

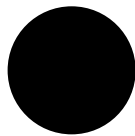
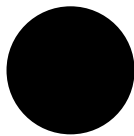
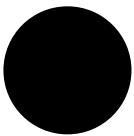
Covid / Jab O2 Detox

Many have accepted injections blind to the intended or actual short or long term effects.

Those harmed have no recourse because the Emergency Use Authorization from the FDA grants drug administrators a universal, complete and perpetual liability waiver for any substance labeled a vaccine.

The word vaccine on each label means no party can ever be held responsible for harm.

[Everything happening now is prohibited by the Nuremberg Code of 1947.](#)



Nuremberg Code 1947 - Medical Experiments

The great weight of the evidence before us to effect that certain types of medical experiments on human beings, when kept within reasonably well-defined bounds, conform to the ethics of the medical profession generally. The protagonists of the practice of human experimentation justify their views on the basis that such experiments yield results for the good of society that are unprocurable by other methods or means of study. All agree, however, that certain basic principles must be observed in order to satisfy moral, ethical and legal concepts:

1. The voluntary consent of the human subject is absolutely essential. This means that the person involved should have legal capacity to give consent; should be so situated as to be able to exercise free power of choice, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him to make an understanding and enlightened decision. This latter element requires that before the acceptance of an affirmative decision by the experimental subject there should be made known to him the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonably to be expected; and the effects upon his health or person which may possibly come from his participation in the experiment.

The duty and responsibility for ascertaining the quality of the consent rests upon each individual who initiates, directs, or engages in the experiment. It is a personal duty and responsibility which may not be delegated to another with impunity.

2. The experiment should be such as to yield fruitful results for the good of society, unprocurable by other methods or means of study, and not random and unnecessary in nature.

3. The experiment should be so designed and based on the results of animal experimentation and a knowledge of the natural history of the disease or other problem under study that the anticipated results justify the performance of the experiment.

4. The experiment should be so conducted as to avoid all unnecessary physical and mental suffering and injury.

5. No experiment should be conducted where there is an a priori reason to believe that death or disabling injury will occur; except, perhaps, in those experiments where the experimental physicians also serve as subjects.

6. The degree of risk to be taken should never exceed that determined by the humanitarian importance of the problem to be solved by the experiment.

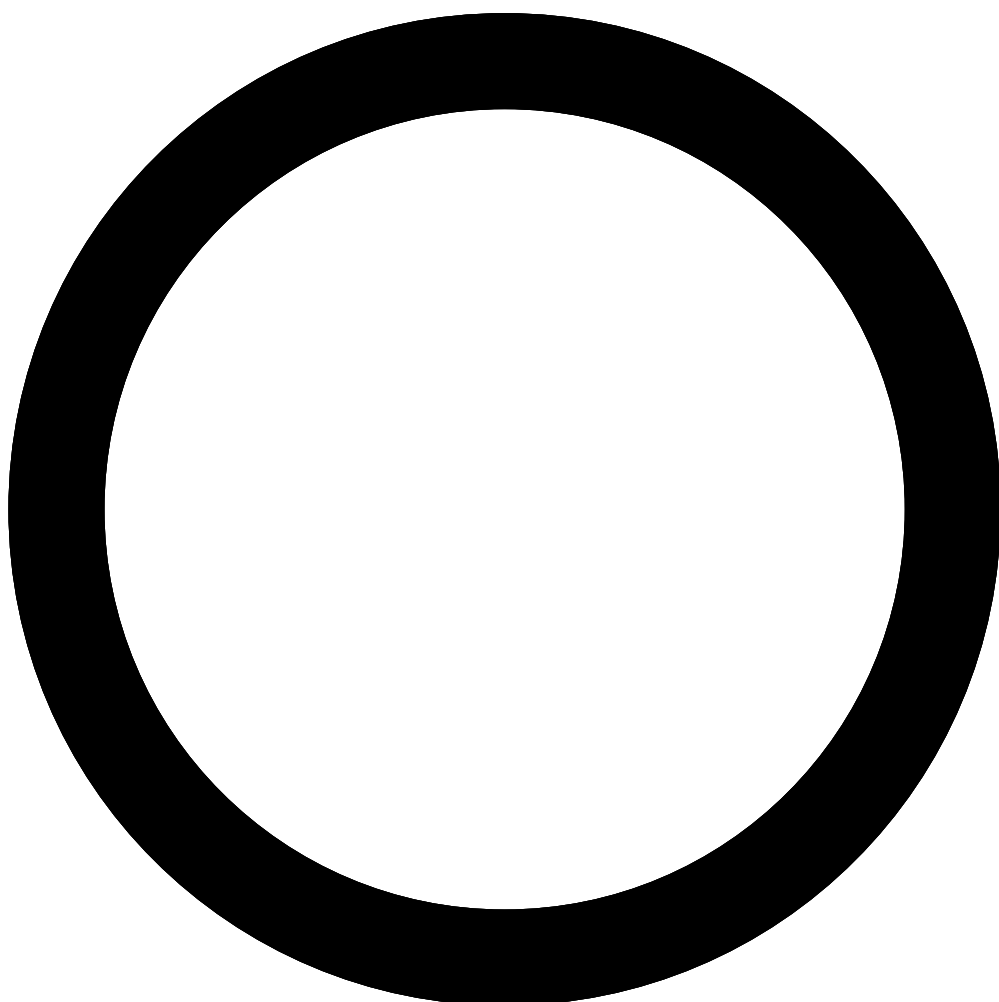
7. Proper preparations should be made and adequate facilities provided to protect the experimental subject against even remote possibilities of injury, disability or death.

8. The experiment should be conducted only by scientifically qualified persons. The highest degree of skill and care should be required through all stages of the experiment of those who conduct or engage in the experiment.

9. During the course of the experiment the human subject should be at liberty to bring the experiment to an end if he has reached the physical or mental state where continuation of the experiment seems to him to be impossible.

10. During the course of the experiment the scientist in charge must be prepared to terminate the experiment at any stage, if he has probable cause to believe, in the exercise of the good faith, superior skill and careful judgment required of him, that a continuation of the experiment is likely to result in injury, disability, or death to the experimental subject.

[Go To Forum For Discussion](#)



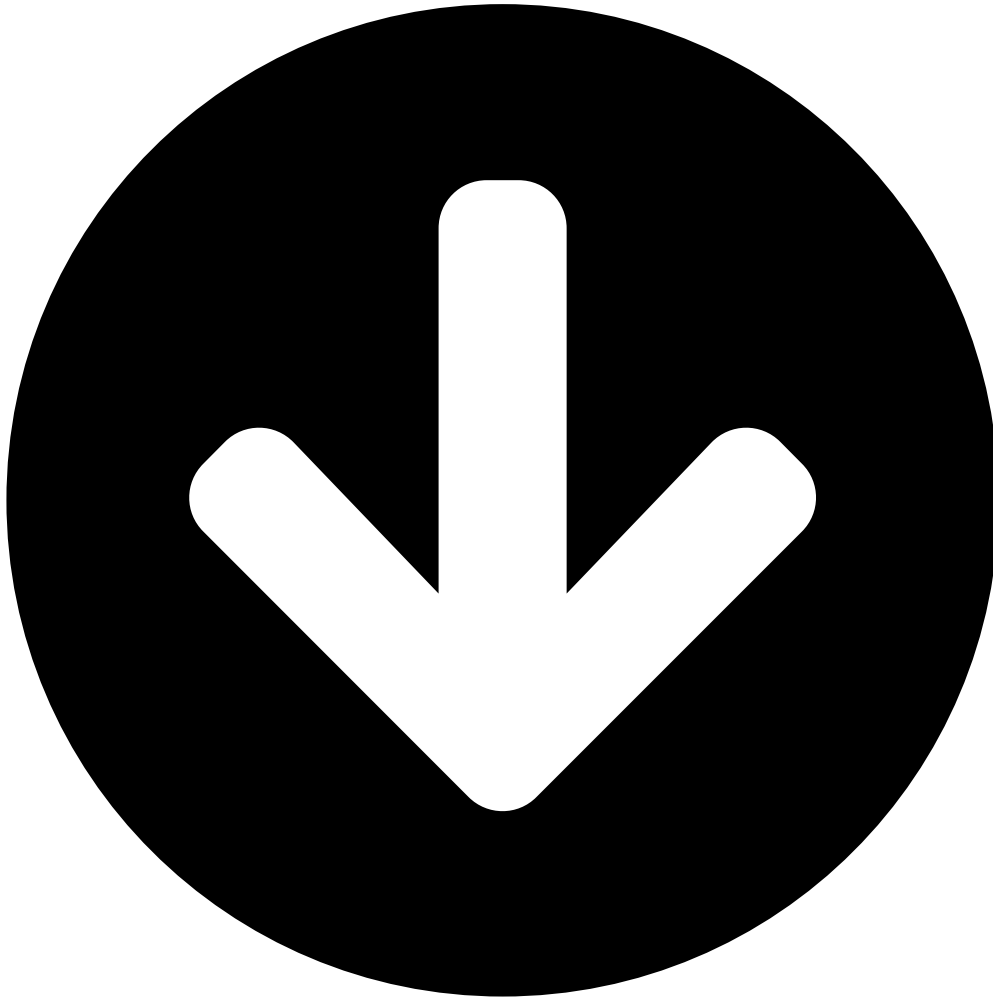


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Blood Survey Comparisons - 1 unvaccinated vs 3 vaccinated

This is a 4 person survey. Participant overview

- 59 YO M - Unvaccinated author. Feels great.
- 23YO F - Cardiomyopathy diagnosis after 2nd jab
- 60 YO M - No issues. Feels good - LiveO2 user
- 32 YO M - No issues. Feels great - LiveO2 user

Illness Models

There are five different illness models.

Assault	Contagion	Risk	Protocol	Mechanism	Symptoms
Synthetic Virus Injection	Injection	High	mRNA Mutation Scrub	Converts endothelial cells into spike protein factories. Spike proteins exit into blood, travel to lungs and are exhaled, thus affecting others. Other transmission routes possible.	Fever 1-3 days. Thrombosis, varied.
Spike Protein Poisoning	Airborne Skin Contact Body Fluids	Medium	Spike Protein Detox	Opens ACE2 receptor reducing resistance to infection. opportunistic infection. Spike protein seem to multiply because severity of symptoms. ,Those affected by spike poison Not contagious . ,	Headache, diarrhea, stomach ache, rash and lesions Not Contagious

Assault	Contagion	Risk	Protocol	Mechanism	Symptoms
Antibody Dependent Enhancement	N/A	High	Cytokine Storm Remediation	Occurs when excess antibodies, spike-protein, cause the immune system to respond to a pathogen challenge with a too-strong a-macrophage activity. Insufficient b-macrophage activity causes organs to be attacked without being rebuilt, eventually resulting in organ failure. A 2nd mode is over-targeted specific immunity enables non-spike pathogens to gain firm foothold before the humoral immune system activation resulting in over-developed non-covid infection to create acute immune challenge.	Organ failure Severe illness from non-covid infectdion Amplified non-spike infection from dysregulated immune system
Graphene Oxide Poisoning	Injection & Contaminated Foods	High	Graphene Oxide Remediation	Each 30 mg injection delivers an unknown amount of Graphene Oxide. Research to date shows that GO bio-accumulates and self assembles in nano-tubes which absorb environmental Electromagnetic Radiation causing blood injury.	Fatigue, failure to thrive, limited exertion & numerous other pathologies.
Respiratory Cold/Flu/COV Infection	Airborne	Low	Respiratory Recovery	Viral infection	Flu with changes/loss of taste and possibly smell.

Assault	Contagion	Risk	Protocol	Mechanism	Symptoms
Long Covid	Covid or Vaccine	Moderate	Long Covid Remediation	Monocytes/cytokines persist long beyond exposure resulting in spectral symptoms resulting from immune system dysregulation	Dyspnea, Headache, Brain Fog, Dizziness, hyper/hypotension, Exercise induced distress, Migraine, Tinnitus, tachycardia
Nanotech Attack	Vaccine or Aerosol	100%	Bluetooth Test Nanotech Hydra-Parasite Remediation	Engineered parasites consume blood and manufacture devices and graphene oxide unknown purpose. Parasites deployed since 1990s via aerosol, in injectable medications, and in food.	Accumulation of vascular caldari like sheaths described as soft actuators.

Spike Protein Prion Poison

mRNA gene altering therapy causes your body to manufacture a prion identified as Spike Protein Prions (SPPs). The gene therapy injection creates a synthetic virus which embeds in capillary cells to mutate DNA. The DNA mutation converts the endothelial, capillary, cells into spike protein factories that produce spike protein for the lifetime of the mutated cell, and its progeny.

Spike protein is an active toxin because it triggers cellular fusion. SPPs adverse affect cells upon engagement of the ACE2 receptor. SPPs unlock the ACE2 receptor like a key to a door and to prompt affected cells to fuse with environmental organisms, bacteria, etc.

The cellular fusion that occurs creates a multi-species infection because SPP affected cells fuse with the spectrum of fuse-capable organisms present at the time of SPP exposure.

In this model, the severity of the immune challenge depends on:

1. The amount of cells poisoned by SPPs

2. The concentration and pathogenicity of the fuse-capable organisms present at time of exposure;
3. The number of species of fuse-capable organisms at the time of exposure.

Spike protein infected people are diagnosed with "COVID" or COVID pneumonia because they exhibit symptoms of respiratory infection with highly variable severity due to the factors above.

Spectral infection tend to be more severe than than a mono-viral infections like the cold, flu or SARS. Mono-Viral infections challenge the immune system with a single virus. A spectral infection challenge the immune systems with multiple pathogens at the same time. Individuals with "spectral" infection will have more severe symptoms. ends to be more severe because the immune system must simultaneously overcome multiple pathogens.

By contrast the prion spike protein just unlocks cell and leaves it open. It would seem the morons who engineered the jab to compel recipients bodies to spew this prion never tested it [on any creature other than tadpoles](#) and humans where they discovered that the spike protein penetrates the [blood-brain barrier](#). The statement that spike protein interference with ACE2 receptors is safe is simply absurd - Ever heard the phrase "Monkey with a handgun?"

Spike proteins affect all cells with CD4 receptors:

- **oral and nasal mucosa, nasopharynx,**
- **lung as alveolar epithelial cells,**
- **stomach,**
- small intestine via enterocytes and colon,
- heart;
- **skin,**
- lymph nodes, thymus, bone marrow,
- spleen, liver, kidney,
- and brain.

The CDC web page says: [***Prion diseases are usually rapidly progressive and always fatal.***](#) The spike protein is a prion is a super small disease agent similar to those which cause cause [mad cow disease](#), [kuru](#), and other conditions. There is no data, or clinical research, showing that spike protein is safe in any way.

The JAB Sequence and SPP/SPA

A person who receives mRNA injection goes through the first stages of pathology.

1. Synthetic virus injection
2. 75% of the synthetic virus travels via lymph to the bloodstream
3. Synthetic virus circulates in the bloodstream until absorbed by capillary (endothelial cells) or eliminated by immune system
4. Synthetic virus penetrates endothelial cell
5. Synthetic virus releases mRNA packet to create Mutated Endothelial Cells, or MECs
6. MECs and their progeny produce spike protein for their lifetime;
7. Progeny of MECs produce spike protein;
8. SPP concentration remains proportional to the number of MECs;
9. The immune system creates Spike Protein Antibody (SPAs) to neutralize SPPs;
10. SPA concentration is regulated as necessary to neutralize toxic SPPs;
11. Excess SPA cause Virus Enhanced Disease or Immuno-Pathology in laboratory animals;
12. Challenge with a virus bearing Spike Protein Prion
 1. Triggers an SPA positive engagement from the immune system
 2. Because the system is already overloaded with SPPs;
 3. The immune system recognizes SPPs as an internal toxin (endogenous);
 4. Does not trigger, or disables phase-2 macrophage activity;
 5. Programmed absence of phase-2 macrophage enables phase-1 response proceed unchecked; to destroy organs;
 6. Unregulated cell destruction progresses until the organ is destroyed;
 7. An individual with destroyed lungs dies;
 8. The dominant feature this process is excess cytokines thus it is called a cytokine storm;
 9. Death.
13. thus enable to SPP and SPA production continues unregulated as long as mutated endothelial cells produce SPPs;
14. SPP/SPA concentration remains elevated and incidental to ;
15. Convert endothelial cells into spike protein factories;
16. Contamination of your body with graphene oxide turns you into a walking antenna with likely vulnerability to 5G;
17. Your body will shed spike protein and can make others sick;
18. The continuous supply of spike protein made by our own cells will cause your

body to have an unnatural number of spike protein antibodies. An unnatural abundance of these spike protein [antibodies may be cause an inappropriate overly aggressive immune response](#), or cause other problems because the effects of spike protein administration are unknown in scientific literature;

19. Emerging evidence suggests DARPA hydrogels may self assemble into RFID and other devices with bio-energetic interfaces to unknown effects.

Spike Protein Poisoning is real

Warning - Vaccinated people shed spike protein prions that make others sick. Spike proteins engage ACE2 receptors to open cells to fuse with environmental agents like unlocking a door and leaving it open.

A spike protein shedder that touches or breathes near others emits spike proteins. These particles are much smaller than a virus or bacterial and are very communicable.

Prions like spike proteins are very durable. Because their structure is simple and durable they are more resistant to disinfection from heat and oxidation agents. It takes more sunlight or disinfectant to break them down.

Unvaccinated people should distance from anyone who is vaccinated. In the last 2 weeks I know of 2 unvaccinated adults that were hospitalized with pneumonia after exposure to spike protein shedders. They were incorrectly diagnosed with "Bilateral Covid Pneumonia". Shedded proteins can kill a weak unvaccinated person.

At the time of this writing I know of 6 other individuals who reported respiratory and dermatological illness after exposure to vaccinated people. All have a long history of good health. Four were exposed in a clinical setting after being exposed to a couple who was vaccinated two days prior to arrival at the clinic.

Alternative Covid therapies have variable responses. One of the seriously affected is a practicing naturopath with a lifelong history of good health. Prior to hospitalization he underwent comprehensive early treatment which did NOT prevent worsening:

- 50g IV Vitamin C infusions
- Remdesivir IV (Anti viral)
- Oral antibiotics
- Ivermectin

- hydroxychloroquine
- High dose Ozone UBI
- Many other supplements

Spike-poisoning is not contagious. This person's spouse was in continuous attendance in the hospital. She experienced no symptoms and no sign of disease in spite of 24x7 contact with the affected under very stressful conditions. The hospital room was like a prison cell with a non-private toilet in the corner. The hospital had too few nurses on duty due to staff vaccine mandates.

Short Lesson - DO NOT GET SICK.

This protocol is designed to neutralize received a diagnosis Bilateral Covid Pneumonia. Since this person was poisoned with spike protein, and not infected by COVID-19. the diagnosis was erroneous:

1. The person is NOT contagious and did not require quarantine;
2. Treatment should emphasize neutralization of spike protein prion exposure;

The two others became quite ill after casual with a vaccinated couple. Two others were developed severe illness after mild social contact vaccinated people.

Virus infection versus Spike Protein Prion poisoning

Normal infections are transmitted when a self-replicating virus infects a cell. The infected cell is mutated by the virus to become a virus factory. Viral particles are then transmitted to others as transmission. This is how the cold and flu propagate.

Prion transmission is more like poisoning than infection. Vaccinated people are prion factories who poison those whom they contact. Jabs that inject mRNA genetic manipulation transforms the recipients body into a spike protein factory.

The spike protein prions enter the bloodstream from the capillary beds into venous blood which travels to the lungs. Vacuum of inhalation pulls the tiny proteins into the alveolar sacks, exhale pushes them out with exhaled air.

Anyone who inhales that air absorbs the prions and becomes affected by the spike protein prions, but does not pass them on. This means spiked people are generally not contagious.

Vaccine Transmission

Newly vaccinated people, less than about one week, may be able to pass synthetic virus particles by air or touch. The hypothetical mechanism is that as the inoculated vaccine passes through the lungs, it can be exhaled and passed to a recipient.

If the inhaled virus comes into contact vulnerable tissue, then the vaccine may mutate those cells to perpetually produce spike protein thus subjecting the recipient to a low-dose of vaccine.

The vaccine is similar to the virus in that it infects target cell and mutates the cell to produce spike protein. It seems unlikely this low dose exposure would produce a high concentration of spike protein. It also seems reasonable that a recipient would overcome the exposure via natural immunity.

That said, nobody really knows.

The Delta Variant is Spike Protein Prion Poisoning:

- Severe diarrhea
- Severe intestinal cramps
- Splitting headache
- Severe flu symptoms
- Lasts 4-10 days

The Mystery Detox Problem

Some ingredients in injections remain secret while the effects of others remain unknown. No real healer would ever administer unknowns like this to anyone. When this happens, where do you start?

Detoxification is a sequence:

1. Neutralize by oxidation and reduction - use lots of oxygen / CLO₂;

2. isolation by chelation or dilution - use natural detox agents / Glutathione / EDTA ;
3. flush by circulation - exercise and maximize lymph and blood flow;
4. filter by flow through kidneys or liver - exercise and blood flow with oxygen to power detox in liver and kidneys;
5. elimination by urine feces or perspiration - use charcoal to absorb toxins to prevent reabsorption;
6. maximize metabolism and energy production - oxygen and exercise;
7. minimize challenge to the system - support innate immune system during process.

The mystery detox is the only the first half of the problem. Remember - the injection altered the recipient's cells to be a perpetual source of spike protein.

Dr. Charles Haffe explains that 75% of the mRNA particles exit the injection site to deploy the vaccine to convert endothelial cells throughout the body into spike protein factories. He shows that about 60% of his patients test positive for the [D-Dimer test](#) indicating capillary occlusion is a valid mechanism of injury. The D-Dimer tests for recent clots.

His study presumes the clotting mechanism is triggered by the injection. This seems false because the clotting mechanism is triggered by the mutation in the endothelial cells, which is likely to progress well beyond his testing interval of one week.

The clotting mechanism is triggered by appearance of spike protein in the surface of the endothelial cells. Testing at 30 days is likely to show near 100% clotting. [Telegram Source Link](#).

Graphene Oxide Poisoning

Graphene oxide is a newly discovered ingredient in four mRNA formulas. It is a well known toxin/poison and is not considered safe for human or animal use. These articles discuss Graphene Oxide Toxicity:

- [Nanotoxicity of Graphene and Graphene Oxide](#)
- [Toxicity of Graphene Family Nanoparticles](#)

- [Graphene Toxicity study in Rats](#)
- [Graphene Magnetism \(defines vulnerability to EMF absorption\)](#)

This video shows nanotubes from a 23YO F diagnosed with cardiomyopathy who received 2nd injection 6 months prior.

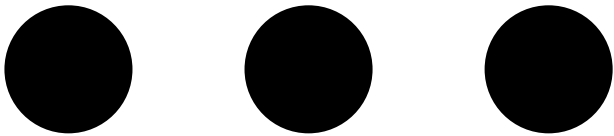
Lessons:

- 1) Graphene particles self-assemble into nano-tube structures;
- 2) GO artifacts persist 6+ months;
- 3) GO structures correlate to blood injury.

This is from 23 year old female diagnosed with cardiomyopathy.

I suspect, but cannot prove, these structures gather environmental Electromagnetic Radiation frequencies that correspond to the antenna's length. This energy transfers to nearby the blood causing damage.

This aligns with Dr Young's assertion GO contaminated blood exhibits identical to radiation damage.



Comprehensive Analysis of Vaccine Ingredients

This analysis of vaccine contents was performed by Robert O Young which is a reproduction of ingredients by researchers in Spain. [View Original Post here](#)

Chilling questions:

- Why would the drug companies work so hard conceal the the dominant presence of graphene oxide?
- Why more and more doses are needed?
- What is the relationship with 5G?
- Zombies & robots (video at right)?

References:

- <https://phys.org/news/2021-06-template-fast-synthesis-nanographenes.html>
- <https://phys.org/news/2018-02-fast-efficient-method-graphene-nanoribbon.htm>
- [Can Graphene Manufacture itself in the body?](#)

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Spike Protein Factory Problem

The injections are engineered to convert the affected cells into spike protein factories. The injection and fluid flow process in the body exposes two main groups of cells to genetic alteration. Two groups of cells are exposed to the bulk of the active injection ingredients.

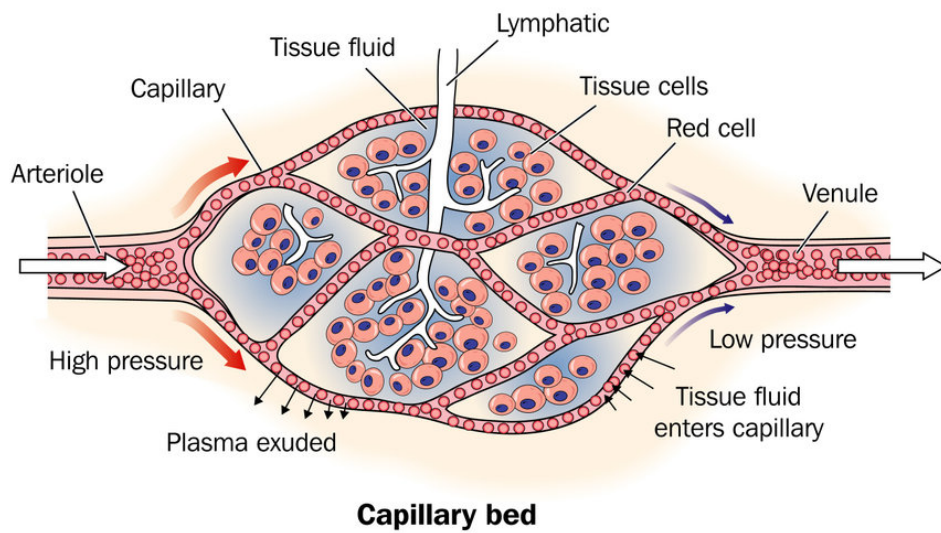
- The muscle cells near the injection site are exposed to the chemicals until the fluids are swept into the blood;
- The vascular [endothelium](#) - as inner lining of the pipes that carry blood.

When we look at the vascular system, its easy to see which cells are going to absorb the nano-particles. Blood squirts fast through and veins so nano-particles are unlikely to penetrate.

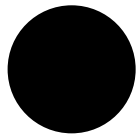
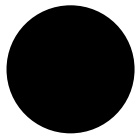
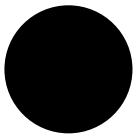
The only place the nano-particles will move slow enough to dwell long enough to penetrate a cell membrane is in a capillary.

This means that the capillary cells will be the eventual habitat for the spike protein factories.

Now that we know this - we know how to help the immune system do its job.

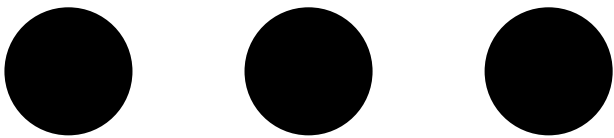


Detail of capillary bed



Embalmer Reports

These videos show unnatural vascular artifacts from vaccinated corpses.



What is Spike Protein?

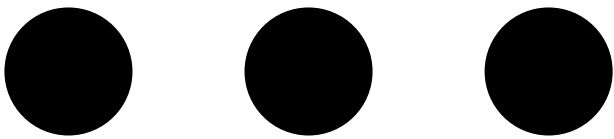
Spike protein is the surface agent from the HIV or Aids virus which enables it to bind to the CD4 receptors on lymphocytes. This ability enables HVI/Aids to disable the immune system. The spike protein is NOT part of natural cold and flu viruses.

The mRNA vaccines convert your cells into spike protein factories to coerce the body to produce spike protein antibodies. The idea that any person would voluntarily accept an irreversible change to the DNA is strange to begin with.

It is unthinkable that anyone would ever dream of programming their body to manufacture the same protein that disables the immune system with HIV/AIDs. <https://pubmed.ncbi.nlm.nih.gov/25296255/>

from the NIH Website:

[Scientists illuminated the movement and complete structure of the spikes that the HIV virus uses to bind to the cells it infects.](#)

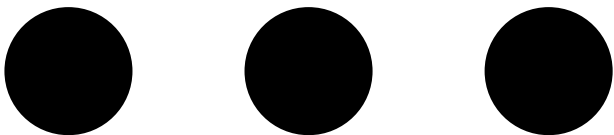


The Capillary Crime Scene - By Dr Sucharit Bhakdi

Dr Bhakdi explains the adverse events with focus on the capillaries in different organs:

- cardio-myopathy spike protein causes blockage of capillaries in the heart;
- stroke from spike proteins causing clotting cascade in capillaries in the brain;

Thank You to Dr Bhakdi for illustrating the capillary as the scene of the crime, where the spike protein factories are built.



Michael Yeadon - Former Pfizer Executive

Explains the process resulting in use of the vaccines subverts the normal protections and discipline of the drug testing and approval process.

How Detox Works

The protocol is designed to help your immune system to eliminate mutated cells with natural antibody remediated immunity.

LiveO2 Adaptive Contrast training opens your vascular system and squirts blood as forcefully as possible to the capillaries. This squirt function pushes antibodies from immune system toward mutated capillary endothelial cells to maximize the probability that antibodies will reach and then tag mutated endothelial cells to them for elimination. This process is the same as the body uses for any virus-infected cell.

Under vaccine-injured vascular conditions, mutated cells are hidden from the immune system as platelets cause microscopic clots that inhibit blood flow. Low flow through affected capillaries hides mutated cells. Survival of mutated cells enables ongoing production of spike protein resulting antibody overproduction and shedding.

Once the mutated cells are eliminated, they are replaced by healthy cells.

Endothelial Scrubbing

LiveO2 with Adaptive Contrast specifically targets the capillary beds, endothelial cells, to deliver super oxygenated plasma to the venous end of the capillaries. The mechanism is well understood:

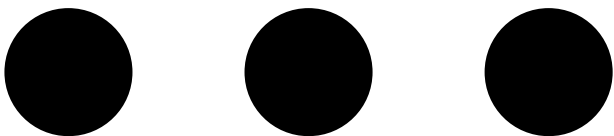
1. Take the vascular enzymes 30 minutes before exercise to maximize circulating concentration during LiveO2
2. Take Niacin 5 minutes before exercise to dilate the capillaries
3. Set the system to low oxygen and exercise
4. Exertion under low oxygen causes the heart to eject the maximum volume of blood by heart rate and ejection volume
5. Low oxygen respiratory mixture cause the vascular system to dilate
6. This combination delivers maximum pulse force of blood to capillary beds
7. The switch to rich oxygen super-saturates blood plasma with oxygen which quickly reaches the capillary beds;
8. The super oxygenated plasma opens the capillary beds by enabling endothelial cells to eject accumulated sodium
9. Open capillaries restore blood flow to capillary beds
10. Restored blood brings immune system sensor cells to the capillary bed
11. Sensor cells check and tag mutated endothelial cells
12. Tagged cells trigger antibody mediated destruction of mutated cells
13. Non muted cells survive and replace destroyed endothelial cells
14. Process replaces mutated cells with healthy ones;
15. Progressive escalation of hypoxic challenge level flushes blood in the spleen.

Data observation. No active liveO2 users (3000+), including the authors father, now 86, have reported adverse response to the 2x injections.

This supports, but does not prove, that regular training on LiveO2 culls endothelial cells that would produce spike protein.

The protocol is simple. Train with LiveO2 AC to capacity. Start easy and work up. Higher heart rate and pulse will force more immune cells through the capillaries for better results.

Q/A

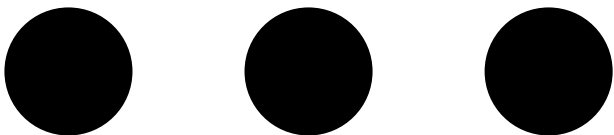


Will oxygen-only training help?

Possibly but not near as well as Adaptive Contrast.

Oxygen closes down the vascular system. It is a vasoconstrictor. Constriction inhibits the vascular system flow by reducing the effective transport diameter. This reduces the pulse pressure required to infiltrate the capillary ends.

Adaptive contrast dilates the vascular system thus makes the blood pipeline bigger to deliver more pulse pressure to the capillary beds.



Why do I need to train harder on low oxygen?

The spleen is the body's spare blood reservoir. The body will access the spare blood in the spleen when it is challenged under low-oxygen challenge conditions.

The vaccines affect vascular system in the spleen , and the blood in the spleen is a difficult to access reservoir which is only accessed under challenge conditions.

mRNA Mutation Scrub

This program is designed to:

1. Transport immune system to capillary beds to overcome infection by synthetic virus;
2. Remediate of spike protein in serum to curb overproduction of Spike Protein Antibodies which leads to Antibody Dependent Enhancement which leads to Cytokine Storm Scenario
3. Optimize of innate immunity to minimize escalation of infection to engage humoral immune system - this helps minimize likelihood of cytokine storm reaction.

This day plan takes about an hour a day. Click on the link to access a source for suggested products.

Video at right explains the elements of the protocol.

mRNA Mutation Scrub Day Plan

Activity	When	Purpose	Mechanism
Train LiveO2 AC Adaptive Contrast strongly recommended	Morning	Flush, Immune to capillary beds, Maximize Immune function maximize Oxygen Levels. Sustained Hypoxic training flushes blood out of spleen where GO accumulates.	Filtration oxygenation, oxidation. Open access to endothelial capillary structures to enable immune system to find and eliminate spike protein mutated cells to stop ongoing spike protein production.
Niacin 250-500 mg	10 min Before LiveO2	Open capillaries during training	Vaso-dilation to improve access to capillary beds.
Aspirin	10 min Before LiveO2	Helps maintain blood flow through capillaries during workout. Normally spike proteins would cause elevated platelet activation causing clot tendencies.	Retards Platelet Activation to inhibit clotting in capillaries.
Thymus Extract 500 mg	10 Min Before LiveO2	Optimize Immune	Humoral Immune support
Vasquzyme	1 capsule 30 min prior to LiveO2	Dissolve micro-clots in capillaries	Vascular enzymes nattokinease, serriptase, etc.
Sauna Hyperthermia	After Active Workout Core temp 104	Detox, Aiuto Pahgocy, Produce Heat Shock Protein	Hyperthermia

Activity	When	Purpose	Mechanism
MMS / Chlorine Dioxide	Morning	Neutralize spike proteins in serum to minimize transmission and antibody production	Oxidizer agent - antiseptic.
Potassium Iodide	Morning	Iodize mucus to maximize innate immunity	Mucosal Antiseptic
Lipid Selenium 5-10 Drops	Morning	Optimize glutathione Break down stress hormones Mobilize cellular toxins	Lipid bound selenium targets pathogenic cells to disrupt metabolism. Candidate to disrupt metabolism of mRNA mutated cells.
Vitamin D 10000 iu	Morning	Cellular immune defense	Enhance Cellular Immunity to opportunistic infection
Charcoal Capsules x6	Before Bed	Absorb bile waste & chelate blood as passes through gut from ToxDetox enabled release	Toxin Absorbent
ToxDetox Suppository	Before Bed	Neutralize Graphene Oxide, bolster anti-oxidant reserve, detox.	Glutathione and EDTA
https://www.healthline.com/nutrition/intermittent-fasting-guide#what-it-is	All day -1 meal	Auto Phagacy & Detox	Digestive system rest enables other systems to perform better.

Spike Protein Shedding

Spike protein shedding begins when a vaccinated person capillary cells starts making spike protein. This process continues as long as the mutated capillary cells remain able to produce spike protein. The Vaccination Recovery Program should in theory end spike protein shedding by enabling the immune system to eliminate the mutated cells.

The **Vaccine** is an engineered as a bioweapon that targets both the injected recipient and the unsuspecting unvaccinated person who comes into social contact with them. The media narratives of Delta Variant and breakthrough infections are deceptions that cover up the nature of the weapon. The apparent truth has been buried by ruthless murderers and liars including:

- The media;
- The FDA;
- Medical industry and drug companies;
- those who mislead anyone willing to believe them.

Shedding Model:

1. Vaccinated person is generating spike protein;
 2. The spike protein goes into the blood from the capillary beds;
 3. The blood goes first to the lungs, then the spike proteins are exhaled;
 4. Recipients are exposed to the spike protein,
 5. An unvaccinated person absorbs spike proteins:
 1. By inhalation from a vaccinated person;
 2. By skin contact from a vaccinated person;
 3. By sexual contact with a vaccinated person;
 4. Recipient cells experiences Spike Protein Poisoning
 6. The vaccinated person sheds as long as mutated cells produce spike protein.
-

Spike Protein Poison Remediation

Spike protein poisoning occurs when an unvaccinated person is contaminated by spike proteins from a vaccinated person who is shedding spike protein. This

protocol is designed for the unvaccinated person to overcome the effects being spiked.

Pathology Model

1. An unvaccinated person absorbs spike proteins exhaled from a vaccinated person;
2. The spike protein engages with the recipients ACE2 receptors primarily in sinus mucous membranes and lungs;
3. The cells recipient's ACE2 receptors are set into "fuse" mode ready to merge with any compatible particle, virus, bacteria, etc;
4. Unregulated cell fusion begins resulting in affected cells absorbing bacteria and normally natural flora;
5. These fusions "infect" spike-triggered cells with unusual but generally natural cellular dysfunctions;
6. With weakened immune systems, multiple simultaneous infections boggle the immune system with multiple concurrent infections;
7. The multiple infections create a "respiratory illness" symptomatically identical to a respiratory virus, even though no virus is present;
8. The infection persists until the immune system resolves the multiple simultaneous infections;
9. Severity is governed by:
 1. The number of cells affected by spike protein exposure;
 2. The pathogenicity and population of potential pathogenic organisms already present in the recipient;
 3. The functional status of the innate immune system - which prevents spike proteins from cellular entry;
 4. The functional status of the humoral immune system to seek and destroy spike affected pseudo-infected cells;
10. These fusions "infect" affected cells with the environmental array of - that cell must be noted and eradicated by the immune system;
11. The variability in environmental fusion candidates reflects the number of simultaneous "infections" the immune system must handle;
12. The concentration of the adverse organisms in the affected tissue and the number spike affected cells determines the scope of the infection;
13. The recipient recovers when the fusion scenario completes;

Spike Poison Recipient After Effects

Likely not contagious.

Under normal circumstances the recipient's body will not begin producing spike protein.

Likely immune or resistant to future spike poison

The immune reaction will generally recognize thus create a regulated amount of Spike Protein Antibodies. These antibodies will enable the body to detect and neutralize spike protein prior to remediate severity of future exposure.

Not prone to Cytokine Storm

A spike poisoned person will generate a physiologically appropriate amount spike protein antibody to remediate the initial exposure.

The person will have a normal regulated amount of antibodies, will provide future protection, but will not be in an overabundance to disrupt normal immune function. In other words the spike protein antibodies will appropriately sensitize the immune system protecting from future exposure, but unlike a vaccinated person, create vulnerability a cytokine storm.

Spike Protein Poison Recovery Day Plan

Activity	When	Purpose	Mechanism
Train LiveO2 AC Adaptive Contrast strongly recommended	Morning	Flush, Immune to capillary beds, Maximize Immune function maximize Oxygen Levels.	Optimize immune function, Energy production in affected cells.
Thymus Extract	2 capsules	Optimize Immune	Humoral Immune support
Sauna Hyperthermia	Core temp 104	Detox, Aiuto Pahgocy, Produce Heat Shock Protein	Hyperthermia
Vasquzyme	Before Bed	Breakdown vascular artifacts & strange proteins	Enzymatic digestion

Activity	When	Purpose	Mechanism
Activated Charcoal 3x	Before Bed	Absorb cationic cytokines & spike protein	Strong negative charge absorbs/binds positive charge
Glutathione 1500 mg	Before bed	Neutralize Graphene, Mop Spike protein	Glutathione EDTA Chelation
Liposomal Myers Cocktail	Every 3 hours	Maximize body-wide concentration of liposomes to fuse with spike-engaged cells to reduce infection	Reduce scope of infection by pathogenic agents by enabling lipids to fuse with ACE2 Activated cells
Intermittent Fasting	All day -1 meal	Auto Phagacy & Detox	Digestive system rest enables other systems to perform better.
Lipid Selenium	10 drops Morning	Optimize glutathione Break down stress hormones Mobilize cellular toxins	Optimal Glutathione Levels

Cytokine Storm Remediation Protocol

This occurs when the body has an overabundance of spike protein antibodies and initiates the macrophage 1 with a retarded macrophage 2 response. There is no accepted medical treatment for Cytokine Storm which is generally considered fatal.

The core protocol is activated charcoal by Dr Janossy. The apparent mechanism is that the charcoal to remediates alkalosis by pulling cationic ions out of the blood and enabling elimination by stool.

Cytokine Storm Remediation Day Plan

Activity	When	Purpose	Mechanism
Train LiveO2 AC	Morning	Maintain O2 levels to preserve organ function.	Maintain oxygen levels throughout the body for resilience

Activity	When	Purpose	Mechanism
Activated Charcoal 6 caps	Every 2 hours or on symptom worsening	Absorb bile waste & chelate blood as passes through gut from ToxDetox enabled release	Negatively charged anions capture positively charged blood toxins as blood travels through gut.
Mono Ammonium Phosphate Titration (Special order - call)	Urine pH greater than 6.5	Preserve organ function by remediating acute tissue alkalosis.	Neutralize extracellular alkalosis in viral infections. US Patent 4301150
Glutathione 1500 mg	Before bed	Increase anti-oxidant buffer reserve and resilience.	Absorb toxins & increase stress reserve.
Liposomal Myers Cocktail	2 ounces daily	Support tissue oxygenation and stress tolerance with nutrients	Magnesium chloride, B Vitamins, Vitamin C
Lipid Selenium	10 drops	Optimize glutathione Break down stress hormones Mobilize cellular toxins	Optimal Glutathione Levels

GO Poisoning Day Plan

Graphene Oxide is a common finding in blood samples. It has cleared quickly with LiveO2 workouts.

I speculate the liver filters particulates as blood passes through the portal vein.

Experiments have shown approximately 75% of GO particulate are removed in a single 15 minute workout. Regular users tend to exhibit little to now blood particulates.

Activity	When	Purpose	Mechanism
Train LiveO2 AC	Morning	Flow blood through liver to filter particulate. Maintain max O2 levels in liver to optimize liver function.	Maintain oxygen levels throughout the body for resilience

Activity	When	Purpose	Mechanism
Activated Charcoal 6 caps	Every 2 hours or on symptom worsening	Pre-install in gut to statically bind Graphene Oxide to prevent re-absorption through gut wall.	Negatively charged anions capture positively charged blood toxins as blood travels through gut.

Long COVID Protocol <developmental>

Long haul describes symptoms that exceed the normal recovery cycle - nominally exceeding about 6 weeks.

The model presumes three elements:

1. A significant percentage of the body harbors a pathogen;
2. The immune system is hyper-activated by monocytes & cytokines
3. Critical to throttle but progressively enable immune response.

Plasma dissolved oxygen is a very potent immune modulator because a high level of oxygen enables maximal energetic resources for all immune cells. This is based on the Krebs cycle and aerobic versus anaerobic energy creation:

- Aerobic: 38 ATP per glucose molecule
- Anaerobic 2 .ATP per glucose molecule
- Oxygen enables all cells, including Immune cells, white blood cells to operate at 19 x higher level

The 19x energy factor occurs very early in the LiveO2 workout. Note that the early workouts will be limited to ONLY 15 seconds of oxygen in the entire workout. The goal is to modestly bump the O2 level thus throttling the physiological response:

1. 90 seconds of hypoxia facilitate vasodilation for "limited and controlled"

release of monocytes and cytokines from endothelial tissue

2. 15 seconds of oxygen cause a "modest" and transient increase in plasma dissolved oxygen to cause a **limited** immune boost.
3. Progressively increase cycles according to tolerance

Day Plan

Activity	When	Purpose	Mechanism
Train LiveO2 AC	Morning	Flush vascular system and gently boost immune system	Progressively add cycles to tolerance
Activated Charcoal 6 caps	Every 2 hours or on symptom worsening	Absorb bile waste & chelate blood as passes through gut from ToxDetox enabled release	Negatively charged anions capture positively charged blood toxins as blood travels through gut.
Glutathione 1500 mg	Before bed	Increase anti-oxidant buffer reserve and resilience.	Absorb toxins & increase stress reserve.
Liposomal Myers Cocktail	2 ounces daily	Support tissue oxygenation and stress tolerance with nutrients	Magnesium chloride, B Vitamins, Vitamin C
Lipid Selenium	10 drops	Optimize glutathione Break down stress hormones Mobilize cellular toxins	Optimal Glutathione Levels

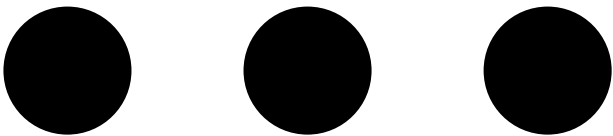
Nanotech Attack Remediation

This protocol is in response to merging documentation of nanotech artifacts appearing as a result of vaccination based on hydrogel and other unknown technology. Beware - this is scary shit.

See Also:

- [Protocol to Test for injected MAC address Nano Tech](#)

References: (click to view)



Mike Adams Lab Analysis of Vascular Post COVID-Vaccination Vascular Artifacts

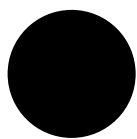
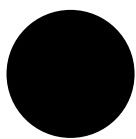
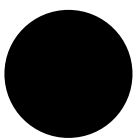
This section documents the reality that the Covid vaccines include undisclosed self assembling nano-technology.

Mike Adams provides formal laboratory analysis of vascular artifacts removed from

vaccinated individuals who experienced Sudden Adult Death Syndrome. The artifacts shown were extracted by embalmer Richard Hirschman because they blocked the vascular system preventing circulation of embalming fluid.

Notable Observations:

- These are NOT blood clots - they are self assembling artifacts
- Some appear to increase in size when stored in formaldehyde in the lab
- They were removed from different areas of the vascular system, veins, arteries in the carotid artery and legs
- Their chemical composition is unnatural and includes conductive metals, tin, sodium and others in unnatural concentrations



Whack a Brain Series - DARPA Nanotech Deep Dive (Celeste Solum)

Overview / Synopsis with Sarah Westall

These resources enable a high level review of Celeste Solum to determine if it is worth the effort to traverse the DARPA technology deep dive.

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Celeste Solum deep dive on DARPA

Celeste explains war technologies with focus on energy weapons which are documented to exist. She traverses the known spectrum of these technologies. Prepare to be horrified as she traverses the formal published research documentation relating to:

- Weaponized Energy Systems: [Havana Syndrome](#) - Acoustic/Microwave/Photonic Energy weapons able to target various organ systems including the brain by causing cavitation-injury. These technologies have been photographed in Ottawa and appear deployed for crowd control;
- Weaponized Nano Technology: [Smart Dust](#) / [Hydrogels](#) and other invasive technologies which can be used to usurp biological systems to track, compromise, and usurp control of living systems including humans;
- She concludes 5G and eventually 6G are the control platforms to convert you into a literal meat puppet and asset on the DNA blockchain.

[Click for Direct Link to Celestialreport.com Whack A Brain Research](#)

Webinars

Filters

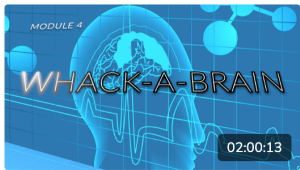
Whack

Author

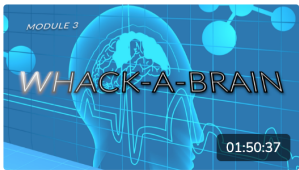
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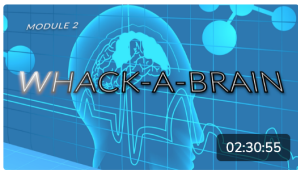
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Whack-a-Brain Module 4



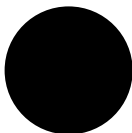
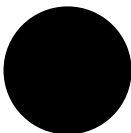
Whack-a-Brain Module 3



Whack-a-Brain Module 2



Whack-a-Brain Module 1



Dr Mike Yeadon - Former Pfizer Exec exposes the big picture agenda

Dr. Mike Yeadon is a former Pfizer Executive who formerly disclosed the nature of the COVID agenda to set the stage for the New World Order Agenda starting based on a mass fear campaign. The elements include:

- Economic Calamity
- Mass Vaccination to deploy unknown technology to the population
- Usher in the 4th Industrial Revolution
- Obliterate Humanity as we know it

The date to day is September 3 2022. This is excerpted from the seymorerocks information below. The excerpt puts today's reality in painful focus on digital wallets, collapse of the banks, and other materially observable events. The fact that these processes have been staged and intentionally scheduled reflects there is nothing natural about today's events:

Phase 6: Cancel the debts and dematerialize the money. (March 2022-September 2022)

- **Trigger the economic, financial and stock market collapse, the bankruptcy of the banks.**
- **To rescue the losses of the banks in the accounts of their clients.**
- **Activate the «Great Reset».**
- **De-materialize money.**
- **Cancel debts and loans.**
- **Impose the digital portfolio. (Digital Wallet)**
- **Seize properties and land.**
- **Ban all global medicines, including total ban on herbal medicine.**

- **Confirm the obligation to vaccinate semi-annually or annually.**
- **Impose food rationing and a diet based on *the Codex Alimentarius*.**
- **Extend the measures to emerging countries.**

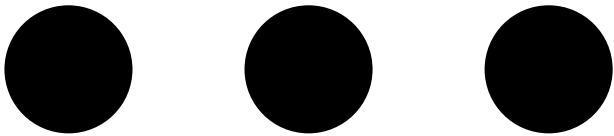
Result, Third stage of digital control. Extension of the N.O.M. to the whole planet.

(Novus Ordo Mass, translated it means New Order.

The 5 phases of the Great Reset

This provides a written version of the planned schedule as rolled out. This plan has been public since 2018.

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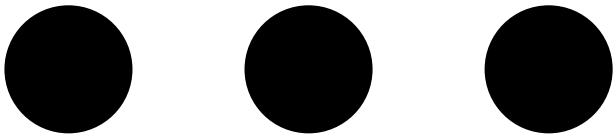


Scott Gottlieb Head of the FDA - COVID Boosters are a software upgrade

Doesn't a software upgrade means somebody snuck a computer in there somewhere?

Scott Gottlieb - head of the FDA asserts that no testing is necessary for the COVID boosters. Presumably once the nanotech is in place, the additional boosters simply provide additional instructions via chemical means which improve the effects.

Given the disclosures above - be afraid, be **very** afraid.



What's the Nano Tech supposed to do

Mike Adams and his guest zoom out to discuss the role of nanotech and the covid plan toward mutation of humans.

Strategy

This is my opinion on how to disrupt the self-assembly and operation of nanotechnology inside the body.

Assumptions:

- Graphene Oxide is a critical substrate because it is being factored into the food supply and is undisclosed
- Electromagnetic signals via 5G+, and possibly StarLink are the intended control and data interfaces (Celeste Solum)
- Self assembling nano-tech is most vulnerable early in the exposure because of the need to scrounge materials from the body
- The technology will use a combination of control energetic, power energetic and material substances to
 - Seed = Hydragel + antenna - to kindle the process of nanotech formation based on brownian motion to gather initial resources
 - Control Energetic - Homeopathic - that establishes the assembly pattern imprint for the devices
 - Power Energetic - Like 5G or other High Frequency raw power for manifestation of macro-influences on matter

Strategy to disrupt propagation of :

- Deprive essential ingredients -
 - graphene oxide to inhibit formation of self assembling structures
 - Supply cationic absorbents to bind positively charged cations
 - Maximize absorption of cationic metals via diet & maximal detoxification
- Minimize control signal exposure that provide control signals and energy :
 - 5G & EMF signals
 - Bluetooth
 - Use avoidance and shielding to minimize signal exposure
- Maximize disruptive signals to interfere with formation of nano devices
 - Maximize zeta-potential in body fluid for maximal separation
 - High frequency pulsed electromagnetic signals
 - Hormetic radiation to break up gestational unnatural structure
- Maximize stress foreign body response via immune system:
 - Maintain highest possible immune system for foreign bodies
 - Maintain maximum blood purity by frequent filtration by maximal flow through Liver/Kidneys
 - Maximize blood concentration of organic enzymes known to break down structures
 - Vascular enzymes - nattokinase / serritase & others
 - Maximize chalcogen concentrations for purification

- Aerobic Metabolism - Oxygen
- Systemic Oxidation - Sulfur(Glutathione Creation)
- Systemic Oxidation Optimization - Selenium(Glutathione Recycling) - Toxin Neutralization
- Nano-Oxidation substrates / Tellurium(Mitochondrial) - Monkey wrench oxidation
- Augment Autoimmune Performance with known anti-parasitics
 - Ivermectin
 - Quinine

Day Plan

mRNA Mutation Day Plan plus the elements below

Activity	When	Purpose	Mechanism
Glutathione 1500 mg	Before bed	Neutralize Graphene, Mop Spike protein	Glutathione EDTA Chelation
Liposomal Myers Cocktail	Every 3 hours	Maximize body-wide concentration of liposomes to fuse with spike-engaged cells to reduce infection	Reduce scope of infection by pathogenic agents by enabling lipids to fuse with ACE2 Activated cells
Lipid Tellurium (Under development)	10 Drops Morning	Optimize glutathione with minimum sized chalcogen	Monkey wrench in nano-particle formation. Presence ultra small chalcogen would not be anticipated by engineers and likely to disrupt nano-device function. Will be absorbed in place of selenium - but seems likely to cause dysfunction.
ePad under Liver	Overnight	Maximize zeta potential in liver overnight to protect detoxification	Cell

Activity	When	Purpose	Mechanism
PEMF Liver - 15 min	Daily At convenience 10 Min Liver 5 min thymus	Blood Energy Optimization Disrupt Nanoparticle formation Maximize blood zeta potential Optimize liver energy Protect liver from infection	Pump Transmembrane potential of body cells. Disrupt metabolism of cells not operating at body harmonic frequency.

Tracking Tool Candidates

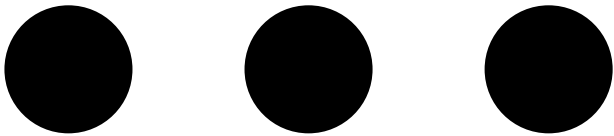
Vascular Age Tracking

- [iHeart internal Age Tracker](#) - general purpose tool but appears indicative on personal experiments
- Vascular inflammation interferes with vascular elasticity. This tool is a good candidate to track vascular performance and age.

Heart Rate Variability Utilities

- Overnight HRV Tracking: [Fitbit](#) / [Biostrap](#) / [Oura Ring](#)
- [emWave Pro by Heartmath](#) - Heart Rate Variability is a good whole body health indicator

References & Research

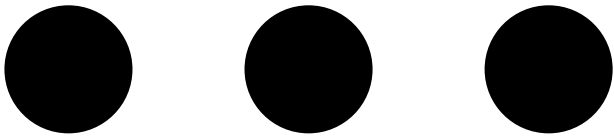


Dr Bruce Patterson

Nuggets:

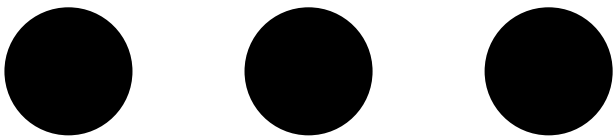
- Exercise activates monocytes
- Spike protein (SP-1) remains bound to active monocytes for a very long time - Monocyte destruction is suspended/delayed so SP1-bound monocytes accumulate in the system
- Cytokines elevated in plasma
- Exercise scrubs endothelium to remove bound monocytes & cytokines
- Monocytes produce cytokines so excess monocytes can/will lead to excess cytokines

Supports role of charcoal reducing cytokine inflammatory role.



NIH/Research Papers

- [Effects of acute exercise on monocyte subpopulations in metabolic syndrome patients](#)
- [Headache accompanies 64% Covid presentations](#)

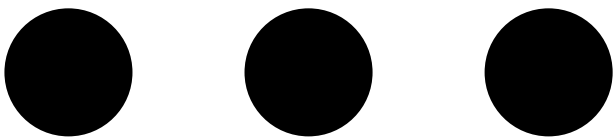


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Toxin Candidate List

The Package Insert sheet for J&J and other vaccines say "Page Left Intentionally Blank". This list is based on the best sources at the time and disregards traditional information sources because nobody really knows what's in those injections.



J&J Package Insert Video

This video shows the package insert included with the Johnson and Johnson vaccine. It is simply blank.

Toxin	Nature	Known Detox Agent	Problem
Mutagenic mRNA Synthetic Virus	Man made particle that acts like a virus to Infects cells mutate DNA to create unregulated production spike protein prion.	Immune system via Spike Protein Antibody, Mutated DNA Detection, TNF (speculative). Overcome capillary obstacles to immune system reaching capillary beds. The source of spike proteins must be eradicated before spike proteins & Spike protein antibodies can be controlled.	Mutated cells become spike protein prion factories with unknown and potentially perpetual spike protein production.

Toxin	Nature	Known Detox Agent	Problem
Spike Protein Prion	A protein that activates ACE2 receptors on cells surface to trigger adsorption, or merger of a lipid particle into a cell.	<p>Adsorption Decoy Liposomes: as oral Myers Cocktail, Vitamin C, glutathione, etc</p> <p>Neutralizers:, Heat Shock Proteins, MMS, Shikimic Acid, glutathione</p>	<p>Unregulated production of spike protein prions likely cause:</p> <ol style="list-style-type: none"> 1. Unregulated production of spike protein antibodies; 2. Shedding of spike protein prions via respiration, perspiration, flatus, which adversely affects others; 3. Erroneous ACE2 activation triggers erroneous lipid fusion; 4. Erroneous lipid fusion causes cells to erroneously fuse with unnatural lipid nanoparticles; 5. Unnatural fusion causes cellular contamination; 6. Erroneous lipid fusion may cause ACE2 triggered cells further uptake of Mutagenic mRNA Synthetic Virus resulting in further over-production of spike protein; 7. Erroneous lipid fusion may cause ACE2 activated cells to more readily fuse with bacteria or viruses resulting in defeat of cellular immunity..

Toxin	Nature	Known Detox Agent	Problem
Spike Protein Antibody	Spike protein antibodies tag to any spike protein. This includes natural cells that properly use spike protein to access ACE2 receptors.	Time. Stopping spike protein prion load enables the body to normalize antibody levels. Optimize innate immune system function to protect the body from antibody mediated infection to enable body erode excess antibodies to enable natural a/b macrophage immune balance to avert immune-pathology.	Optimize other immune system function to minimize probability of infectious agent that breaches innate immune system to trigger immune-pathology. Excess spike protein antibodies cause the body to over-react killing infected cells faster than they can be replaced resulting in organ destruction.
PEGylated lipid nanoparticles	Synthetic virus shell which is adsorbed into the cell membrane of vaccine infected cells. Per Moderna patent it contains 4 categories of lipids, and graphene oxide.	Possible agents: glutathione, MMS, DMSO. These particles are absorbed into cells, and exhaled. Half-life unknown.	Trade secret wrapper that uses electrostatic characteristics of Graphene Oxide to encapsulate the Mutagenic mRNA Synthetic virus. Moderna patent discloses use of 4 categories of lipid.

Toxin	Nature	Known Detox Agent	Problem
Graphene Oxide	Small particles of graphene which fascinating behaviors including profound response to electromagnetic radiation and paramagnetic and magnetic when bonded to manganese.	Glutathione / Oxygen / ClO2	<p>Graphene oxide can be reduced by strong or resonant EMF signals. Possible effects are to increase vulnerability to electromagnetic signals or create an electromagnetic "kill switch".</p> <p>Graphene oxide in water is documented to interact with EMF in the 3 GHz range, and within 5G ranges.</p> <p>There are no discoverable animal or human studies about subjects dosed with graphene oxide respond to electromagnetic radiation.</p> <p>Some studies show that DARPA hydrogels are able to self assemble electromagnetic devices when exposed to static magnetic fields. ene oxide Nobody really knows...</p>
DARPA HydroGel Devices	Electronic devices suspended in liquid that self assemble into electronic devices when exposed to magnetic fields.	Glutathione / Pulsed electromagnetic fields to disrupt nano-electronics	Bluetooth, RFID or other technologies which if included are overt violation of human rights.

Notes:

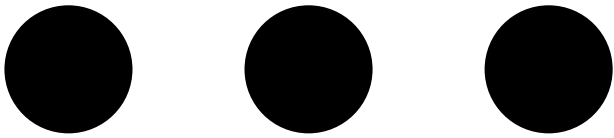
*Liposomal Decoys may neutralize the harm potential of spike protein. Spike protein - ACE2 activation like provokes affected cells to unnatural adsorption. In this case the presence of nutrient decoy liposomes would enable spike activated cells to fuse with nutrient packets instead of disease or random phospholipid.

As such liposome cocktails like oral myers cocktails, liposomal vitamin C, and liposomal glutathione, and even raw phospholipids like raw egg yolk could serve as an antidote for shedded spike protein.

Graphene Oxide and Darpa Hydrogel detox are new physiology. Right now best practice for GO remediation is to maintain high levels of glutathione which is an element of all protocols as a support element.

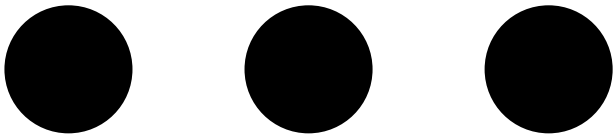
Immunity 101

[Here is a primer of the immune system.](#) These tutorials are intended to help readers understand the language used here.



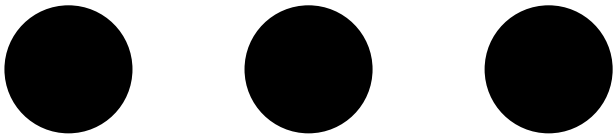
Innate Immune system

[The innate immune on Wikipedia.](#)



Humoral Immune System

[Humoral Immunity uses antibodies and active cells to overcome infection.](#)



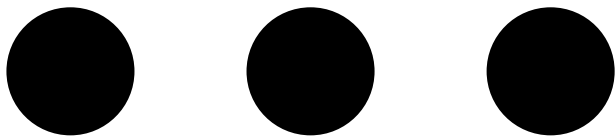
Cellular Immune System

[Cell mediated immunity on wikipedia.](#)

Vaccinated Observations

1. For administration
 1. The ingredients are injected usually into the arm;
 2. The ingredients are engineered to carry the mRNA agents into the cells;
 3. The ingredients primarily affect cells at the injection and the vascular endothelium which lines the vascular system;
2. Apparent Intended Physiology
 1. The vascular endothelium begins producing spike protein which expresses on the endothelial surface;
 2. These spike proteins are released into the blood, and circulate throughout the body;
3. Unintended Physiology
 1. Spike protein shedding tends to affect others in close proximity who:
 1. Exchange of body fluids;
 2. Rebreathe the same air;
 3. Those in close contact with the injected exhibit symptoms consistent with overwhelming spike protein exposure:

1. Terrible Headaches
 2. Acute fatigue
 3. Severe diarrhea
 4. Unnatural menses
 5. Severe flu-like symptoms
4. Recipients with adverse events Experience
 1. Rapid onset of [Guillain-Barre Syndrome](#)
 2. Acute thrombosis as stroke or heart attack
 3. Acute vascular inflammation as Cardiomyopathy
 4. Acute neurological injury as onset of Bell's Palsy, and Parkinson's symptoms
 5. Repeat recipients experience more adverse events faster
 6. No apparent resistance to COVID or variants
 7. Tendency to get sicker more often

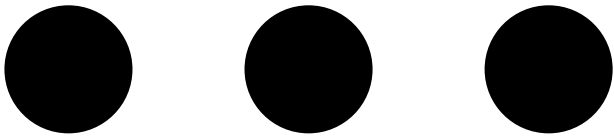


Spanish Discovery Nexus - Why Graphene?

Graphene oxide has emerged as an undisclosed ingredient in injections pursuant to study by research at a spanish university. Moreover there are many reports of magnetic and paramagnetic phenomenon that suggest graphene as the probable source of these curious observations.

This interview expresses a noxious intent. Buckle up.

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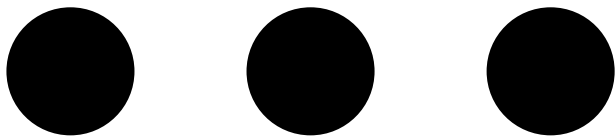


Stephanie Seneff - Worse than the disease

[Worse than the Disease](#) - by Stephanie Seneff and Greg Nigh, MIT

Excellent Website with massive resources: <https://factcheckvaccine.com/>

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Graphene Oxide

Graphene oxide has emerged as an undisclosed ingredient in injections pursuant to study by research at a spanish university. Moreover there are many reports of magnetic and paramagnetic phenomenon that suggest graphene as the probable source of these curious observations.

The author failed to locate any study indicating the study or approval of graphene as safe for injection into humans or animals in any clinical study.

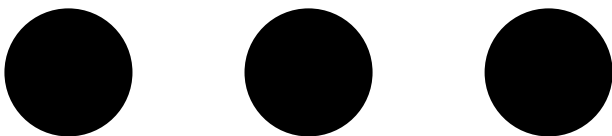
Graphene Oxide or GO is ingredient appears. There is no data regarding it safety for injection or that it has ever been approved for oral, intramuscular or intravenous administration to humans by the FDA.

This is the likely reason why the manufactures withheld GO presence in the injections as listing it as an ingredient would bar it from approval of the vaccines for allowance for many years. It's inclusion is permissible under the Emergency Use Authorization.

[Graphene Family nanoparticles toxicity](#)

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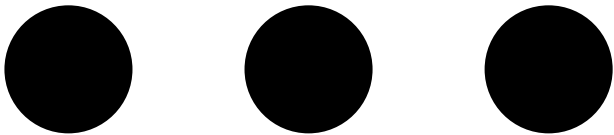
Pfizer IP Analyst - Karen Kingston

She researches the patents to determine that graphene remains undisclosed in the intellectual property, patents, issued. This video explains the concealed ingredient.

She says that Graphene Oxide is in the shots.

- Pegylated Lipid Nanoparticle - [Moderna Patent US10702600](#)
- The electrodynamic properties of graphene oxide are needed to construct the carrier package to deliver the mRNA into the cell

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Pfizer Study Results - Shows vaccinated shed & cause illness

8.3.5.3. Occupational Exposure

“An occupational exposure occurs when a person receives unplanned direct contact with a vaccine test subject, which may or may not lead to the occurrence of an adverse event. These people may include health care providers, family members, and other people who are around the trial participant.

When such exposures happen, the investigator must report them to Pfizer safety within 24 hours of becoming aware of when they happened, regardless of whether or not there is an associated secondary adverse event. This must be reported using the vaccine secondary adverse event report form. SINCE THE INFORMATION DOES NOT PERTAIN TO A PARTICIPANT INVOLVED IN THE STUDY, THE INFORMATION WILL BE KEPT SEPARATE FROM THE STUDY.”

TO CLARIFY: Vaccine study participants become super spreaders of something, they don't say what it is, but it triggers secondary adverse events in people that never had the vax, when they are exposed to people who did have the vax.

Terms:

Study intervention – A vaccine test subject.

AE – Adverse event in someone who got the vax.

SAE: An adverse event in someone who was exposed to someone who got the vax.

EDP: Exposure during pregnancy

8.3.5. Exposure During Pregnancy or Breastfeeding, and Occupational Exposure
Exposure to the study intervention under study during pregnancy or breastfeeding and occupational exposure are reportable to Pfizer Safety within 24 hours of investigator awareness.

8.3.5.1. Exposure During Pregnancy An EDP occurs if:

* A female participant is found to be pregnant while receiving or after discontinuing study intervention.

*** A male participant who is receiving or has discontinued study intervention exposes a female partner prior to or around the time of conception.**

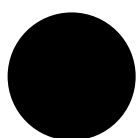
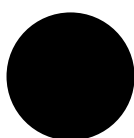
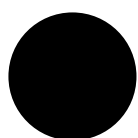
*** A female is found to be pregnant while being exposed or having been exposed to study intervention due to environmental exposure. Below are examples of environmental exposure during pregnancy:**

*** A female family member or healthcare provider reports that she is pregnant after having been exposed to the study intervention by inhalation or skin contact.**

*** A male family member or healthcare provider who has been exposed to the study intervention by inhalation or skin contact then exposes his female partner prior to or around the time of conception.**

[Article Source Link](#)

[Analysis Source Link](#)



Morbidity by % Graphene Oxide Affected Erythrocytes - Mylo Canderian, PHD

Research Report: This article asserts that Mylo Canderian, PHD, was a primary researcher and created a patent. I could not locate any such patent listing him as an inventor. [I backtracked the article to this source](#): which listed 2 comments that referenced different patents on graphene oxide.

[Apparent source of original quote.](#)

[Chapel Hill 2002](#) - that does not cite GO as a carrier.

Chinese Patent citing graphene oxide as a carrier:
<https://patents.google.com/patent/CN112220919A/en>

Neither of these patents cites Mylo Canderian as an inventor. However [Dr. Canderian's linked in page shows he is an IP consultant](#) which suggests he has subject matter expertise and it seems smart enough NOT to put his name on a patent which does what he says below:

How Long Do the Vaccinated Have to Live?

By Steven Fishman

I deferred this question to a friend of mine, Dr. Mylo Canderian, Ph.D. [born Milos Iskanderianos, Corfu, Greece, 1938], who developed the patent for Graphene Oxide for use as a Hematological Bioweapon in 2015.

In full transparency, Dr. Canderian is what I would call a “Genocidal Globalist,” who follows Precept Ten of the Georgia Guidestones, which is very seldom discussed, stating “Be not a Cancer upon the Earth; Leave Room for Nature.”

Dr. Canderian is a Medical Contributor to the World Health Organization and is also very supportive of Klaus Schwab and the “Great Reset,” ushering in one world digital currency which is a secondary goal of the WHO for 2022.

Dr. Canderian is of the opinion that 95% of the world's population are "Useless Eaters" who need to be euthanized as quickly as possible.

"Look at downtown Chicago, Baltimore, or Los Angeles," he has stated, "and you will clearly see why the Useless Eaters must be put down like rabid dogs."

He has expressed his disdain for "Infectious Educators" who promote Critical Race Theory, and is confident that the "vaccine" will put an end to "Human Cancer Upon the Earth."

Dr. Canderian is an ardent supporter of Freemasonry's Duty and Obligation to rid the world of the "Plague of Humanity."

Yet on a personal level, he and I share a passion for the same exotic dish served at L'eminence de Veau in Geneva: Cream of Hummingbird Soup followed by Elk Tongue.

We both are fans of Chef Gaston Sere de Rivieres, who is a culinary genius.

So, I asked Mylo, "How can the "vaccinated" know with certainty how long they have to live once they have been jabbed?"

He presented me with the information, called the "End of Cycle Formula."

He explained how easy it is to calculate.

"The Power of Simplicity," he said. "There is a maximum cycle of ten years from injection to End of Cycle," [or death], he elaborated. "And it is extremely easy to determine."

He said any hematologist can see it within seconds under a microscope, and even more readily under an electron microscope. "The percentage of blood affected [or contaminated] by or with Graphene Oxide is the reciprocity of the End of Cycle calculation," he divulged.

In other words, an "inoculatee" [as he calls anyone jabbed with the

Experimental Use Authorization Eugenics Depopulation Lethal Injection Bioweapon] having 20% Graphene Oxide deterioration in their blood will, barring any other input criteria, live for 8 years. [10 years less 20%].

Someone with 70% Graphene Oxide deterioration will not live more than 3 years. [10 years less 70%].

Dr. Jane Ruby recently was interviewed by Stew Peters on his podcast and showed examples of what the deteriorated blood looks like when exposed to Graphene Oxide.

Graphene Oxide, for those who are unaware, is the component of Messenger RNA spike proteins and prions, which is at war with the heart, lungs, brain and blood for oxygen.

Graphene Oxide is an oxygen sponge which deprives the body of necessary oxygen and causes many complications, including but not limited to anaphylactic shock, toxic blood clotting, fatal lung paralysis, mitochondrial cancer, and endothelial cancer.”

Dr. Mylo Canderian’s viewpoint is much the same as Klaus Schwab, Bill Gates, and the Big Pharma CEO’s: LET THEM ALL DIE!

I asked Mylo what the effect of second and third shots and boosters do and how that changes the End of Cycle table.

Mylo replied: “It is all measurable through hematological testing. The more shots and boosters the imbeciles get, the worse their blood will look under a microscope, and the quicker they will turn to fertilizer.”

Finally, I asked him how the plot to kill so many billions of people could be kept so secret by such a group of elites.

His answer was: “You don’t know much about Freemasonry, do you, Steve?”

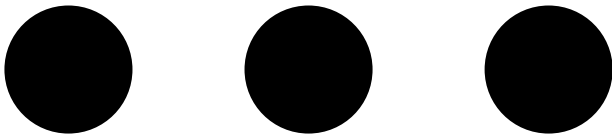
And there you have it.

Chinese Patent on Covid/Sars vaccine: [CN](#) / [Eng](#)

[Analysis Source Link](#)

[Dr. Mylo Canderian on Linked In](#)

If Dr. Canderian is correct GO accumulation is destructive.



Photoluminescence Graphene Oxide

[Link to Photoluminescence of Graphene Oxide](#)

[Nature.com GO Luminescence](#)

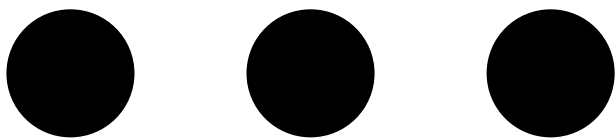
The PL of graphene oxide was found to be broad, extending from 350 nm to 1250 nm with a maximum at 710 nm and arises from radiative recombination within low lying disorder induced defect states. By photothermally reducing the graphene oxide, the PL maximum was tuned from 710 nm to 450 nm through decreasing lattice disorder and the formation of confined cluster states which lie higher in energy.

LED UV Light from Amazon: My light is 385-395 NM

UV Range of normal lights:

Ultra-Violet Light: The UV region covers the wavelength range **100-400 nm** and is divided into three bands: UVA (315-400 nm) UVB (280-315 nm) UVC (100-280 nm).

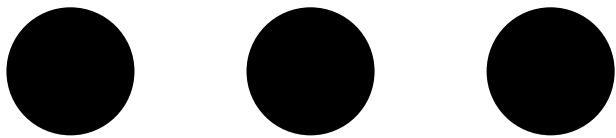
Since the PL of graphene oxide is linked to the degree of oxidation of the graphene lattice, the PL properties can be tuned by altering the extent of this oxidation.



Hemotoxicity of Graphene Nanoparticles

[Link to Source Article](#)

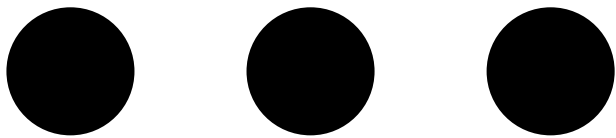
[Nature.com GO Luminescence](#)



Clear explanation from a ER Nurse

[Link to Source Article](#)

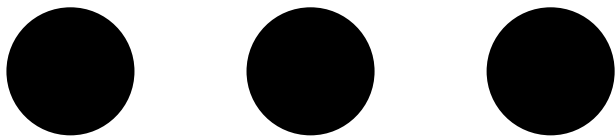
This ER nurse lays it out clearly. Reinforces front-line observations that contradict the narrative.



FDA List of Known Side Effects

FDA Safety Surveillance of COVID-19 Vaccines :
DRAFT Working list of possible adverse event outcomes
*****Subject to change*****

- Guillain-Barré syndrome
 - Acute disseminated encephalomyelitis
 - Transverse myelitis
 - Encephalitis/myelitis/encephalomyelitis/
meningoencephalitis/meningitis/
encepholopathy
 - Convulsions/seizures
 - Stroke
 - Narcolepsy and cataplexy
 - Anaphylaxis
 - Acute myocardial infarction
 - Myocarditis/pericarditis
 - Autoimmune disease
 - Deaths
 - Pregnancy and birth outcomes
 - Other acute demyelinating diseases
 - Non-anaphylactic allergic reactions
 - Thrombocytopenia
 - Disseminated intravascular coagulation
 - Venous thromboembolism
 - Arthritis and arthralgia/joint pain
 - Kawasaki disease
 - Multisystem Inflammatory Syndrome
in Children
 - Vaccine enhanced disease
-



Dr David Martin - Conclusions from Covid & Vaccine Patents

Related Content - Beware...

- [Immunopathology Of COVID Vaccines](#)
- [Vaccines - Mechanism of Injury with focus on lobotomy](#)
- [The Green Pill - Anatomy of a Spectral Assault on America](#)
- [Welcome to Lock Step - The Rockefeller Plan](#)

[Go To Forum For Discussion](#)