.

Bigger news came just this week from a study in which researchers from California’s Salk Institute collaborated with Chinese virologists. They have found that the **bare spike protein without the virus (injected in mice) can cause damaged arteries of the kind that lead to heart disease and strokes in humans**. The original paper was published in [Circulation Research](#), and the [Salk Institute issued a news report](#) describing the research.

One of the most credible dangers of the spike protein involves **fertility**. None of the vaccines were tested in pregnant women, and yet many government and other authorities are recommending it as safe for pregnant women. VAERS has reported [174 miscarriages](#) to date after COVID vaccination. VAERS is [notoriously underreported](#). I find [the anecdotes](#) less concerning than the fact that no one is taking this seriously, and research is being actively discouraged in the best-respected science journals.

There is a credible mechanism, in that the **spike protein is partially homologous to syncytin**. Syncytin, in fact, was originally a retroviral protein, inserted into the mammalian genome many aeons ago, and evolved over the ages to **play an essential role in reproduction, binding the placenta to the fetus**. An immune response that attacks syncytin might be expected to impose a danger of **spontaneous abortion**. In any ordinary times, this would be a subject that medical researchers would jump on, with animal tests and field surveys to assess the danger. But these are no ordinary times, and **the risk is being dismissed on theoretical grounds without investigation**. This is especially suspicious in the context of history: a Gates Foundation [vaccination program in 1995](#) was allegedly **promoted to young women, causing infertility**. (Yes, I know there are many fact-checkers eager to “debunk” this story, but I don’t find them convincing, and some of these fact-checkers are compromised by Gates funding.)

Even doing what the spike protein is supposed to do — **tying up ACE2** — can be a [problem for our lungs and arteries](#), which are [routinely protected by ACE2](#).

The most dangerous possibility, suspected but not verified, is that the **spike protein causes a prion cascade**. Prions are paradoxical pathogens, in that they are misfolded proteins that cause misfolded proteins. Their evolutionary etiology is utterly mysterious, so much so that it took [Stanley Prusiner](#) a decade after describing the [biology of prions](#) before the scientific community would take prion biochemistry seriously. But **prions make potent bioweapons**, which laboratories can design outside of natural evolutionary dynamics. The possibility of **prion-like structures in the spike protein was noted very early in the pandemic** based on a computational study. This recent review combines theoretical, laboratory, and observational evidence to make a case for caution. Once again, I find it disturbing that this possibility is being dismissed on theoretical grounds rather than investigated in the lab and the field.

Where did the idea come from that all vaccines are automatically safe? Why do so many journalists **dismiss the suggestion that vaccines should be placebo-tested individually, like all other drugs**

? Why has it become routine to ridicule and denigrate scientists who ask questions about vaccine safety as politically-motivated luddites, or “anti-vaxxers”? How did we get to a situation where the “precautionary principle” means pressuring young people who are at almost no risk for serious COVID to accept a vaccine which has not been fully tested or approved? I don’t have answers, but I do know who benefits from this culture.

Putting together all the evidence

- Knowledge beforehand
- Suppression of treatments and cures
- **Toxicity of the spike protein which, if it had been made by nature, should have been benign**
- **Inclusion of the spike protein**
- Heavy promotion of scantily-tested vaccines and
- Censorship of scientists and doctors who question the vaccines’ safety

... putting together all this evidence, it is difficult to escape the inference that powerful people and organizations have engineered this pandemic with deadly intent.

[Source](#)

- Evidences
- Addiction Treatment
- Agent
- Reproduction
- Amino

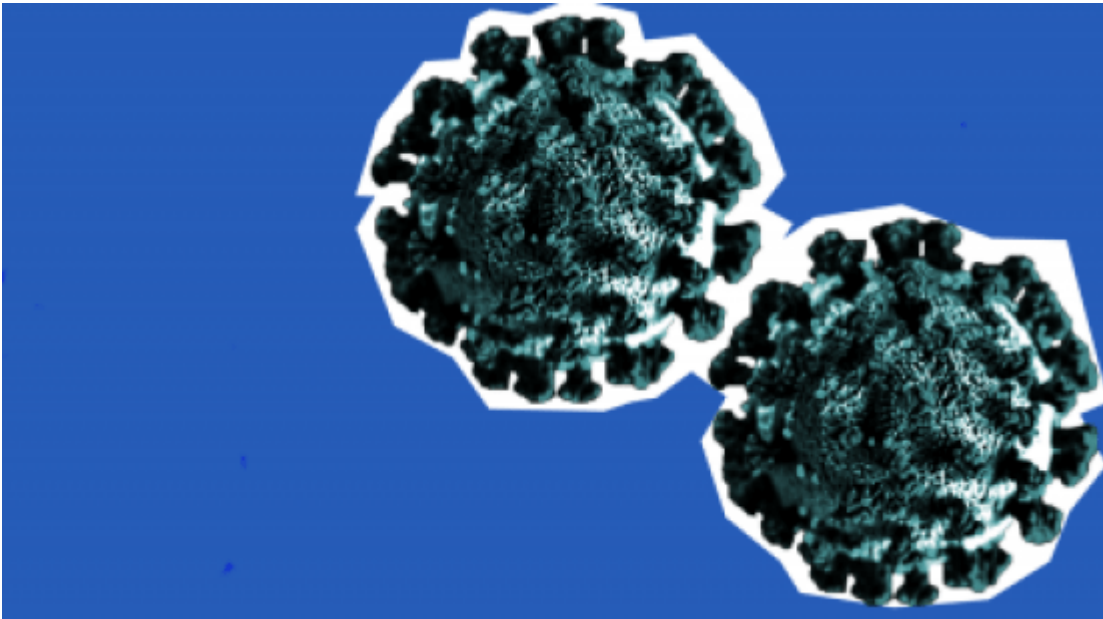
The Killer in the Bloodstream: the “Spike Protein”

Has there ever been a greater threat to humanity than the Covid vaccine?

MIKE WHITNEY

“From the beginning Covid has been a conspiracy against health and life. Covid is a profit-making agenda and an agenda for increasing arbitrary government power over people. There should be massive law suits and massive arrests of those who block effective Covid cures and impose a deadly vaccine.”

– Paul Craig Roberts, Former Assistant Secretary of the Treasury under President Ronald Reagan



The Spike Protein is a “uniquely dangerous” transmembrane fusion protein that is an integral part of the SARS-CoV-2 virus. “The S protein plays a crucial role in penetrating host cells and initiating infection.” It also damages the cells in the lining of the blood vessel walls which leads to blood clots, bleeding, massive inflammation and death.

To say that the spike protein is merely “dangerous” is a vast understatement. It is a potentially-lethal pathogen that has already killed tens of thousands of people.

So, **why did the vaccine manufacturers settle on the spike protein** as an antigen that would induce an immune response in the body?

That's the million-dollar question, after all, because for all practical purposes, the spike protein is a poison. We know that now due to research that was conducted at the Salk Institute. Here's a summary of what they found:

“Salk researchers and collaborators show how the protein damages cells, confirming COVID-19 as a primarily vascular disease.... SARS-CoV-2 virus damages and attacks the vascular system (aka—the circulatory system) on a cellular level... scientists studying other coronaviruses have long suspected that the spike protein contributed to damaging vascular endothelial cells, but this is the first time the process has been documented....

... the spike protein alone was enough to cause disease. Tissue samples showed inflammation in endothelial cells lining the pulmonary artery walls. The team then replicated this process in the lab, exposing healthy endothelial cells (which line arteries) to the spike protein. They showed that the spike protein damaged the cells by binding ACE2... **“If you remove the replicating capabilities of the virus, it still has a major damaging effect on the vascular cells,** simply by virtue of its ability to bind to this ACE2 receptor, the S protein receptor, now famous thanks to COVID.” ([“COVID-19 Is a Vascular Disease: Coronavirus’ Spike Protein Attacks Vascular System on a Cellular Level”](#), [scitechdaily.com](#))

Remember how everyone laughed at Trump when he said injecting household bleach would cure Covid? How is this any different?

It’s not different, and **whatever modest protection the vaccines provide as far as immunity, it pales in comparison to the risks they pose to personal health and survival.**

And did you notice what the author said about stripping-out the virus and leaving the spike protein alone?’

He said “it still has a major damaging effect,” implying ‘blood clots, bleeding and severe inflammation.’ In other words, the spike protein is deadly even absent the virus. Here’s how **Dr. Byram Bridle** (who is a viral immunologist and associate professor at University of Guelph, Ontario) summed it up:

“We made a big mistake. We didn’t realize it until now... We thought the spike protein was a great target antigen, we never knew **the spike protein itself was a toxin and was a pathogenic protein. So, by vaccinating people we are inadvertently inoculating them with a toxin.**” ([“Vaccine scientist: ‘We’ve made a big mistake”](#), Conservative Woman)

Think about that for a minute. This is a very big deal, in fact, this is the critical piece of the puzzle that has been missing for the last 15 months. Just as the respiratory virus concealed the real killing-agent in Covid (the spike protein), so, too, has the relentless hype surrounding mass-vaccination concealed the glaring problem with the vaccines themselves, which is, they generate a substance that is “capable of causing disease.”

The vaccines are pathogenic ...

That is the **literal definition of pathogenic**. The spike protein is a disease-producing toxin that poses a serious and identifiable threat to the health of anyone who chooses to get vaccinated. Could it be any clearer? It's worth noting that Bridle is a vaccine researcher who was awarded a \$230,000 government grant last year for research on COVID vaccine development. He understands the science and chooses his words carefully. The term "pathogenic" is not meant to whip people into a frenzy, but to accurately describe how vaccine-generated proteins interact in the bloodstream. And the way they interact is by inflicting serious damage to cells in the lining of the blood vessels which can result in illness or death. Here's more from the same article:

"As many will know by now, the problem lies within a structure that enables the virus, originally from bats, not only to enter human cells but to deliver a toxin called the spike protein. Most **Covid vaccines instruct our body cells to produce the same protein**. This is in the hope that antibodies developed against it will prevent the most damaging effects of the actual virus. There is evidence that this is the case for some.

But there's also a problem, spelled out most recently by Canadian researcher Dr Byram Bridle, who was awarded a \$230,000 Ontario government grant last year for research on Covid vaccine development. This is that **the spike protein produced by the vaccine does not just act locally**, at the site of the jab (the shoulder muscle), **but gets into the bloodstream and is carried through the circulation to many other sites in the body**.

Previously confidential animal studies using radioactive tracing **show it to go just about everywhere, including the adrenal glands, heart, liver, kidneys, lungs, ovaries, pancreas, pituitary gland, prostate, salivary glands, intestines, spinal cord, spleen, stomach, testes, thymus, and uterus**.

The quantities are small and usually disappear within days. But the questions arise, is this mechanism involved in the thousands of deaths and injuries reported soon after Covid vaccination, and **might it set some people up for the same long-term consequences as in severe cases of the disease itself?**" (['We've made a big mistake'](#)", Conservative Woman)

This is the most important question: What will the long-term impact of these vaccines be on the population at large? Here's more from the same article:

"Some researchers say the **risk from the vaccine may be greater than that from the actual virus in healthy people**. This would be especially true for the young, whose immune systems deal with the virus successfully. In contrast, **the vaccine has a device that protects the spike protein mechanism against immediate destruction by the body, in order to promote the immune response.**" (Conservative Woman)

Repeat: "the vaccine has a device that protects the spike protein mechanism against immediate destruction by the body, in order to promote the immune response."

What does that mean? Does it mean that the spike protein created by the vaccine lingers on indefinitely risking a potential flare-up sometime in the future if another virus emerges or if the immune system is compromised? Will the people who have been vaccinated have the Sword of Damocles

hanging over their heads until the day they die?

Dr Judy Mikovits thinks so. “Mikovits thinks the **COVID-19 vaccine is a bioweapon designed to destroy your innate immunity and set you up for rapid onset of debilitating illness and premature death.** She too suspects many will die rather rapidly. “It’s not going to be ‘live and suffer forever,” she says. “It’s going to be suffer five years and die.” ([Mercola.com](https://www.mercola.com))

Is that possible? Could we see an unprecedented surge in fatalities in the next few years directly linked to these experimental vaccines?

***ER:** We believe this lady could be genuine. See what she says about ‘succession planning’ in the oil and gas industry for which she recruits workers. They do indeed expect there to be many fatalities in the industry over the next three years among those workers who took one of the ‘vaccines’.*

<https://www.facebook.com/100005396704134/videos/1616654321857776/>

Let’s hope not, but without any long-term safety data, there’s no way to know for sure. It’s all a big guessing game, which is one of the reasons that so many people are refusing to get vaccinated. Here’s more from Bridle:

‘I’m very much pro-vaccine, (said Dr Bridle) but ... the story I’m about to tell is a bit of a scary one. This is cutting edge science. There’s a couple of key pieces of scientific information that we’ve been privy to, in the past few days, that has made the final link, so we understand now – myself and some key international collaborators – we understand exactly why these problems [with the vaccine] are happening.’

One of these ‘is that **the spike protein, on its own, is almost entirely responsible for the damage to the cardiovascular system, if it gets into circulation.** Indeed, if you inject the purified spike protein into the blood of research animals, they get all kinds of damage to the **cardiovascular system**, and it can cross the blood-brain barrier and cause damage to the **brain**.

‘At first glance that doesn’t seem too concerning because we’re injecting these vaccines into the shoulder muscle. **The assumption, up until now,** has been that these vaccines behave like all of our traditional vaccines: **they don’t go anywhere other than the injection site,** so they stay in our shoulder. Some of the protein will go to the local draining lymph node in order to activate the immune system.

‘However – this is where the cutting edge science has come in, and this is where it gets scary – through a request for information from the Japanese regulatory agency, myself and several international collaborators have been able to get access to what’s called **the biodistribution study**. It’s the first time ever that scientists have been privy to seeing where the messenger RNA vaccines go after vaccination; in other words, **is it a safe assumption that it stays in the shoulder muscle? The short answer is, absolutely not. It’s very disconcerting. The spike protein gets into the blood and circulates over several days post-vaccination.**’ ([Vaccine scientist: ‘We’ve made a big mistake’](#)“, Conservative Woman)

They got the biodistribution study from the Japanese? Are you kidding me? You mean, the FDA waved these experimental “new technology” vaccines into service before they had the slightest inkling of where the substance in the vaccine would end up in the body. **If that isn’t criminal negligence, then what is?** Do you want proof that our regulators are controlled by the industries they are supposed to monitor? Here it is!

Here’s more from an article at Children’s Health Defense on the same topic:

“... in key studies — called biodistribution studies, which are designed to test where an injected compound travels in the body, and which tissues or organs it accumulates in — **Pfizer did not use the commercial vaccine (BNT162b2) but instead relied on a “surrogate” mRNA that produced the luciferase protein....**

Regulatory documents also show Pfizer did not follow industry-standard quality management practices during preclinical toxicology studies of its vaccine, as key studies did not meet good laboratory practice (GLP)....

“The implications of these findings are that Pfizer was trying to **accelerate the vaccine development timeline** based on the pressures of the pandemic,” said TrialSite founder and CEO Daniel O’Connor. “The challenge is that the processes, such as **Good Laboratory Practices, are of paramount importance for quality and ultimately for patient safety**. If such important steps are skipped, the risk-benefit analysis would need to be compelling.”....([“Pfizer Skipped Critical Testing and Cut Corners on Quality Standards, Documents Reveal”](#)“, Children’s Health Defense)

Let’s see if I got this right: The Covid vaccine was approved even though “Pfizer did not follow industry-standard quality management practices” and even though “key studies did not meet good laboratory practice?”

Do you still think these vaccines are safe? And, it gets worse, too. Check it out:

“... documents obtained by scientists through the Freedom of Information Act (FOIA)

revealed **pre-clinical studies showing the active part of the vaccine (mRNA-lipid nanoparticles) — which produce the spike protein — did not stay at the injection site and surrounding lymphoid tissue as scientists originally theorized, but spread widely throughout the body and accumulated in various organs, including the ovaries and spleen.**” ([“Pfizer Skipped Critical Testing and Cut Corners on Quality Standards, Documents Reveal”](#), Children’s Health Defense)

Like we said earlier, the vaccine was supposed to be “localized”, that is, remain in the area where it was injected. But that theory proved to be wrong, just like the theory that the spike protein would be a good antigen was wrong. There are literally thousands of fatalities and other injuries that attest to the “wrongness” of that theory, and there will be many more before this campaign is terminated. Here’s more:

“Research suggests this could lead to **the production of spike protein in unintended places, including the brain, ovaries and spleen, which may cause the immune system to attack organs and tissues resulting in damage, and raises serious questions about genotoxicity and reproductive toxicity risks associated with the vaccine.**” ([“Pfizer Skipped Critical Testing and Cut Corners on Quality Standards, Documents Reveal”](#), Children’s Health Defense)

So, it goes everywhere. Wherever blood flows, there too goes the spike proteins. Do young women really want these lethal proteins in their ovaries? Do you think that will improve their prospects for getting pregnant or safely delivering their babies? This is madness on a scale that is, frankly, unimaginable. Here’s more:

“Studies indicate that the protein is able to gain access to cells in the testicles, and may disrupt male reproduction.....

Furthermore, the genetic code the virus carries contains inserts that make it ‘extremely plausible’ that **the protein could misfold into a prion** (such as held responsible for mad cow disease in the 1980s), **causing widespread damage to brain cells and increasing the risk of conditions including Alzheimer’s and Parkinson’s disease....**” ([“Covid vaccines: Concerns that make more research essential”](#), The Conservative Woman)

We hope that readers are beginning to understand how risky these vaccines really are. It’s literally a matter of life and death.

As Bridle opines:

““We have known for a long time that **the spike protein is pathogenic.... It is a toxin.** It can cause damage in our body if it’s in circulation. Now, we have clear-cut evidence that . . . the vaccine itself, plus the protein, gets into blood circulation.”

Once that happens, the spike protein can combine with receptors on blood platelets and with cells that line our blood vessels. **This is why, paradoxically, it can cause both blood clotting and bleeding.** And of course the heart is involved, as part of the cardiovascular

system,' Bridle said. **'That's why we're seeing heart problems. The protein can also cross the blood-brain barrier and cause neurological damage....**

'In short,... we made a big mistake. We didn't realize it until now. We didn't realize that by vaccinating people **we are inadvertently inoculating them with a toxin.**' (Conservative Woman)

"Mistake?" He calls it a "mistake"? That's got to be the understatement of the century!

Let's cut to the chase:

These aren't vaccines; they're a spike-protein delivery-system.

Regrettably, 140 million Americans have already been injected with them, which means we can expect a dramatic uptick in debilitating medical conditions including blood clotting, bleeding, autoimmune disease, thrombosis in the brain, stroke and heart attack. The vast human wreckage we are now facing is incalculable.

Has there ever been a greater threat to humanity than the Covid vaccine?

by Michael Whitney

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