

When is a Vaccine NOT a Vaccine?

A: When it's a SARS-Covid-2 injection

The article below in the Globe and Mail newspaper called attention to this situation in December. The main ingredient is not an attenuated (weakened) virus or bacteria as has been the case with virtually all past vaccines. It is raw genetic material – in this case mRNA or “messenger RiboNucleic Acid” – not from the virus but artificially created to use human cells to create proteins that are supposed to trigger a human immune response to the actual virus. It is a fundamentally new technology that has had very little testing. Welcome to the grand experiment. **We, the people, are now the test.**

Health Canada warns people with allergies to COVID-19 vaccine ingredients to forgo shots

Jacob Serebrin

The Canadian Press, Dec. 13 2020

<https://www.theglobeandmail.com/canada/article-health-canada-warns-people-with-allergies-to-covid-19-vaccine-2/>

Health Canada warned Saturday that people allergic to ingredients in the COVID-19 vaccine should forgo getting the shots, days before inoculations are scheduled to begin in this country.

The federal agency's warning comes after two people in the United Kingdom suffered severe reactions to the Pfizer-BioNTech vaccine and recovered. Both had histories of severe allergic reactions and carried epi-pens, Health Canada said in a written statement.

“Health Canada has reviewed the available evidence and has concluded that the current (prescribing information) and available public health guidance are appropriate, and is not recommending any changes to the product's use at this time,” the statement reads, adding that it will take action if any new safety issues are confirmed.

But it is warning that those with severe allergies should talk to their doctors before receiving a shot.

“In Canada, all vaccines carry a warning about the risk of serious allergic reactions, including anaphylaxis,” the release said. “Immunization clinics are equipped to manage these rare events.”

Here are the ingredients, according to the release:

Medicinal ingredient:

- mRNA

*messenger **RiboNucleic Acid** - Some forms of this molecule are involved in cell replication.

Non-medicinal ingredients:

- ALC-0315 = ((4-hydroxybutyl)azanediyl)bis(**hexane**-6,1-diyl)bis(2-hexyldecanoate)
***hexane** — a volatile hydrocarbon (C⁶H¹⁴). **Gasoline** is a mixture of septane C⁷H¹⁶ and octane C⁸H¹⁸
- ALC-0159 = 2-[(polyethylene glycol)-2000]-N,N-ditetradecylacetamide
- 1,2-Distearoyl-sn-glycero-3-phosphocholine
- cholesterol
- dibasic sodium phosphate dihydrate
- monobasic potassium phosphate
- potassium chloride

- sodium chloride
- sucrose
- water for injection

*Items in coloured print are not in the Globe and Mail article but are additions based on minimal research. (Another question is how would most people know whether they are allergic to any of this material)

Further comments

Some types of mRNA are involved the reproduction of DNA when a cell divides.) It's important to remember that this is not a crippled version of the virus or any of the **protein shell that identifies it** and also alerts the immune system.

To be very clear about this, a virus is basically a ball of protein (1000 times smaller than a bacteria) with spikes on the surface to hook into living cells (the cells of our body). The genetic material inside it (RNA or DNA), the active part, is **invisible** to the **body's immune system**. Only the **surface protein** can be recognized by the immune system and destroyed by it.

The argument of its proponents is that the mRNA being used here cannot penetrate the cell nucleus where the DNA resides but uses your body's resources (the non-nuclear portion of the cells) to create the proteins that are found on the virus shell. This is supposed to provoke your body into creating antibodies that destroy the virus. Of course we have to take them at their word but Pfizer has a bad record with Swine Flu vaccine in 2009&10. <https://electroverse.net/rushed-2009-10-swine-flu-vaccine-found-to-cause-narcolepsy/> Even if they are being honest, as stated above, this is a **new and still experimental** process.

This is clearly **not immunization as it has been known** for the last hundred and fifty or so years. It is very **new technology** that is highly invasive and needs to be carefully tested for years – preferably a decade – not rolled out in massive world wide campaign in a few months. The fact is, that the SARS-Covid-2 is **not that deadly** anymore. Infectious yes, but definitely not deadly enough to the general population to warrant a massive **long term experiment** on the whole population.

The process of evolution dictates that any pathogen (bacteria, virus, fungus or what ever) must become **more infectious** but **less deadly** in order to survive and propagate. Killing its hosts blocks its transmission. Eventually virulent pathogens either fade out of significance or become a minor annoyance like the common cold. That assures their own survival and transmission.

If a reported pathogen is increasing its lethality it is a **new pathogen** not a normal mutation.

We've been here before!

There have been two major pandemics that were at least as lethal as the current Covid one. They were the "Asian Flu" of 1957-58 and the so-called "Hong Kong Flu" of 1968-69. All the measures, lockdowns, distancing, (not masks), etc., were discussed during these pandemics and rejected by sensible health and government authorities.

<https://www.aier.org/article/in-the-asian-flu-of-1957-58-they-rejected-lockdowns/>

<https://www.aier.org/article/woodstock-occurred-in-the-middle-of-a-pandemic/>

These pandemics were over in less than 6 months. The natural evolution of human immune systems and the declining lethality of the virus' did the trick with hardly any use of vaccines.

This article can be found at: www.thelibertyclub.ca