

A Virus Can't Kill You, Here's Why

In this paper, I touch briefly on the history of viruses and viral infections. I shed light on misconceptions of language, regarding coronavirus and COVID19.

Please do your own research as there's only so much I can show you. There is no conclusion at the end, regarding my opinion and I do not want anyone to blindly believe what I believe.

Investigate yourself, and come to your own conclusions.

Thank you

Are Viruses Alive?

Depending on who you ask the answer is a little different. For many years, scientists have debated whether or not a virus is alive, the majority would still answer no.

What you learn in school in basic biology, is essentially a checklist for whether something is considered to be alive or not. Firstly you learn **living things have cells and viruses do not have cells.**

A virus is a string of DNA or RNA usually surrounded in a protein layer, however, there are others with a fat layer. **They do not have a cell membrane or organelles, like ribosomes or mitochondria that cells have.**

Living things reproduce. Humans procreate through conception or the fertilization of the female egg by the male sperm. This is called sexual reproduction. Asexual reproduction is what bacteria, fungi, and some plants do. Asexual reproduction only requires one parent as no fertilization is needed. The offspring is genetically identical to the parent.

Unlike cells, viruses do not have the tools to make a copy of its DNA. Viruses insert its genetic material into host cells to make more copies of the viral DNA. Without the host, they can not reproduce.

So this idea of viruses in the air multiplying, growing in numbers waiting to get you when you go outside, is just propaganda and miss information that has been encouraged through fear and drama.

Living things use and produce energy, like we just found out, outside of the host cell, a virus has no energy source and is pretty much dormant.

And finally, living things react with the environment around them. Cells bind to other cells, small organisms can evolve over time and have interactions with cells. **Viruses don't do anything on their own.**

"They don't breathe. They don't eat. They don't make energy. They appear mindless, floating around with the possibility of landing on a cell...."

..."I don't consider them to be living. But hey, maybe you want to consider them to be alive..."

Ryan Relich, a medical microbiologist at Indiana University's School of Medicine.

Viruses Do Good

I often find people assume viruses are these little things, like bugs, that climb all over you, invade you, and take over. Essentially creating the image they are smothering you, and that's how you die from these things. It creates a claustrophobic image and idea around the whole thing and the truth couldn't be more different.

Even here on this website for children, it is stated like this:

"Some kids may think that germs are bugs or other gross stuff. But germs are tiny organisms, or living things, that can cause disease. Germs are so small and sneaky that they creep into our bodies without being noticed. In fact, germs are so tiny that you need to use a microscope to see them. When they get in our bodies, we don't know what hit us until we have symptoms that say we've been attacked!"

www.kidshealth.org/en/kids/germs.html

To a child, especially one that may take this incredibly literally, this would be really scary to hear.

You're not in a state of viruses in the body and viruses out of the body. You have viruses in you all the time. Same with fungi. Same with bacteria.

“If all viruses suddenly disappeared, the world would be a wonderful place for about a day and a half, and then we’d all die – that’s the bottom line,”

“All the essential things they do in the world far outweigh the bad things.”

Tony Goldberg, an epidemiologist at the University of Wisconsin-Madison.

Most viruses play vital roles in ecosystems and others help to keep the individual organism in good shape. This is anything from fungi, plants, bugs and insects, even humans.

The Key Component is Phages

Autophagy - from ancient greek autophagos, meaning self-devouring.

It is a natural degradation of cells that removes unused or dysfunctional parts of a mechanism, like a living being.

Phages are a type of bacteria that regulates bacterial colonies in the ocean for example. If there were no viruses in these bacterial colonies, there would be chaos. More than 90% of all living material in the ocean is microbial. Those microbes are nearly 50% of the oxygen on the planet. Without viruses, this wouldn't happen. Viruses are vital in the cycle of life.

Gb virus c is a common, blood-borne human virus. It is linked to a delayed progression of AIDS, in HIV-positive people (please take lots of notes on how that sentence is structured, as I will come back to the AIDS discussion later).

It also seems gb virus c, makes people with ebola less likely to die.

Herpes for example has been found to make mice less susceptible to certain bacterial infections. Although many believe herpes is only pathogenic, meaning only damages and is of no service to the host, certain data suggests that herpes enters a symbiotic relationship after time.

“Quite a number of lives have been saved by using viruses when antibiotics have failed,”

Curtis Suttle, an environmental virologist at the University of British Columbia.

What is Coronavirus?

Coronavirus is a large family of viruses, the most familiar to us being the common cold.

From Wikipedia:

(I fully understand, by the way, Wikipedia is not always a reliable source. However, I find it the easiest way to find and share information about a topic or subject I'm discussing, as it's a website many can access).

The name "coronavirus" is derived from Latin corona, meaning "crown" or "wreath", itself a borrowing from Greek κορώνη *korónē*, "garland, wreath". The name was coined by June Almeida and David Tyrrell who first observed and studied human coronaviruses. The word was first used in print in 1968 by an informal group of virologists in the journal Nature to designate the new family of viruses.

What Are Germs?

This is the most important part of this paper. Please focus on this next section very carefully. For you to understand so-called *germs*, you need to understand germ theory. Yes, that's right, theory.

According to the online version of Encyclopedia Britannica:

Germ theory, in medicine, is the theory that certain diseases are caused by the invasion of the body by microorganisms, organisms too small to be seen except through a microscope.

According to Wikipedia:

The germ theory of disease is the currently accepted scientific theory for many diseases. It states that microorganisms known as pathogens or "germs" can lead to disease.

You have to look at the language here.

“Theory” and “currently accepted”, you must understand, mean accepted but unproven. Even further down the page, they state,

“Although the germ theory has long been considered proved...”

“Considered proved”, does not mean proven. It means, in other words, “what we are currently operating with.”

Why? It makes them a lot of money and a lot of people are scared.

Germ Theory

What you have to understand is there was a trio of scientists. The French chemist and microbiologist Louis Pasteur, the English surgeon Joseph Lister, and the German physician Robert Koch. These three men are given the credit for germ theory.

However, there were others. A scientist called Antoine Béchamp, now renowned for his breakthroughs in chemistry, was a rival of Pasteur. Both with completely opposing arguments, Béchamp claimed that Pasteur was completely wrong.

You may feel the name Pasteur sounds familiar. Well pasteurization or then, pasteurization, comes from him. He invented the process. He also invented the anthrax vaccine, the rabies vaccine, and the cholera vaccine.

“Louis Pasteur is traditionally considered as the progenitor of modern immunology because of his studies in the late nineteenth century that popularized the germ theory of disease, and that introduced the hope that all infectious diseases could be prevented by prophylactic vaccination, as well as also treated by therapeutic vaccination if applied soon enough after infection.”

“A careful reading of Pasteur's presentations to the Academy of Sciences reveals that Pasteur was entirely mistaken as to how immunity occurs...”

REPORT: Louis Pasteur, the father of immunology?

Louis Pasteur created the Institut Pasteur in Paris. This group was the first to isolate HIV that caused AIDS (look clearly at that sentence structure), in 1983.

Pasteur died in 1895. His net worth was \$3 million. Today, as of 2021, this would be around \$98 million dollars.

I wanted this to be a quick paper on the misconceptions of viral infections. I do really recommend you look more into the misconceptions of germ theory. The best book I've read so far on the matter is Dave and Dawn Lesters book called, What Really Makes You Ill.

It's Not The Virus That Kills You, Here's Why.

The virus isn't what kills you, your weakened immunity is what kills you.

“Dying from the flu is not like dying from a bullet or a black widow spider bite,”

“The presence of the virus itself isn't going to be what kills you”.

Amesh Adalja, an infectious disease physician at the Johns Hopkins University Center for Health Security.

With a stronger immune system, a virus will never corrupt the body sufficiently enough to cause problems. And actually, the issue is there are not enough devices in the body to help the virus rid the body of toxins, which is what the virus is there for in the beginning.

How Can You Help Your Body Help a Virus?

There are many things that help you virally detoxify. One, I would like to talk a lot about vitamin c. Since humans lack one of the final enzymes in the biosynthesis of vitamin c, we need it from food. **Yet, because of poor nutrition, everybody is deficient in vitamin c. Even orange juice is supplemented to some degree, as it's made so long before you drink it and is often pasteurized.**

Vitamin c is an antioxidant that is water-soluble. It is temperature sensitive and is very easily degraded during cooking.

But I eat an orange a day and I eat my spinach? As soon as it's picked it starts to lose vitamin c. by the time it gets to you, it's pretty much useless. Unless you eat plenty of raw, freshly grown, and picked fruits and vegetables, I recommend supplementing with l-ascorbic acid (vitamin c).

It's also vital for bacterial, fungal, and viral infections.

“...The most extensively studied human infection is the common cold. Vitamin C administration does not decrease the average incidence of colds in the general population, yet it halves the number of colds in physically active people.”

“Regularly administered vitamin C has shortened the duration of colds, indicating a biological effect.”

“Two controlled trials found a treatment benefit of vitamin C for pneumonia patients. One controlled trial reported treatment benefits for tetanus patients. The effects of vitamin C against infections should be investigated further.”

Vitamin c is an electron donor. This means it can donate two electrons to other compounds in order to prevent its oxidation, hence the phrase good for oxidative stress.

Here is a vitamin c success story. I have taken the important parts from a very long article, however, the web link is below if you wanted to read the whole thing:

- **A 74-year-old lady** arrives at an emergency room in Michigan after having a fever and dry cough for two days.
- She is **taken to the isolation unit** and after taking blood, she is **given a broad spectrum of antibiotics**.
- The next day, the patient **develops mild diarrhea and fatigue**.
- **By day 4 her oxygen requirements have increased up to 10L high flow nasal cannula.**
- She **tests positive for SARS-CoV-2**.
- Along with some other things, **she's given oral vitamin c at 1g twice a day.**
- **On day six she's given norepinephrine for septic shock.**
- **On day seven she's given a high dose of intravenous vitamin c. The amount was 11g in 24 hours.**
- 2 days later, **after signs of improvement, they discontinue norepinephrine.**
- On day 10 **a chest x-ray shows pneumonia and interstitial edema have improved drastically.**
- **In total, she has a vitamin c supplementation at a high dose for 10 days.**

Nobel peace prize winner Linus Pauling believed vitamin c was incredibly versatile and was vital in the manufacturing of collagen, the protein that gives shape to connective tissues and strength to blood vessels.

He believed one of the greatest misfortunes of human evolution was when humans lost the ability to make their own vitamin c. All non-human primates and a small number of other animals such as some fish and bird species, cannot produce vitamin c themselves so must get it through food. This wasn't always the case.

Pauling believed, since we moved out of our fruit and vegetable diets, we have developed large deficiencies in vitamin c. He believed our vitamin c consumption should be on par with those of what other animals produce, which is around 10-12 grams a day. Very close to 11grams isn't it?

Pauling gradually upped his vitamin c from 3 grams to 18 grams a day. He passed away in 1994, at the age of 93.

Vitamin D is also vital in dealing with infections, helping to make proteins that work with viruses and bacteria, especially in the respiratory tract.

“Multiple epidemiological studies in adults and children have demonstrated that vitamin D deficiency is associated with increased risk and greater severity of infection, particularly of the respiratory tract.”

“In a 2019 analysis of 25 randomized controlled trials involving more than 11,000 patients, vitamin D supplements significantly reduced respiratory infections in people deficient in the vitamin and lowered the risk in those with normal levels. Benefits were greatest when people took vitamin D daily or weekly, rather than in a single large dose, echoing the findings of other studies. Tod Cooperman, MD, president of the independent supplement testing company, Consumerlab.com, recommends **2,000 IU (50 mcg) of vitamin D a day, preferably in liquid form.** But Daniel Small, MD, a rheumatologist with the Mayo Health System in La Crosse, Wisconsin, says **many people with rheumatoid arthritis, lupus, and other autoimmune diseases may need to take much higher doses under a doctor's supervision.”**

You Must Look At the Language That Is Used

In whatever news article you read, you must ask yourself, are they referring to COVID or coronavirus. They are two different things, and I find the fact not everybody knows this very concerning.

Have you wondered why COVID is written in capital letters? It's an acronym. It stands for coronavirus disease. Not coronavirus. Coronavirus disease.

Coronavirus is a virus. Covid is a disease. People are not dying of coronavirus.

The media, through laziness, has over the past two years de-capitalized the word from COVID19 or Covid19, making it lose its true meaning. The viewer not realizing it's an acronym. The interchanging of coronavirus and COVID, has caused such confusion to the public. People believing the danger outside (coronavirus) and the disease it supposedly causes (COVID) are the same things.

“World Health Organisation guidelines state that “COVID-19 should be recorded on the medical certificate of cause of death for ALL decedents where the disease, or is assumed to have caused, or contributed to death, i.e. COVID-19 is the underlying cause of death”. Such an example would be someone who has developed pneumonia as a result of COVID-19, dies from acute respiratory distress. Alternatively, COVID-19 may be present on the death certificate as a significant condition contributing to death but not the underlying cause. These guidelines are clear that in such cases these deaths “ are not deaths due to COVID-19 and should not be certified as such”

www.cebm.net

By their narrative, barely any of which I agree with, especially when you incorporate germ theory and political corruption, you can catch coronavirus, but not COVID. And even that's debatable as there is no solid proof that viruses are contracted from others. That is only pushed by germ theory.

There are COVID symptoms, not coronavirus symptoms. Viruses don't have symptoms.

No One Has Died of HIV. Here's Why.

In the same way as COVID, the HIV and AIDS situation, that came to light in the '80s, has caused the same confusion.

HIV is the acronym for the human immunodeficiency virus. HIV is a lentivirus and it is one of the most efficient methods of gene delivery. I must add, lenti comes from the Latin word meaning movement or passage.

Immunodeficiency, or immunocompromisation, is where the body's ability to fight disease and cancer is compromised. According to Wikipedia:

"Most cases are acquired ("secondary") due to extrinsic factors that affect the patient's immune system."

Secondary here essentially means, due to toxicity exposure, poor diet and nutrition control, and other external factors like stress, emotional damage, etc.

If HIV is not sorted out it leads to AIDS. AIDS, stands for, acquired immunodeficiency syndrome. HIV is the virus, AIDS is the knock-on effect and the symptoms.

But Freddie Mercury died of AIDS?

Well no. He died of pneumonia, which was a consequence of his AIDS, that he developed after testing positive for HIV. On the next page, is a copy of Freddie Mercury's death certificate.

In the section cause of death, there is a label "1a".

"The disease or condition that led directly to death should be documented on the 1a line. You should then work your way back through the other diseases that led to the eventual cause of death until you reach the underlying cause of death which initiated this chain of events. The lowest completed line in part 1 should, therefore, contain the underlying cause of death."

Here you can see the cause of death was not AIDS (written in all capitals as it's an acronym remember), it was Bronchopneumonia, a consequence of AIDS (AIDS being the disease).

Registration District <u>Kensington and Chelsea</u> Administrative area	
Sub-district <u>Kensington and Chelsea</u> Royal Borough of Kensington and Chelsea	
1. Date and place of death <u>Twenty fourth November 1991</u> <u>Garden Lodge, 1, Logan Place, W.8.</u>	
2. Name and surname <u>FREDERICK MERCURY</u> <u>otherwise</u> <u>FREDERICK BULSARA</u>	3. Sex <u>Male</u>
4. Maiden surname of women who has married	
5. Date and place of birth <u>5th September 1946</u> <u>Zanzibar</u>	
6. Occupation and usual address <u>Musician</u> <u>Garden Lodge, 1, Logan Place, W.8.</u>	
7(a) Name and surname of informant <u>Peter Richard Leslie</u> <u>FREESTONE</u>	7(b) Qualification <u>Causing the body to be cremated</u>
(c) Usual address <u>Garden Lodge, 1, Logan Place, W.8.</u>	
8. Cause of death <u>1a. Bronchopneumonia</u> <u>+ AIDS</u> <u>Certified by F. G. Atkinson</u> <u>MBCh.B.</u>	
9. I certify that the particulars given by me above are true to the best of my knowledge and belief. <u>P. Freestone</u> Signature of Informant	
10. Date of registration <u>24th November 1991</u>	11. Signature of registrar <u>M. Wilson Registrar</u>

At no point is there a mention of HIV, the virus, as it wasn't what caused the death, and is therefore considered, non-significant.

COVID19 Death Reports

Here are two examples of what a death report looks like when COVID19 (note the capitals again), is the underlying cause of death.

The immediate cause is on the top. Never is COVID19 on any report, the immediate cause of death.

Scenario I

CAUSE OF DEATH (See instructions and examples) 32. PART I. Enter the <u>chain of events</u> —diseases, injuries, or complications—that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary. IMMEDIATE CAUSE (Final disease or condition -----> resulting in death) a. <u>Acute respiratory acidosis</u> Due to (or as a consequence of): b. <u>COVID-19</u> Due to (or as a consequence of): c. _____ Due to (or as a consequence of): d. _____ Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST		Approximate interval: Onset to death <u>3 days</u> <u>1 week</u> _____ _____
PART II. Enter other <u>significant conditions contributing to death</u> but not resulting in the underlying cause given in PART I <u>Chronic obstructive pulmonary disease, hypertension</u>		33. WAS AN AUTOPSY PERFORMED? ☐ Yes ☒ No 34. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☐ Yes ☐ No
35. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☒ No ☐ Unknown	36. IF FEMALE: ☐ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 42 days of death ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Unknown if pregnant within the past year	37. MANNER OF DEATH ☒ Natural ☐ Homicide ☐ Accident ☐ Pending Investigation ☐ Suicide ☐ Could not be determined

Scenario II

CAUSE OF DEATH (See instructions and examples) 32. PART I. Enter the <u>chain of events</u> —diseases, injuries, or complications—that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary. IMMEDIATE CAUSE (Final disease or condition -----> resulting in death) a. <u>Acute respiratory distress syndrome</u> Due to (or as a consequence of): b. <u>Pneumonia</u> Due to (or as a consequence of): c. <u>COVID-19</u> Due to (or as a consequence of): d. _____ Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST		Approximate interval: Onset to death <u>2 days</u> <u>10 days</u> <u>10 days</u> _____ _____
PART II. Enter other <u>significant conditions contributing to death</u> but not resulting in the underlying cause given in PART I _____		33. WAS AN AUTOPSY PERFORMED? ☐ Yes ☒ No 34. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☐ Yes ☐ No
35. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☒ No ☐ Unknown	36. IF FEMALE: ☒ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 42 days of death ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Unknown if pregnant within the past year	37. MANNER OF DEATH ☒ Natural ☐ Homicide ☐ Accident ☐ Pending Investigation ☐ Suicide ☐ Could not be determined

So what does it mean to test positively for COVID19? This is where the language is wrong. Remember COVID19 is the disease, coronavirus is the virus.

Before I explain this point, I need to explain the current testing procedures.
Coronavirus Tests (NOT COVID19 TESTS)

There are 3 main test types. A PCR, Lateral Flow Test (LFT), antibody test for Covid19 (spot the lower case Covid here).

The PCR test looks for the presence of viral RNA. so just to be clear it's looking for coronavirus which is the virus, not the disease.

“False negatives can occur up to 30% of the time with different PCR tests”.

An LFT is similar in the sense that they both are antigen tests and are used to find the presence of a “viral infection”, essentially the presence of a single virus.

LFT sensitivity in symptomatic people ranged from 34% to 88%, with an average accuracy of 72%. In people, without symptoms, the LFTs correctly identified an average of 58% of those who were infected.

Just to be clear, in those who were tested without symptoms, the test was only 58% accurate. In those with symptoms, that only rose to an average of 72%.

Remember this isn't testing for the disease, just the virus itself, which we now know isn't even listed on the death report/ certificate.

An antibody test is exactly how it sounds. It shows who has generated antibodies to a coronavirus. It's used to try and tell who has had coronavirus in their system. Yet we also know that with the other tests, looking for just the virus can be wrong anywhere from 30% of the time to 42%. That's anywhere from 3 in 10 to 4 in 10 people, being misdiagnosed and having false positives.

No test is 100% reliable, even those who meet regulatory standards for performance and safety. The results are also only relevant to that sample at that point in time.

A quote from a page on the UK Government website.

So how do we test reliability? If something can be repeated and repeated and the results are upwards of 90% consistent, the test is considered to have excellent reliability. 80-89% is good. 70-79% is considered adequate. Anything below 70% has limited capability.

So How Do You Determine Whether Someone Has COVID19?

There is no test for COVID19.

To test "positive", you have to test positive for coronavirus, with or without symptoms.

In order to write COVID19 on a death report/certificate, just one thing needs to happen. **Test positive for coronavirus, using as we just went over, a very unreliable test.**

The CDC guidance states: "If COVID–19 played a role in the death, this condition should be specified on the death certificate. In many cases, it is likely that it will be the UCOD [underlying cause of death], as it can lead to various life-threatening conditions, such as pneumonia and acute respiratory distress syndrome (ARDS). In these cases, **COVID–19 should be reported on the lowest line used in Part I with the other conditions to which it gave rise listed on the lines above it.**"

The CDC guidance states: "When COVID-19 is reported as a cause of death on the death certificate, it is coded and counted as a death due to COVID-19."

So if someone dies of a heart attack or a few days after a car accident, but they test positive for coronavirus, it's considered a COVID death!

According to the COVID19 pandemic Wikipedia page:

Official deaths from COVID-19 generally refer to people who **died after testing positive** according to protocols. These counts may ignore the deaths of people who die without having been tested.

Remember you can't test positive for COVID, it's NOT the virus!

Coronavirus is! It's in the name.

Regardless of whether they died while experiencing symptoms, COVID19 will be placed as the underlying cause, on the certificates.

At no point will coronavirus, the same with HIV, ever appear on the death reports/ certificates as it's not considered something that will contribute to the death.

Please always look at the language they use. Often, they alter COVID to Covid or even covid. This causes great confusion, taking something from an acronym to what appears as a noun.

An acronym is formed from the initial letters or letters from each successive major part of a compound term. FBI is formed by initial letters, this is called initialism.

COVID is not something you can hold, or see. It's not really in the way they are presenting. It's not a thing. It's a name we have acquired, to label a list of symptoms in a given context.

Please understand this. It's very important to distinguish this.

Who Invented Vaccines

Edward Jenner was a British physician and scientist who created the first vaccine, the smallpox vaccine. The word vaccine comes from the Latin word for cow, due to this, as smallpox is closely related to cowpox.

Known as the Father of vaccinology, Jenner was also the great, great, great, great grandfather of Caitlyn Jenner.

Edward Jenner died on the 26th of January 1823. His net worth at this time is estimated at \$1.2 million. In today's money, this would be around \$31.3 million.

“I hope that someday the practice of producing cowpox in human beings will spread over the world - when that day comes, there will be no more smallpox”.

Edward Jenner

Should You Get The Vaccine?

When you receive a vaccine, you receive a dead or weakened pathogen that your body builds antibodies to. So if you want coronavirus, get the vaccine.

However, coronavirus isn't really the problem here. **Other substances in the vaccine will be causing ill health, not the virus, and I will go into some of these, in the section after this.**

The best way to create immunity within the body is to support it nutritionally.

Here are some examples of how to do this:

Maintain a Healthy Diet

Eat a diet full of all the different vitamins and minerals, and supplement where needed. Research on individual supplements you feel you need. Everyone is different, there is no one pill that suits all.

The use of vitamin D and C are crucial but also consider foods high in all other antioxidants.

Eat raw where possible, to get the full level of nutrition.

Exercise Regularly

Exercise raises body temperature, aiding in lymphatic drainage. It also slows down the release of stress hormones, some of which increase the chances of illness and symptoms.

Plenty of Sleep

Good sleep can bolster t cells in your body that fight off infection.

Hydration

Water helps carry oxygen to the cells as well as removing toxins from the body.

Reduce stress

When stressed the body's ability to fight off antigens is reduced.

Reduce EMF exposure

EMF is an area of electric and magnetic forces caused by electromagnetic radiation. These are given off from power lines, electrical appliances, especially microwaves, and wireless and cellular telephones.

“EMFs disturb immune function through stimulation of various allergic and inflammatory responses, as well as effects on tissue repair processes. Such disturbances increase the risks for various diseases, including cancer.”

Please do not sleep next to your phone. If possible, turn the wifi off in the house when you sleep. EMF stops you from getting good rest also.

Expose yourself to bacteria, fungi, and viruses.

In order to create the antibodies, you need to expose yourself to the so-called “danger”, and please understand I use that word very loosely. Bacteria, fungi, and even viruses are your allies, not the enemy. You have more bacteria in and around your bodies than you do cells.

The average male, just for reference, has around 30 trillion human cells and 39 trillion bacteria. There are just approximate numbers please understand, don't take this too literally.

Please don't feel the need to sterilize yourself. Your body is fully capable of dealing with anything when you support it and often bacteria and fungus etc, are all part of these processes that keep us alive. This is everything from food decomposition and digestion to keeping pathogenic organisms from growing on the skin.

Let your body, and microorganisms, work for you.

How Dangerous are Vaccines?

There have been plenty of studies done over many years showing the dangerous effects of vaccines.

Even with this information, vaccines are still widely consumed, with Pfizer alone being predicted to make \$33 billion in 2021 alone.

Because of everyone's germ theory view of the world, we put the dangers down to bacteria, fungi, and viruses. This isn't the case and there's far more to be concerned about.

Below I refer to studies, showing the dangers of ingredients used in current vaccines.

2% Phenoxyethanol

The only studies I could find referred to air-born phenoxyethanol, however, I decided to include them anyway due to the information in them.

Based on the investigation...the solution used for peritoneal lavage **(0.1% octenidine dihydrochloride and 2% phenoxyethanol) played a role in the tissue toxicity that caused chemical serositis with effusion.**

Symptoms of serositis include shortness of breath, low-grade fever, cough, heart palpitations, fatigue, and swellings in your legs or abdomen.

Effusion in medical terms means a collection of fluids in hollow spaces or between tissues.

MSG (monosodium glutamate)

We conducted a double-blinded, placebo-controlled, crossover study to investigate the occurrence of adverse effects such as headache as well as pain and mechanical sensitivity in pericranial muscles after oral administration of monosodium glutamate (MSG). In three sessions, 14 healthy men drank sugar-free soda that contained either MSG (75 or 150 mg/kg) or NaCl (24 mg/kg, placebo). Plasma glutamate level, pain, pressure pain thresholds, and tolerance levels, blood pressure (BP), heart rate and reported adverse effects were assessed for 2 h. No muscle pain or robust changes in mechanical sensitivity were detected, but **there was a significant increase in reports of headache and subjectively reported pericranial muscle tenderness after MSG. Systolic BP was elevated in the high MSG session compared with low MSG and**

placebo. These findings add new information to the concept of MSG headache and craniofacial pain sensitivity.

STUDY: Effect of systemic monosodium glutamate (MSG) on headache and pericranial muscle sensitivity.

Aluminum

Aluminum is used in vaccines as an adjuvant for over 70 years, as it supposedly boosts immune response. However aluminum in substantial quantities is dangerous and if not expelled from the body, it is a great concern. As mentioned in the study below, aluminum expulsion from the brain is a slow process. Al refers to aluminum.

Intake of Al is by inhalation of aerosols or particles, ingestion of food, water, and medicaments, skin contact, vaccination, dialysis, and infusions.

Toxic actions of Al induce oxidative stress, immunologic alterations, genotoxicity, pro-inflammatory effect, peptide denaturation or transformation, enzymatic dysfunction, metabolic derangement, amyloidogenesis, membrane perturbation, iron dyshomeostasis, apoptosis, necrosis, and dysplasia.

The pathological conditions associated with Al toxicosis are desquamative interstitial pneumonia, pulmonary alveolar proteinosis, granulomas, granulomatosis and fibrosis, toxic myocarditis, thrombosis, and ischemic stroke, granulomatous enteritis, Crohn's disease, inflammatory bowel diseases, anemia, Alzheimer's disease, dementia, sclerosis, autism, macrophagic myofasciitis, osteomalacia, oligospermia and infertility, hepatorenal disease, breast cancer and cyst, pancreatitis, pancreatic necrosis, and diabetes mellitus.

STUDY: Aluminium toxicosis: a review of toxic actions and effects

Aluminum, as a known neurotoxicant, contributes to cognitive dysfunction and may contribute to Alzheimer's disease.

The important reason is that aluminum can enter and be deposited in the brain. There have been three routes by which aluminum could enter the brain from systemic circulation or the site of absorption.

Aluminum fluxes into the brain across the blood-brain barrier (BBB), the choroid plexuses, and the nasal cavity. Some factors, such as the increasing of the blood-brain barrier permeability, citric acid and parathyroid hormone (PTH), and vitamin D, can promote aluminum to enter the brain.

But the redistribution of aluminum out of the brain is slow, so aluminum can be deposited in the brain for a long time.

STUDY: Entry and Deposit of Aluminum in the Brain

Thimerosal In Vaccines

STUDY: Low-dose Thimerosal in pediatric vaccines: Adverse effects in perspective

Vaccines are prophylactics used as the first line of intervention to prevent, control and eradicate infectious diseases. **Young children (before the age of six months) are the demographic group most exposed to recommended/mandatory vaccines preserved with Thimerosal and its metabolite ethylmercury (EtHg).**

Particularly in the less-developed countries, newborns, neonates, and young children are exposed to EtHg because it is still in several of their pediatric vaccines, and mothers are often immunized with Thimerosal-containing vaccines (TCVs) during pregnancy.

While the immunogenic component of the product has undergone more rigorous testing, Thimerosal, known to have neurotoxic effects even at low doses, has not been scrutinized for the limit of tolerance alone or in combination with adjuvant-AI during immaturity or

developmental periods (pregnant women, newborns, infants, and young children).

Scientific evidence has shown the potential hazards of Thimerosal in experiments that modeled vaccine-EtHg concentrations. Observational population studies have revealed uncertainties related to neurological effects. **However, consistently, they showed a link of EtHg with risk of certain neurodevelopmental disorders, such as tic disorder, while clearly revealing the benefits of removing Thimerosal from children's vaccines (associated with immunological reactions) in developed countries.**

So far, only rich countries have benefited from withdrawing the risk of exposing young children to EtHg. **Regarding Thimerosal administered to the very young, we have sufficient studies that characterize a state of uncertainty: the collective evidence strongly suggests that Thimerosal exposure is associated with adverse neurodevelopmental outcomes.**

It is claimed that the continued use of Thimerosal in the less-developed countries is due to the cost to change to another preservative, such as 2-phenoxyethanol. However, the estimated cost increase per child in the first year of life is lower than the estimated lifetime cost of caring for a child with a neurodevelopmental disorder, such as tic disorder.

The evidence indicates that Thimerosal-free vaccine options should be made available in developing countries.

(Ethyl) Mercury In Vaccines, DOES Cross The Blood-Brain Barrier.

In nearly all vaccines, there is mercury in the form of ethylmercury. This is often named Thimerosal, like mentioned above, which contains ethylmercury. As the studies debated different things, I wanted to put them in different sections.

Methylmercury, methyl meaning it's derived from methane and is common in many organic compounds, is often **considered dangerous** also as it **causes damage to the central nervous system**.

A Lot of the symptoms of mercury poisoning are similar to that of cerebral palsy, and actually, **mercury is thought to be one of the causes of CP**.

Ethylmercury, although some consider it safer, is actually just as dangerous.

Ethyl means derived from ethane. Many say ethylmercury is safe like here for example on this website:

“The low levels of ethylmercury in vaccines are broken down by the body differently and clear out of the blood more quickly than methylmercury”.

Yet according to this scientific study, this is not the case. Their findings are as follows.

STUDY: Examining the evidence that ethylmercury crosses the blood-brain barrier

The results indicate that ethylmercury-containing compounds are actively transported across membranes by the L (leucine-preferring)-amino acid transport (LAT) system, the same as methylmercury-containing compounds.

Further, **22 studies from 1971 to 2019 show that exposure to ethylmercury-containing compounds (intravenously, intraperitoneally, topically, subcutaneously, intramuscularly, or intranasally administered) results in the accumulation of mercury in the brain.**

In total, these studies indicate that **ethylmercury-containing compounds and Thimerosal readily cross the BBB, convert, for the most part, to highly toxic inorganic mercury-containing compounds, which significantly and persistently bind to tissues in the brain**, even in the absence of concurrent detectable blood mercury levels.

Other Than Cerebral Palsy, What Has Also Been Linked to Mercury Poisoning?

The most common link with mercury you may have heard is Autism or Autism Spectrum Disorder (ASD).

The study here elaborates on this.

STUDY: The relationship between mercury and autism: A comprehensive review and discussion

In a recent review, **the top ten environmental compounds suspected of causing autism and learning disabilities were listed and they included: lead, methyl-mercury, polychlorinated biphenyls, organophosphate pesticides, organochlorine pesticides, endocrine disruptors, automotive exhaust, polycyclic aromatic hydrocarbons, polybrominated diphenyl ethers, and perfluorinated compounds.**

This current review, however, will focus specifically on mercury exposure and ASD by conducting a comprehensive literature search of original studies in humans that examine the potential relationship between mercury and ASD, categorizing, summarizing, and discussing the published research that addresses this topic.

This review found 91 studies that examine the potential relationship between mercury and ASD from 1999 to February 2016.

Of these studies, **the vast majority (74%) suggest that mercury is a risk factor for ASD**, revealing both direct and indirect effects.

The preponderance of the evidence indicates that mercury exposure is causal and/or contributory in ASD.

Just to sum things up. There is large amounts of misinformation going around the internet, the media and news, etc.

The best thing to do is educate yourself, not to wait and be spoon-fed the information from someone else.

Learn about things, debate them with yourself and others and come to your own conclusions.

Do be driven by the crowd, it doesn't get you anywhere.