

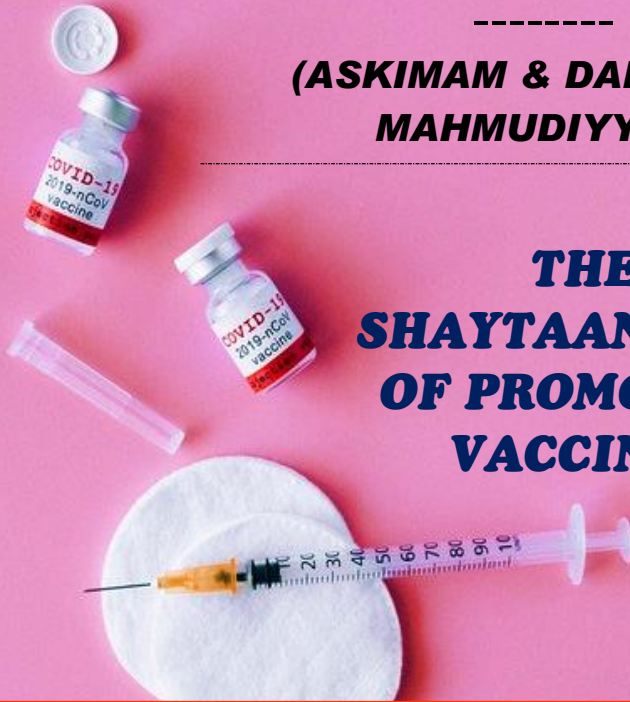
COVID-19 VACCINE

"No person will die except with the permission of Allah at the appointed time." (Qur'aan)

RESPONSE TO 'MUFTI' EBRAHIM DESAI

(ASKIMAM & DARUL IFTA MAHMUDIYYAH)

THE SHAYTAANIYYAT OF PROMOTING VACCINES



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INTRODUCTION

All praise unto Allah Subhaanahu Wa Ta'ala Who is in full control of life and death. In the Qur'aan Majeed, Allah Ta'ala has clearly stated: ***“No person will die except with the permission of Allah at the appointed time.”*** (Surah Aal Imraan – Aayat 145)

Nothing will prevent Maut at its appointed time, least of all the filth and poison called vaccines!

Durood and Salaams unto Nabi-e-Kareem Sallallahu Alayhi Wasallam who categorically prohibited the usage of Haraam substances for medicine:

“Verily Allah has sent down diseases/sicknesses/illnesses, and He has sent down the cures. He has made (available) a cure for every illness/infection/ailment, so utilize medicines/medical treatments, but do not medicate with haraam (substances).” [Sunan Abu Dawood]

“Allah did not create the shifa’ (cure) of my Ummah in substances which have been made haraam for them.” [Sunan Abu Dawood]

The prohibition is more severe when it pertains to utilizing Haraam (eg. vaccines) as a ‘preventive’ method for a future hallucinatory disease. There is simply no basis for such atheistic satanism in Islam!

SO-CALLED MUFTI EBRAHIM DESAI – ASKIMAM AND DARUL IFTA MAHMUDIYYAH

Wifaaqul Ulama South Africa had released a pamphlet entitled ‘VACCINE’ dated 8 February 2021.

Although the two-column single-page article of Wifaaqul Ulama South Africa surprisingly failed to explicitly declare Haraam the filth called vaccination, it undoubtedly discourages vaccination which is being promoted by the Mudhilleen such as the liberal so-called ‘Mufti’ Ebrahim Desai.

Consequently, ‘Mufti’ Ebrahim Desai published a 9-page article dated 13th February 2021 wherein he abortively attempted to respond to the article entitled ‘Vaccine’ published by Wifaaqul Ulama South Africa which advises caution regarding the Covid-vaccine.

Then on 22nd February 2021, the very same article was published, but this time it was 11 pages. In addition to ‘Mufti’ Ebrahim Desai’s 9-page article, the 11-page article included merely the notoriety that his view coincides with UUCSA – the so-called ‘Ulama’ who went to court to ensure the Masaajid remain closed, thus proving to one and all that they are Munaafiqs. That’s the only difference between ‘Mufti’ Ebrahim Desai’s 9-page article and 11-page article.

In his article, ‘Mufti’ Ebrahim Desai fails to present Shar’i Dalaail for his view. Not a single *daleel* (proof) was tendered for the permissibility of vaccines.

Instead, ‘Mufti’ Ebrahim Desai’s article relied upon the opinions of some senior Ulama of India – some who are known as ‘Akaabireen’. These ‘Fataawaa’ of the Akaabireen do not evince a single valid Shar’i daleel for the permissibility of vaccines, but merely reflect opinions based on unawareness of the reality of vaccination and its harms.

‘Mufti’ Ebrahim Desai and his ilk have also miserably failed to respond to the mountains of evidence which damn the potion of Iblees, viz. vaccination. The harms of vaccination have been explained and documented in thousands of pages of articles by expert western scientists and medical doctors.

The claims of the anti-vaccine scientists and experts may not be deliberately ignored or indiscriminately disregarded. In addition to such arbitrary dismissal – of the avalanche of evidence against vaccination – being devoid of substance and having absolutely no validity, swallowing the opposite view of the Shaytaani so-called ‘experts on infectious diseases’ who make satanic Taqleed of the Pharma Shayaateen, is satanically scandalous and the Shaytaani consequence of summarily rejecting the anti-vaccine facts. And this is exactly the case with ‘Mufti’ Ebrahim Desai!

Since ‘Mufti’ Ebrahim Desai fails to explicitly acknowledge the harms of vaccination and hides behind the personal opinions of the ‘Akaabireen’, his article on the Covid-19 vaccine is extremely misleading. Nabi Sallallahu Alayhi Wasallam said:

“Verily, I fear for my Ummah such Aimmah (imaams, muftis, molvis and sheikhs) who are mudhilleen (men who mislead others).”

Many ignorant people who are unaware of the filth, damage and poison of vaccines, have been misled with corrupt Baatil Fatwas. Therefore, the need is to refute that which is Baatil and to proclaim the Haqq!

Alhamdulillah, with the Fadhl of Allah Ta’ala, a refutation is presented to his misleading article as Nabi Sallallahu Alayhi Wasallam said:

“This Ilm (of the Shariah) will be borne by the pious of every successive generation. They (the Ulama-e-Haqq) will drive away from it (this Shariah) the interpolations of the deviates, the falsehood of the false-mongers and the interpretations of the ignoramuses.” (Mishkaat)

Allah Ta’ala very beautifully states: ***“We fling the Haqq on Baatil. Then it smashes its (i.e. Baatil’s) brains out. Then suddenly it vanishes.” (Qur’aan)***

1 Sha’baan 1442

15 March 2021

A – PRINCIPLES OF IFTAA

In his article, ‘Mufti’ Ebrahim Desai claims: *“Nonetheless, our Fatwa is based on principles of issuing Fatawa and drawing from the Fatawa of our Akabir (Senior) Muftis.”*

What are the *‘principles of issuing Fatawa’* for legalizing the filth called vaccination? Mf E Desai of Askimam has failed to mention the *‘principles of issuing Fatawa’* upon which his so-called ‘fatwa’ has allegedly been based. According to the *‘principles of issuing Fatawa’*, vaccination is Haraam!

Islam does not tolerate the injection of filth and disease into the human body. This injection of filth and poison into the body is **Haraam** regardless of any perceived benefits. The perceived benefits are Shaytaani hallucinations. Innumerable experts have highlighted the satanism of vaccines with irrefutable evidence – evidence which the vaccine cartel has failed to neutralize. The potion of Iblees (vaccines) and the protocols of Iblees are **HARAAM** on the basis of *Nusoo*s of the Shariah.

Vaccines are filthy and dangerous poisons. The Shariah does not permit the introduction of poisons, even if composed of halaal substances, into the body. Vaccines are not permissible preventative measures in terms of the Shariah. The harms of vaccination have

been explained and documented in thousands of pages of articles by expert western scientists and medical doctors.

Nowhere in his entire article did he mention even one principle of *Iftaa* to bolster his personal view which he baselessly claims to be a ‘Fatwa’. Nonetheless, ‘Mufti’ Ebrahim Desai should elaborate on the principles of *Iftaa* upon which he has constructed his personal opinion pertaining to vaccines. This is highly anticipated...Then Insha Allah a detailed response will be forthcoming.

B – THE ‘AKAABIREEN’

The next point upon which ‘Mufti’ Ebrahim Desai relies, is the Fataawaa of some senior India Ulama whom he terms as *Akaabir* Muftis. Before analyzing the Fataawaa, the following points are important:

A – Merely citing the names and opinions of recent senior Ulama from India or any part of the world is not sufficient. The *Akaabireen* (senior Ulama) themselves are not ‘dalaail’.

Furthermore, in all the ‘Fatwas’ quoted by ‘Mufti’ Ebrahim Desai, there is not a single *daleel* (proof) mentioned in the respective Fatwa Kitaabs of the ‘Akaabireen’. The views of the senior Indian Ulama

on the topic of vaccination are not substantiated with Shar'i *dalaa-il* (proofs).

In fact, the 'Akaabireen' themselves have not tendered any 'daleel' for the permissibility of vaccines. For a Fatwa to enjoy the force of the Shariah, *dalaa-il* of the Shariah are imperative. And this is what is lacking in all the erroneous 'Fatwas' quoted by 'Mufti' Ebrahim Desai.

B – Whilst the Akaabireen are very honourable to us and deserve the greatest amount of respect, they are after all human beings. They also made mistakes. They were not infallible. Thus, their views cannot be randomly hoisted on one and all. 'Juniors' have all the right to respectfully disagree with their 'seniors' when their seniors are clearly in error.

It should also be remembered that every good horse slips. The errors of great Ulama and great Muftis never diminishes the status of the luminary in the least. May Allah illuminate their graves. Aameen.

C – Whilst the Ulama quoted by 'Mufti' Ebrahim Desai are great Ulama and 'Akaabireen' (i.e. literally speaking senior Ulama), it has to be clarified that we do not blindly follow any of them despite our love for all of the great luminaries of the Ulama-e-Deoband who were amongst the staunchest on the Sunnah and amongst the greatest defenders and disseminators of

the Deen during their era. Our Taqleed is of the Hanafi Math-hab as enshrined in the Kutub of Fiqh.

D – In addition to the absence of Shar’i *dalaa-il*, it is clear that the Akaabireen were totally unaware of the reality of vaccination. They were completely uninformed regarding the harms and devastating effects of the vaccines. Had they known the relevant facts, their Fatwas would have definitely been against vaccination. Thus, the views of these great Ulama should be set aside without criticizing them.

Whilst we wish to set the erroneous views of the Akaabireen aside without even commenting on them, we are constrained to comment and shed adequate light on their ‘Fatwas’ of permissibility because ‘Mufti’ Ebrahim Desai is hoodwinking the masses by exploiting the views of the ‘Akaabireen’ as an expedient for the satanic permissibility of vaccines.

When a Mudhil lacks *daleel* (proof) for his view, then he adopts stratagems and tricks to mislead. One of their favorite tricks is to hide behind the errors of some Ulama. In this case, ‘Mufti’ Ebrahim Desai is manipulating the erroneous views of some ‘Akaabireen’ for promoting the *rijs* called vaccines.

Accordingly, ‘Mufti’ Ebrahim Desai stated: “*Our Akabir Muftis of the past did experience various types of viruses such as Polio, Chickenpox, and Cholera in*

their era. They permitted taking vaccines to overcome these viruses. ”

Had these Akaabireen known the poisonous and filthy ingredients of the polio or chickenpox vaccine for example, and the harms these vaccines have wrought on innocent children, it would have been impossible for them to aver the permissibility of vaccines.

To ‘Mufti’ Ebrahim Desai and his cronies, we say: Please quote the *dalaa-il* of the Akaabireen or the proofs of whoever else you are relying on and not just ‘opinions’ which are bereft of Shar’i *dalaa-il*.

The following is a dispassionate evaluation of the ‘Fatwas’ (actually opinions) quoted by ‘Mufti’ Ebrahim Desai.

(1) FATAAWAA MAHMOODIYYAH

The first ‘Fatwa’ quoted by the Askimam clique is Fataawaa Mahmoodiyyah.

The view of Mufti Mahmoodul Hasan Gangohi (Rahimahullah) is presented as follows: *“Just as it is permissible to adopt permissible means of cure to protect oneself, this (taking injection against plague and chickenpox) too is also permissible.”*

Response: With due regard for Mufti Mahmood Saheb's status, we do not make Taqleed of him. Furthermore, his opinion in Fataawaa Mahmudiyyah is heavily flawed for several reasons:

a) It is clear and evident that Mufti Mahmood Saheb was totally unaware of the reality of vaccination. Mufti Mahmood Saheb did not know what a vaccine is all about. Had Mufti Mahmood Saheb been aware of the untold harm and damage vaccines cause to a person's health, then it would not be possible for the honourable Mufti Saheb to tender the view of permissibility. The introduction of harmful and poisonous filth into the body is **strictly prohibited** by the Shariah. And no moron will be able to refute this!

If the Ulama-e-Soo (evil Ulama) argue that vaccination does not contain harmful and poisonous filth, then they are plain stupid, immaterial of how many they may be. Innumerable kuffaar experts and scientists have proven the harms and filth of the vaccines. But the Mudhilleen simply ignore the deluge of evidence which has exposed the plot – evidence which senior Ulama from India and the 'Akaabireen' were totally unaware of!

b) It is also a fact that Mufti Mahmood Saheb was unaware of the ingredients of vaccines. Let us take the chickenpox vaccine for example. It is known as Varivax. Here are some of its ingredients:

☒ varicella live virus neomycin phosphate

- ☒ monosodium glutamate (MSG)
- ☒ processed gelatin
- ☒ urea
- ☒ fetal bovine serum
- ☒ guinea pig embryo cells
- ☒ albumin from human blood
- ☒ human diploid cells from aborted fetal tissue

After reading the above ingredients, do you honestly think Mufti Mahmoodul Hasan Gangohi Saheb would have been so audacious to halaalize such vaccine filth if he was aware of simply one – just one – of the above-mentioned ingredients???

For the edification of the Askimam characters, it must be emphasized that these ingredients are not ‘assumptions’. These are facts which stare the Askimam vaccine najaasat halaalizers in their faces.

c) Mufti Mahmood Saheb speaks of ‘permissible means’. Nobody says that it is Haraam to adopt ‘permissible means’. There is no contention on this issue. The Ulama who proclaim the *hurmat* of the potion and protocols of Iblees, utilize all the lawful means, ways and agencies permitted by the Shariah for the acquisition of needs. However, the satanic vaccines are not ‘permissible means’.

Vaccines have been proven to be disastrously destructive and ruinous, thus haraam. This potion of Shaytaan can never be regarded as medicine. It’s a

combination of filth and poison. Thus, even if all the ingredients are ‘halaal’, it will not be permissible to inject the devil’s poison into the body.

d) Mufti Mahmood Saheb makes mention of adopting *permissible means of cure to protect oneself*. The talk of ‘cure’ in relation to vaccination is fallacious. So-called ‘treatment’ with vaccines is **Haraam** for the simple reason that vaccination is the opposite of medicine. It is filth and poison which injure, maim and kill. It causes diseases to flourish. Vaccines do not come within the scope of ‘medicine’! Thus, it is erroneous to claim that vaccines are a permissible means of cure to protect oneself.

The issue is not just about an ‘injection’. It is not the same like when a SICK person goes to the doctor for an injection (NOT VACCINATION) due to a flu or cough.

Vaccination in simple terms is the introduction of disease in the human body with the hope of the body later gaining the ability to fight the disease should it rear its head. Walene James says:

VACCINES IN GENERAL

“The theory of vaccination states that by giving a person a mild form of a disease via the use of immunizing agents, specific antibodies are produced that will protect the organism when the real thing comes along. "This sounds simple and

plausible enough except that it doesn't quite work that way," Dr. Alec Burton reminds us. For instance, vaccines, of themselves, as we shall discover, produce a variety of illnesses, some of which may be considerably more serious than the disease for which they were given. These vaccine-induced diseases may involve "deeper structures, more vital organs, and [have] less of a tendency to resolve spontaneously. Even more worrisome is the fact that they are almost always more difficult to recognize," Dr. Richard Moskowitz points out.

Besides introducing foreign proteins, and even live viruses into the bloodstream, each vaccine has its own preservative, neutralizer, and carrying agent, none of which are indigenous to the body. For instance, triple antigen DPT (diphtheria, pertussis, and tetanus) contains formaldehyde, mercury (thimerosal), and aluminum phosphate (*Physicians' Desk Reference*, 1980), any of which are toxic to the human body. The packet insert accompanying the vaccine (Lederle) lists aluminum potassium sulfate, thimerosal (a mercury derivative), and sodium phosphate—all toxic to the human body. The packet insert for the polio vaccine (Lederle) lists monkey kidney cell culture, lactalbumin hydrolysate, antibiotics, and calf serum. The packet insert (Merck Sharp & Dohme) for the **MMR** (measles, mumps, and rubella) vaccine

lists chick embryo and neomycin, which is a mixture of antibiotics. Chick embryo, monkey kidney cells, and calf serum are foreign proteins, biological substances composed of animal cells, that, because they enter directly into the bloodstream, can become part of our generic material. (Normal animal cells-as well as plant cells-shed DNA [deoxyribonucleic acid], which is then taken up by other cells in the body.) These foreign proteins as well as the other carriers and reaction products of a vaccine are potential allergens and can produce anaphylactic shock. "Any person who dies within 15 minutes to a day after taking the vaccine could be suffering from a personal sensitivity, an allergy to the vaccine whjch is unrelated to the 'dead' viruses therein, most researchers concede." This statement was made in reference to the swine flu vaccine; however, the principle applies to all vaccines." [IMMUNIZATION – THE REALITY BEHIND THE MYTH – PAGE 9]

The difference between vaccines and normal injections is thus clear; the former is the administering of a disease into the body to prevent a future hallucinated disease, whilst the latter is the administering of a medication to treat an already present sickness.

Mufti Mahmood Saheb's answer refers to a normal doctor's 'injection' which is administered to an ill

person – not a vaccine. If we have to apply Mufti Mahmood Saheb's Fatwa to vaccination, then his Fatwa is undoubtedly Baatil as it portrays jahaalat in terms of the reality of vaccination. Let Mf Ebrahim Desai elaborate on the ingredients of the chickenpox vaccine! Let him also explain to the whole world the harms of the chickenpox vaccine, if he is truly an honest person!

There is simply no capital which the Mudhilleen may gain from Mufti Mahmood Saheb's opinion. It is palpably clear that Mufti Mahmood Saheb was unaware of the reality of vaccination, totally unaware of its ingredients, absolutely oblivious of its harms and merely issued his opinion as if it relates to a normal injection.

e) The reference in Fataawa Mahmoodiyyah refers to '*Tadaawi*' (treating sickness). Vaccines are administered to healthy people! 99% of the people do not have covid. Hence, it is senseless and ludicrous to even speak of '*Tadaawi*' when it comes to vaccines. Tadaawi refers to treating illness. The idea of '*tadaawi*' for healthy people is silly. When a person is healthy, then for what reason must he take a vaccine which contains disease, poison and filth? It simply does not make any sense. A person does not consume Panado before a headache. It is taken after a headache as a means for Shifaa. Shifaa is sought from Allah after one is afflicted with a disease.

Furthermore, we are sure that since the morons are too stupid to convince us of vaccines coming within the scope of ‘medicine’, they are likely to argue vaccines from the angle of ‘protection’. But, this too is incorrect. Vaccines do not offer protection from disease. And even if ‘protection’ has to be conceded due to concocted figures, then too, the fact is that Islam does not permit the introduction of a disease into the body. Introduction of disease whether in healthy or sick persons is ***Haraam***.

Consider the varivax vaccine for chickenpox. The very first ingredient listed is the disease itself known as *varicella live virus neomycin phosphate*! Do these present-day *Mujrim* (hooligan) so-called Muftis (**not referring to Akaabir for E Desai’s edification**) and so-called Sheikhs even have an idea of the harms and sources of just this one ingredient? Yet, they are in the forefront to sanction the potion of Iblees, i.e. the *rijs* called Vaccines.

(f) Neither is Mufti Mahmoodul Hasan Gangohi Rahimahullah a *daleel* (proof) in the Shariah, nor did Mufti Mahmood Saheb present any *daleel* for his view.

The above sufficiently proves that the ‘Fatwa’ of Mufti Mahmoodul Hasan Gangohi Rahimahullah belongs to the domain of personal opinion known as ‘*raai*’ which has to be incumbently set aside. It is not permissible to rely on such a flawed opinion.

(2) DARUL ULOOM DEOBAND

The next ‘Fatwa’ quoted by ‘Mufti’ Ebrahim Desai is Darul Uloom Deoband’s view on polio drops.

Their view is as follows: *“The ruling applicable to other forms of medication is similarly applicable to injections. As such, those medications which are in and of themselves permissible may be adopted for purposes of cure and treatment. (Darul Iftaa Deoband, Fatwa #11333)”*

Response: 1) Whatever we have written in response to Fataawa Mahmoodiyyah, is also applicable to the very recent ‘fatwa’ of Darul Uloom Deoband.

2) The ruling of other forms of medication is not at all applicable to vaccines. In terms of the Shariah, vaccination is not a form of medication!

For argument’s sake, even if we have to act like stupid and assume that vaccination is ‘medicine’ or it is classified as a ‘remedy’, then it will fall under Haraam medicines and Haraam remedies. But then too, a person may not adopt a haraam remedy/medicine for a future imaginary disease. Healthy people – people not afflicted with disease, may not submit to a haraam remedy as a ‘preventive’ method for a future hallucinatory disease.

However, abstention from vaccines is *Waajib* because these substances are not medicine, not even haraam medicine. **Vaccines are not medicines.** They are satanic filth and poison. Aggravating vaccination further is the injection of filth and poison into the body for an assumed future disease.

3) Darul Uloom Deoband is speaking in this specific ‘Fatwa’ about ‘injections’. Vaccination is not just an injection. We are not saying that injections are Haraam. We are saying that vaccination is Haraam. It is clear that those Ulama who opined permissibility of vaccination, were totally unaware of what vaccines are and what they constitute! They were totally unaware of the harms of vaccination.

4) Darul Ifta Deoband stated: *“As such, those medications which are in and of themselves permissible may be adopted for purposes of cure and treatment.”*

Neither is vaccination permissible nor does it contain permissible ingredients. Just consider some of the ingredients of the polio vaccine:

- 3 types of polio viruses
- neomycin
- Streptomycin
- polymyxin B
- formaldehyde

- 2-phenoxyethanol
- continuous line of monkey kidney cells
- calf bovine serum albumin
- M-199 medium

Allah Ta'ala knows best what all of this rubbish is that they put into the vaccines! 3 types of polio viruses in one vaccine! Subhaan-Allah! Besides the poisonous chemicals which we don't understand, calf bovine and monkey kidney cells convinces us that vaccines are filth. We haven't even commenced a discussion on the harms of all the toxins and poisons these vaccines contain which are termed as 'excipients' whose harms the Pharma Shayaateen are deliberately concealing from the public. Instead, they satanically justify the presence of the poisonous *excipients*!

The ingredients (excipients) alone, without even elaborating on their medically-proven harms, are extremely offensive. It is clear that the 'Muftis' who have issued the Fatwa of permissibility regarding vaccines, are either unaware of the reality of vaccination or they have not objectively studied the research which damns vaccination.

(5) Furthermore, Darul Uloom Deoband did not present any *dalaa-il* for their view. Their view is merely their personal opinion. Thus, it can be comfortably said that the Fatwa of Darul Uloom

Deoband regarding the permissibility of vaccination and polio drops, is undoubtedly *baatil*.

(3) FATAAWAA RAHEEMIYYAH

The third ‘Fatwa’ quoted by ‘Mufti’ Ebrahim Desai is the Fatwa of the honourable Mufti Abdur Raheem Lajpuri (Rahimahullah). His view is as follows:

“There is no problem (in taking the injection). It is permissible to take preventative measures as a means of cure. Only that which Allah decrees will occur. (Fatawa Rahimiyyah Volume 10, Page 168 - Dar Al-Isha’at)”

Our comments: There is a problem with the cholera vaccine. The Shariah does not permit the introduction of poisons, even of halaal substances, into the body. Vaccines are not permissible preventative measures in terms of the Shariah. The issue is not just about a ‘needle’ or an ‘injection’. The issue which we are discussing is not the ‘injection’ administered to a sick patient. But rather, the discussion pertains to ‘poisonous injections’, i.e. vaccinations.

If the questioner had to ask about *poisonous injections*, we are sure that the answer of the honourable Mufti Saheb would have been that of prohibition.

In addition to being unaware of the harms of vaccination, Mufti Lajpuri Saheb did not tender any *daleel* for his view. For a Fatwa to be valid, it needs to be backed with Shar'i *dalaa-il* (proofs).

The solution to these diseases are not vaccinations. Cholera is linked to poor drinking water, najaasat and not following the laws of Tahaarat. After turning unto Allah Ta'ala and repenting for one's sins, eating halaal Tayyib food and observing Islam's Divine Laws of Tahaarat are amongst the practical solutions to these diseases.

Just like how the primary element in all vaccines is the virus/disease itself, the cholera vaccine contains the cholera virus also! Thus, it is very far from the ideal or realistic way to prevent something extremely speculative by introducing toxic substances into the body.

Only what Allah decrees, will occur. *Nabi Sallallahu Alayhi Wasallam* said: ***“Allah did not create the shifa’ (cure) of my Ummah in substances which have been made haraam for them.”*** [Sunan Abu Dawood]

(4) IMDAADUL FATAAWAA

The next ‘Fatwa’ quoted is the view of Hadhrat Moulana Ashraf Ali Thanwi (Rahimahullah). Moulana Thanwi’s view is as follows:

“You are correct. The original view of the Hanafi Madhab is that it is impermissible to use medication which contains haram substances. However, the present day Ulama have permitted the use of Haram substances for medicinal purposes.

Therefore, if anyone is afflicted (with such a disease which requires him to use an impure substance), he will not be held accountable. (Imdad Al-Fatawa Volume 4, Page 208 - Maktabah Darul Uloom Karachi)”

Our comments: Moulana Thanwi Rahimahullah was totally unaware of the harms of vaccination. Had Hadhrat Thanwi Rahimahullah been aware of the poison and filth called vaccines, then his Fatwa would definitely been that of prohibition.

Furthermore, Moulana Thanwi Saheb never understood also the reality of vaccination. Vaccination is administered to healthy people. But, Moulana Thanwi Rahimahullah speaks of ‘Tadaawi’. ‘Tadaawi’ is applicable to people who are ill. The Mas’alah of ‘Tadaawi Bil Haraam’ is for people who are ill.

In fact, Moulana Thanwi Saheb explicitly refers to an afflicted person. Accordingly, Moulana Thanwi Saheb stated: “*Therefore, if anyone is **afflicted** (with such a disease which requires him to use an impure substance), he will not be held accountable.*”

But vaccination is injected to those who are not afflicted with the disease. The filthy vaccines are used by the satanists as a ‘preventative measure’! When it is used as a ‘preventative measure’ and it is not applicable to sick people, how can the Masaail of *Tadaawi* (medication) even be applied, let alone the mas’alah of ‘*Tadaawi Bil Haraam*’?

Vaccination is poison. It is filth, It is harmful, It injures, It kills. It destroys the health of a person. It is NOT medicine. Hence, the laws of *Tadaawi Bil Haraam* are not applicable to it. Further on in this treatise, is a more detailed discussion on ‘*Tadaawi Bil Haraam*’.

Tadaawi Bil Haraam is a last option for an ill person. With regard to vaccinations, the Shayaateen have chosen this poisonous filth as the pre-emptive option for a healthy person. Just look at the differences! It is thus very incongruent to apply the laws of ‘*Tadaawi Bil Haraam*’ to vaccination.

Hallucination is linked to vaccination. The pro-vax characters (like Askimam & Co.) hallucinate like atheists that if a person is not inoculated, the person

will become ill. Hence, they speak of preventative measures. The future illness is not *Yaqeen* (absolute or certain). The prevention of illness is also not *Yaqeen*. The assumed ‘cure’ of vaccination is a mere hallucination. But, the poisonous and harmful nature of vaccination is *Yaqeen*. It should not be difficult to understand that vaccination is undoubtedly Haraam!

It should also not be hard to understand that Moulana Thanwi Saheb was unaware of the reality of vaccination. This is besides the fact that no *daleel* was presented to refute the harms for vaccination nor was any *daleel* provided for the permissibility of vaccination.

(5) BINORI TOWN’S ‘YESTERDAY’ FATWA

The next ‘Fatwa’ which the Askimam clique have relied upon, is Binori Town’s ‘Fatwa’ of ‘yesterday’. Their Baatil Fatwa is as follows:

“If the injection is taken as a preventative measure and as a form of treatment, then the Shar’i ruling is that if an expert doctor confirms that the vaccine is not harmful, it is proven to be beneficial, based on experience, and that there is no harm or impure ingredients present in the vaccine, then it will be permissible.

Similarly, if the injection is administered on a person who has already contracted the virus, and an expert doctor confirms that the vaccine is not harmful and there are no Haram ingredients present in the vaccine, then it will be permissible.

If there are haram ingredients present in the vaccine and an expert doctor states that there is no Halal alternative and that the treatment is confined only to that Haram vaccine, and it is proven beneficial through experience, then as a last resort, such a vaccine may be used as a form of treatment only according to need. (Darul Iftaa Binori Town Fatwa #200017)”

Response:

1) The Muftis of Binori Town who issued this lopsided so-called ‘Fatwa’ are behaving like ostriches with their heads stuck in the ground! They are utterly vacuous and extremely uninformed in terms of vaccination, hence the ‘if-if-if’ in their whole Fatwa!

The harms of vaccination are indisputable. Let Mufti Ebrahim Desai, the present-day Muftis of Deoband, Binori Town, Karachi, UUCSA and even the Munaafiq doctors of IMASA, etc. respond and academically refute with scientific and medical facts all the anti-vaccine evidence presented by EXPERT DOCTORS and SCIENTISTS!!!

More than thousands of studies have been conducted on vaccinations. They all have exposed the filthy plot of vaccination. The books written against vaccination runs into thousands of pages. Just one recent book at our disposal which was published in 2020 is alone more than 700 pages against vaccinations. Most, if not all the research comes from the medical fraternity themselves!

Since the 1800's until today, intelligent doctors and scientists have condemned vaccination. Vaccination is the 'poisoned needle'.

The claim that ingestion of poison and filth (i.e. vaccinations) does not cause harm, is rejected with all the contempt it deserves. Why has the pro-vax group failed to adequately respond to all the evidence which damns vaccination???

They only dismiss the evidence without any rationality whatsoever. Satanism is incapable of defending the filth called vaccination. Why are the Pharma thugs impotent when it comes to refuting all those doctors and scientists who have condemned vaccination and laid bare the myth called vaccination?

2) Vaccination is not a form of treatment as alleged by the Muftis of Binori Town. Since it is not a form of treatment, but rather poison and filth, its *hurmat* (prohibition) is confirmed.

3) According to the expert doctors and even current facts and statistics, vaccination is harmful without any doubt whatsoever. Experience has proven vaccination to be extremely harmful.

4) Binori Town Muftis are in the dark as far as the reality of vaccination is concerned. They are unaware of its harms. They are also completely oblivious of its ingredients. There is simply no need for the vaccine.

5) The question of Halaal alternatives, i.e halaal vaccines is like spitting on the moon. All vaccines are Haraam! There are no Halaal vaccines! The Binori town Muftis should present *dalaa-il* for their views. Mere opinion does not refute the facts which have proven vaccines to be dangerous and harmful!

6) In terms of Binori Town's Fatwa which has so many 'if's' in it, it can be comfortably deduced that vaccination is Haraam based on the following:

- ✓ Vaccination is not a treatment.
- ✓ Vaccination is harmful.
- ✓ Vaccination does not prevent disease.
- ✓ Vaccines contain filth and poison.
- ✓ Expert doctors have condemned vaccination.
- ✓ Vaccines contain Haraam ingredients.
- ✓ There is no need for a vaccine!

(6) KIFAAYATUL MUFTI

The next ‘Fatwa’ quoted is from Mufti Kifaayatullah (Rahimahullah). Regarding injecting animals, Mufti Kifaayatullah Saheb states:

“If the injection is known to be beneficial after being tried and tested, then it will be permissible. (Kifaayatul Mufti Volume 9, Page 149- Dar Al-Isha’at)”

Comment: It is clear that Mufti Kifaayatullah Saheb was unaware of the poisonous nature of vaccines. He was also totally unaware of the harms of vaccination. Mufti Kifaayatullah Saheb also merely expressed his opinion without presenting a *daleel* for the alleged permissibility of vaccines and without presenting a thorough explanation on vaccination. The vaccine injection is undoubtedly harmful. Thus, in terms of Mufti Kifaayatullah’s reasoning, vaccination is Haraam.

SUMMARY

‘Mufti’ Ebrahim Desai then states: *“It is clear from the above Fatawa of our Akabir Muftis that it is permissible to take injections/vaccinations even though they are simply a preventative measure.”*

Response: From the detailed response above, the following facts were revealed:

1. The ‘Akaabir’ Muftis were totally unaware of the reality of vaccinations. They were most probably referring to normal injections generally administered to ill people.
2. The ‘Akaabir’ Muftis were unaware of the harms of vaccination. Hitherto, no one has been able to refute the evidence which condemns vaccination. A ‘Fatwa’ of permissibility clearly illustrates that the ‘Mufti’ is not aware of the harms of vaccination! In the case of Mufti Ebrahim Desai and his ilk, they are Mudhilleen because they are not interested in acknowledging the truth regarding vaccines. At the end of the day, they forget to realize that the truth prevails: **vaccination is Haraam**.
3. The ‘Akaabir’ Muftis erroneously regarded vaccination to be ‘medication’ due to lack of adequate knowledge in this regard. Germane to the Akaabireen, their talk of ‘injections’ are very vague and do not adequately qualify to be applied to vaccination.
4. The ‘Akaabir’ Muftis were also unaware of the Haraam ingredients of the vaccines.
5. The ‘Akaabir’ Muftis were unaware that vaccination is actually injecting oneself with poisons, toxins and also the virus and the

disease itself for preventing an imaginary future disease!

6. The ‘Akaabir’ Muftis have erred in their Fataawa. Thus, their Fataawa will be compulsorily set aside. It is not permissible to quote their incorrect ‘Fatwas’ which were based on their limited resources and inadequate knowledge pertaining to the reality and harms of vaccination.
7. If for argument’s sake, someone avers that the ‘Akaabir’ Muftis were aware of the Haraam ingredients, and they knew the harms of vaccination. Despite all of this, they ignored all these facts just like how Mufti Ebrahim Desai is behaving and issued the ‘fatwa’ of permissibility, then too their erroneous ‘Fatwas’ will still be set aside. It is Haraam to follow a Baatil Fatwa!
8. And the main point is that just like ‘Mufti’ Ebrahim Desai has not presented even a shred of proof for the permissibility of vaccines, even those whom he has quoted such as the ‘Akaabir’ Muftis – they all did not present a single Shar’i *daleel* (proof) for the permissibility of vaccines!

C – TADAAWI BIL HARAAM

As far as Tadaawi bil Haraam (*treating sickness with haraam substances*) is concerned, this principle does not apply to vaccines. The reason for it is simple.

Vaccines contain a host of filth, poisons and haraam substances. Furthermore, assuming that the devil's potion does not contain any haraam ingredients, then too, the poison content and the extremely harmful health consequences render it haraam. In terms of the Shariah, vaccines are not classified as medicine. The principle of *Tadaawi bil Haraam (treating sickness with haraam substances)* therefore does not apply to vaccines.

Nevertheless, even if we go further and elaborate on Tadaawi Bil Haraam, then too vaccines will be Haraam. There are three essential conditions for the permissibility of medical treatment with haraam substances:

- (1) The *haajat (need)* is real. It is a life-threatening situation or the patient suffers severe pain.
- (2) The total unavailability of a halaal medicine.
- (3) Its *shifa'* (curing property/ability) must be confirmed by an expert Muslim physician.

As far as (1) is concerned, there is simply no need to take the vaccine. So it is really pointless and absolutely imprudent for Mf Ebrahim Desai to state: “In fact, according to the above Fatwa of Hadhrat Moulana Ashraf Ali Thanvi (Rahimahullah) “Ulama have permitted the use of Haram substances for medicinal purposes” (If there is a need and no adequate alternative). (*Imdad Al-Fatawa Volume 4, Page 208 - Maktabah Darul Uloom Karachi*).”

Even Mf E Desai states ‘if there is a need’. Now what is the need for the vaccine? It is not a life-threatening situation. There is simply no emergency. Nowhere in his entire article has Mf Ebrahim Desai explained the hallucinated need! What silly points is Mf Ebrahim Desai trying to score? The need is to abstain from the vaccine. Thus, even in terms of Tadaawi Bil Haraam, vaccines remain Haraam. Even the principle of Tadaawi Bil Haraam does not render vaccines temporarily permissible.

As far as (2) is concerned, there are halaal medicines for those who are ill and for those who have covid flu. Thus, the talk of a vaccine is superfluous.

As far as (3) is concerned, vaccines cause the very diseases which they are alleged to eliminate. Nevertheless, Mufti Mahmood Gangohi Saheb has explained the issue of an expert Muslim physician as follows: **Deeni**, experienced, and expert physician.

Now how Deeni and how pious are the ‘experts on infectious diseases and microbiologists’ whom the zig-zag Darul Ifta ‘Mahmoodiyyah’ has met? Explain their level of their piety. Explain their experience? Are they Munaafiqs or not? Are they experts? Are they part of the IMASA cartel of Munaafiqs, Zindeeqs and Fussaaq? Are they part of the Pharma Satanists? How strict are they on Hijaab in their surgeries? What was their view on closing the Masaajid, etc. etc.? We await a detailed response from E Desai and his Askimam-Darul Ifta Mahmoodiyyah cronies on this issue.

The Shariah does not condone haraam substances for medical treatment. The prohibition is greatly emphasized with regard to people who are healthy and free of disease. The devils of immunization inject filth and poison into healthy people in anticipation of them contracting future diseases. This is the *ta’leem* of Iblees.

Tadaawi Bil Haraam (haraam medicine) is permissible only when afflicted by a disease and if no halaal remedy is available. This is what the Shariah says.

The principle of *Tadaawi bil Haraam (treating sickness with haraam substances)* therefore does not apply to vaccines. There is no capital for these bootlickers in this principle which they have

mismanipulated in an abortive bid to halaalize the devil's potion.

D – PERTINENT ISSUES

‘Mufti’ Ebrahim Desai stated in response to the questioner: *“All the pertinent issues raised by you are valid concerns and will be, Inshallah, resolved by practicing on the Fatawa of our Akaabir Muftis;...”*

There is simply no barakah when one practises on the erroneous ‘Fatwas’ of the Akaabir Muftis. Holding onto the errors and obscure views of the ‘Ulama’ is extremely dangerous for one’s Imaan. The Fatwas of the Akaabireen indicating the ‘permissibility’ of vaccines are undoubtedly Baatil. They have to be incumbently set aside. It is not permissible to hold onto them.

The issues raised by the questioner are:

- Mufti Razaul Haq’s view
- Mufti Salejee’s view (Isipingo) and the measles vaccine
- Cigarettes
- Haj, Umrah & Tabligh journeys
- Tawakkul

We now proceed with a response to each of the above.

1 – MUFTI RAZAUL HAQ – DARUL ULOOM ZAKARIYYA

The questioner stated: *“We observe and have been informed that Mufti Radhaul Haq Saheb of Darul Uloom Zakariyyah has issued a fatwa to take medication as a preventative measure (Fatawa Darul Uloom Zakariyyah, Volume 6, Page 768).”*

Response: Mufti Razaul Haq states on page 798: *“If by experience it is established that the benefits of the injection are more than the harms, then a person may take the injection. In fact, he should take it. However, if the harms are confirmed, then one should not take the injection.”*

Mufti Razaul Haq also quoted Mufti Kifaayatullah Saheb. Our comments are as follows:

1. The ‘Fatwa’ of Darul Uloom Zakariyya shows that the Mufti Saheb was unaware of the harms and ingredients of vaccination.
2. The Mufti Saheb clearly states that if the harms are confirmed, then one should not take the vaccine. Vaccination is undoubtedly harmful.

There is no capital for the pro-vaxxers from this particular ‘Fatwa’ of Mufti Razaul Haq!

The harm of vaccines is not hypothetical or imaginary. The disastrous consequences of vaccines are proven and stand out as clear as daylight. An abundance of expert evidence debunks the claim of benefit in vaccines.

The harm of vaccines is not in the category of *wahm* (imaginary, hallucinatory or merely hypothetical). There is certitude in the harmful consequences of vaccines. The evidence is overwhelming. Only morons or those who have a sinister agenda to peddle, irrationally deny this evidence.

3. Taking medication and resorting to permissible preventative measures are not at all disputed. However, vaccines are not permissible preventative measures in terms of the Shariah.

4. We already commented on the view of Mufti Kifaayatullah Saheb. All the Fatwas of the Akaabireen quoted by present-day Ulama to justify vaccination, are based on the Akaabireen being totally unaware of the harms and constituents of the *rijs* called vaccines.

2 – MUFTI SALEJEE – DARUL ULOOM ISIPINGO

The next argument is: *“Also, Mufti Salejee Saheb of Isipingo Madrasah issued Fatwa to take vaccination in general and for Measles.”*

Our comments are as follows:

1) There are several Fatwas issued by Mufti Salejee on this issue. We found seven on his website. But, not a single one gives blanket permission. In fact, the latest one which we found, states the following:

“Because of the conflicting views on this subject the better thing is to avoid it. If you have to do then in order to guard yourself against the consequence I suggest that you seek Allah Ta`ala's pardon.”

2) The ‘Fatwa’ which states that *‘it is permissible provided there is nothing impermissible or impure in the vaccination.’*, is not totally correct. Whilst vaccines which contain any impermissible or impure substance are not permissible, it is incorrect to imply that there are permissible vaccines. All vaccines are Haraam! There are no alternative halaal vaccines!

3) In one answer, Mufti Salejee states: *“If it can be medically proven that there is no harm and no after effects then it is permissible.”*

The harms and disastrous consequences of vaccination are medically proven! Thus, vaccination is impermissible!

3 – CIGARETTES

Trying to legalize the filthy vaccines on the basis of cigarettes, the questioner states:

“The article (of Wifaaqul Ulama SA) differentiates between Fiqhi aspects of the ingredients and safety aspects. Muftis give permission to buy and sell cigarettes which are cancerous and regard the sale of cigarettes as merely undesirable. A brief visit on some local websites will reflect this fatwa. Why is the sale of cigarettes merely undesirable when it causes death, while vaccines are an attempt to save lives, but discouraged (seems short of saying not permissible/Haram)?”

Response:

1. Cigarettes are Haraam. The Muftis who give permission to buy and sell cigarettes are morons. They are not muftis. They are rubbishes!
2. Cigarettes are cancerous. How then can a genuine Mufti regard the sale of cigarettes as merely undesirable? The sale of cigarettes is Haraam! Any other view is rejected as Baatil!

3. The local websites which state that the sale of cigarettes is merely undesirable, are the websites of morons pretending to be Muftis. It is downright stupid and an insult to intelligence to claim that cigarettes and the sale of such filth are permissible!

4. The websites of ALL the Ulama-e-Haq state that cigarettes are Haraam. Selling, buying and dealing in cigarettes are all Haraam acts. They are not merely undesirable. They are prohibited in Islam. Any view which falls short of stating the impermissibility of cigarettes, is the view of Shaytaan and his followers! The Molvis who claim that cigarettes cannot be declared as Haraam are all Ulama-e-Soo misleading the Ummat!

5. The following question is incongruent: *Why is the sale of cigarettes merely undesirable when it causes death, while vaccines are an attempt to save lives, but discouraged (seems short of saying not permissible/Haram)?*”

Cigarettes cause death. The sale of cigarettes are undoubtedly Haraam. The claim that vaccines are an attempt to save lives, is ludicrous and moronic. The evidence of the medical experts debunks the myth that vaccines are an attempt to save lives. Vaccines are not just discouraged. Vaccines are Haraam. Only the Ulama-e-Soo will abstain from declaring vaccines Haraam! The only ones who justify their abstention from using the word Haraam, are the Mudhilleen!

4 - HAJJ, UMRAH AND TABLIGH JOURNEYS

The questioner posed the following specious argument to which ‘Mufti’ Ebrahim Desai has agreed:

“There is talk of vaccine passport which will have major implications on international travels. If the vaccine is Haram, what should we do for Haj and Umrah? What will happen to the international noble work of Tabligh? What about the businessmen that travel abroad for business related issues?”

Response:

1) Vaccination is Haraam! There is no question of ‘*if the vaccine is Haraam*’! There is no need to introduce ‘ifs’ when speaking about the impermissibility of vaccines.

2) If any other Haraam act is imposed upon you, what will you do for Haj and Umrah? If Zina has to be perpetrated, what will you do for Haj and Umrah? Will you justify Zina? Will you introduce ‘if’s into your argument by stupidly asking ‘*if Zina is Haraam, what should we do for Haj and Umrah?*’

Just like how adultery, pork, liquor, etc. are Haraam, in the same way vaccination is Haraam!

3) The Haj and Umrah journies do not make the vaccine Halaal!

4) Umrah is a Nafl journey. Tabligh Jamaat journeys are not Fardh. They are merely permissible if no Haraam act is committed. But, nowadays, due to the Fitnah and the amount of sin perpetrated on these lengthy journeys, even Nafl Umrah and Tabligh holidays are not permissible for those who have to undertake sinful journeys.

5) When travelling was banned due to the plandemic, then what happened to the international noble work of Tabligh? Doing Tabligh overseas is not incumbent. Do Tabligh locally. The best Tabligh in this era and germane to our topic is to disseminate the Haq, i.e. openly state that vaccination is Haraam!

6) Vaccination is Haraam whether you are a patient, doctor, Mufti, accountant, lawyer, businessman, etc. It is Haraam for businessmen travelling abroad to take the vaccine!

5 – TAWAKKUL

Introducing a red herring argument, the questioner asks: *“We would like to clarify, is taking the vaccine against Tawakkul?”*

The Tawakkul dimension has been introduced as a red

herring to deflect the focus from the Shariah – from the haraam protocols and haraam vaccines.

The Ulama-e-Haqq who are opposing and damning the devil's protocols and the potion of the devil, i.e. vaccines, are not stating the case of the Shariah on the basis of Taqwa/Tawakkul. The basis for the prohibition is the *Zaahiri* Law of the Shariah, which does not touch on the Taqwa factor.

The Fatwa of *hurmat*, i.e. the prohibition of the devil's potion and protocols, is not reared on the premises of Taqwa and Tawakkul.

In simple terms, the genuine Ulama say that the potion of Iblees (vaccines) and the protocols of Iblees are **HARAAM** on the basis of *Nusoos* of the Shariah. This *hurmat* is not contended on the basis of Tawakkul or Taqwa.

Relative to the devil's potion (the filth and poison known as vaccines), the issue of Tawakkul has no relevance. Abstention from vaccines and the satanic covid protocols are unrelated to Tawakkul.

Such abstention is Waajib. Abstention from haraam is incumbent whilst indulgence therein is a major sin. Relative to vaccines, abstention of the opponents of the devil's potion is not based on Tawakkul. It is the demand and command of the Shariah to abstain from Haraam.

The morons have raised the issue of Tawakkul in a haraam scenario. According to them, adoption of the haraam vaccine is not nugatory of Tawakkul. They have exhibited their stupidity. Their thinking is satanically convoluted. Abstention from haraam vaccines or any haraam medicine is imperative for even laymen. Such abstention is not restricted to Auliya and men of high Taqwa. All Muslims, even the fussaag and fujaar have to incumbently abstain from the haraam devil's vaccine.

Apart from the issues of haraam ingredients, the fact is that Islam does not permit the introduction of a disease into the body.

Introduction of disease whether in healthy or sick persons is haraam. It is by satanic inspiration that human beings are perpetrating the grotesquely evil of injecting disease into people by means of vaccination.

Looking at haraam for the acquisition of benefit is total lack of Tawakkul on Allah Ta'ala. While Tawakkul is not nugatory of halaal medicine, it strictly proscribes rijs and haraam. The minimum degree of Tawakkul which is Waajib for every Mu'min is abstention from haraam. The theme of Taqwa and Tawakkul runs through the Qur'aan Majeed from beginning to end. The Qur'aan repeatedly commands:

“And on Allah should the Mutawakkileen have tawakkul (trust).”

“Allah loves the people of Tawakkul.”

E – SPURIOUS ARGUMENTS

A few more spurious arguments were presented by Mufti Ebrahim Desai Saheb. All his arguments are specious and eristic! It is clear that ‘Mufti’ Ebrahim Desai is trying to score points with all his eristic arguments. The following is a response to a few more of his baseless arguments:

i) QIYAAS ON INCORRECT FATAAWAA

Making our case stronger that all vaccines are Haraam, Mufti Ebrahim Desai states:

“Chickenpox, Smallpox, Polios, and Cholera, referred to in the above-mentioned Fatawa, have many medical similarities to Covid-19. The vaccines in reference work on a similar principle of the Covid-19 vaccine. That is, they all stimulate an immune response in the body to create antibodies to the virus.”

The ‘qiyaas’ of the Covid-19 vaccine on all other filthy vaccines referred to in the Fataawaa of the Indian Ulama, merely proves that Covid-19 vaccines are Haraam just like all other vaccines!

The filth and poison *stimulating an immune response in the body to create antibodies to the virus* does not mean vaccines are permissible. The hallucinated or even confirmed ‘benefits’ of consuming poison does not override the Shariah’s ruling that the consumption and injection of poison into the body is Haraam!

Qiyaas on the incorrect baseless ‘Fataawaa’ of ‘permissibility’ of the ‘Akaabireen’ and senior Ulama of India, is heavily flawed as has already been explained.

ii) THE SILLY CHART

The chart presented by ‘Mufti’ Ebrahim Desai is laughable and misleading. The *highly effectiveness* claim of ‘Mufti’ Ebrahim Desai is indeed an insult to intelligence. ‘Mufti’ E Desai knows very, very little of the **TRUE** history of vaccination. Hence, he evokes mirth by presenting such a silly chart which is a silly attempt with the endeavour to flaunt medical ‘expertise’ on the poisonous filth known as vaccines!

Despite ‘Mufti’ Ebrahim Desai presenting a chart as if he is some medical expert, he miserably fails to refute all the evidence which damns vaccination.

The idea implied by ‘Mufti’ E Desai that the vaccine prevents the transmission of the disease, simply convinces us that ‘Mufti’ Ebrahim Desai did not objectively study the evidence which exposes the rot and evils of vaccination.

People should study books and articles against vaccination with an objective mind, and you will realize that it is doctors themselves – thousands of them – who have condemned vaccination. Unfortunately, the scope of this booklet does not allow us to add 1000 pages of evidence.

We shall present a little to you regarding the chickenpox vaccine which ‘Mufti’ Ebrahim Desai claims to be highly effective and according to him, there is a remote chance of death.

From a research conducted on the varicella vaccine in the United States in 2012 which is just a few years back, the following is what they concluded:

“Conclusion

Prior to the universal varicella vaccination program, 95% of adults experienced natural chickenpox [162] (usually as pre-school to early elementary school children)—these cases were

usually benign. In the prelicensure era, the periodic exogenous boosting that adults received from those shedding VZV resulted in long-term immunity. This high percentage of seropositive individuals and their long-term immunity have been compromised by the universal varicella vaccination of children which provides at best 70–90% protection [142,163–166] that is temporary and of unknown duration—shifting chickenpox to a more vulnerable adult population which, as Dr. Jane Seward cautioned in 2007, carries 20 times more risk of death and 10–15 times more risk of hospitalization compared to chickenpox in children [167]. Thus, the proponents for universal varicella vaccination have failed to consider increased HZ-related morbidity as well as the adverse effects of both the varicella and HZ vaccines which have more than offset the limited benefits associated with reductions in varicella disease. The universal varicella (chickenpox) vaccination program now requires a booster vaccine for children and an HZ vaccine to boost protection in adults. However, these are less effective than the natural immunity that existed in communities prior to licensure of the varicella vaccine. Hence, rather than eliminating varicella in children as promised, routine vaccination against varicella has proven extremely costly [60,62,168] and has created continual cycles of treatment and disease.”

[1200-STUDIES – The Truth Will Prevail]

What more should we say!!! The conclusions are clear:

- Vaccination compromises long-term natural immunity.
- The risk of death is 20 times more with those who took the vaccine than with those who did not take the vaccine!
- Universal varicella vaccination has failed to provide long-term protection from VZV (varicella-zoster virus) disease. (Yet, ‘Mufti’ Ebrahim Desai is promoting it and using it to defend the Covid-vaccine – What a disgrace!)
- Varicella vaccination is less effective than the natural immunity that existed in prevaccine communities.
- Vaccination causes disease!

There are over thousands of studies at our disposal which damn vaccination. Alhamdulillah and Shukr unto Allah Ta’ala for guiding us towards the ***Haq*** (truth).

All vaccines are Haraam. It is not permissible to introduce poisons and filth into one’s body for a future imaginary disease. This is in addition to the Haraam ingredients, the harmful adverse effects of vaccination, and the satanism which accompanies vaccination!

iii) RED HERRING RULING

‘Mufti’ Ebrahim Desai’s view is as follows:

“Accordingly, it is not permissible to receive a vaccine that contains impermissible ingredients if a vaccine that does not contain impermissible ingredients is available and efficacious.

If a vaccine with permissible ingredients is not available, or not efficacious, then the ruling will be considered at that stage.”

The availability and efficacy of vaccines that do not contain impermissible ingredients is a red herring introduced to legalize the filth called vaccination. There is no such a thing as Halaal vaccination. All vaccinations are Haraam!

The statement *‘If a vaccine with permissible ingredients is not available, or not efficacious, then the ruling will be considered at that stage.’*, is a misleading statement. Whether the vaccine has permissible ingredients or not, it does not alter the ruling of the Shariah pertaining to the introduction of poisons into one’s body. The ‘permissible’ ingredients are not actually permissible.

Whilst they might not contain ingredients which are technically ‘Haraam’, they cause the body immense harm. There are mountains of evidence pertaining to

the harmful nature of the disastrous chemicals, toxins and so-called ‘Halaal’ ingredients of vaccines!

Furthermore, these Covid-vaccines contain much Haraam which are not hidden mysteries. Despite the Haraam ingredients of the Covid-vaccines, ‘Mufti’ Ebrahim Desai has not declared them Haraam! Now, where is the academic honesty of the so-called ‘Mufti’ Ebrahim Desai???

iv) TOTALLY INCOMPETENT

Totally incompetent to issue Fataawa, the Mudhil Ebrahim Desai states:

“We also wish to advise everyone to exercise caution in offering academic and/or practical advice. If one is not adequately qualified in a certain field, for example in medicine or in issuing Fatawa, it is prohibited to offer advice in that field.

The following Hadith is a thought-provoking reference to this issue:

“The Messenger of Allah (Sallallahu Alayhi Wasallam) said: ‘Whoever gives medical treatment (medical advice included), with no prior knowledge of medicine, is responsible (for any harm done).’” (Ibn Majah- 3466)

Be conscious of accountability in the court of Allah. Do not be unduly influenced by external forces.”

Response:

1) The very first person whom we know to be disqualified to issue Fataawaa pertaining to vaccination and even Fataawaa in general is the so-called ‘Mufti’ Ebrahim Desai.

In terms of the Shariah, ‘Mufti’ Ebrahim Desai has to be banned from issuing Fataawaa! Imaam Abu Hanifah labelled such ‘muftis’ as *Mufti Maajins* (like ten askimam ‘muftis’ not worth a cent).

2) As far as vaccination is concerned, ‘Mufti’ Ebrahim Desai is either ignorant of the harms of vaccination or he stubbornly refuses to acknowledge the harms of vaccines. Thus, such a person is not qualified to even comment on vaccines.

3) The noble Hadeeth which ‘Mufti’ Ebrahim Desai has cited in a supine attempt to indict the Ulama who condemn vaccines, is rather applicable to ‘Mufti’ Ebrahim Desai and his ilk.

Those Ulama who condemn vaccines, do not “*give medical treatment*”. ‘Mufti’ Ebrahim Desai added in brackets ‘*medical advice included*’. Those Ulama are not giving medical advice. From which thumb did ‘Mufti’ Ebrahim Desai suck the notion that those Ulama who are condemning vaccination, are giving medical advice without knowledge?

The Ulama who declare vaccines to be Haraam, are merely narrating the facts from the experts. All the facts against vaccination come directly from the doctors and scientists themselves. It is not mere hearsay. It is not an issue of Ulama giving medical advice without being experts in the field of medicine!

The very experts of vaccination have condemned vaccination. Hence, the citation of the Hadeeth by Mufti Ebrahim Desai and the attempt to implicate the Ulama-e-Haq with this Hadeeth, is indeed a baseless attempt to justify his own personal opinion pertaining to vaccines.

Mufti Ebrahim Desai should be the last one to mumble about accountability in the court of Allah and being unduly influenced by external forces! ‘Mufti’ Ebrahim Desai lacks totally in Taqwa in view of his liberalism and corrupt Fatwas.

A person who legalizes cakes or ice creams which contain rum (usually 40% alcohol) should be the last one to say: *“Be conscious of accountability in the court of Allah”*.

‘Mufti’ Ebrahim Desai forgot that he resides in a ‘glass house’. Yet, he throws stones at the Ulama-e-Haq! He seems to be heavily influenced by Shaytaan, the ***Mufti Maajin Aa’zam*** of all the small *mufti maajins*!

F – WHAT DO THE FACTS SAY?

From a library of thousands of articles, below are four detailed articles regarding vaccines in general as well as the Covid-vaccine. These articles thoroughly expose the myth called vaccination.

1) THE POISONED NEEDLE

The ‘Poisoned Needle’ is a detailed book of approximately 430 pages which was written several decades ago. The author very thoroughly exposed the suppressed facts of vaccination and also revealed the true history of the devil’s poison known as vaccination. Below is a very short piece relative to our discussion.

VACCINATION HIT BY DOCTORS

From its inception down to the present time **vaccination has been denounced as dangerous**, disease producing and even deadly, by **all thinking** doctors who have investigated the facts and have had the courage to voice them.

A few of these published statements from prominent doctors are presented here:

⇒ From **Dr. Alexander Wilder**, Editor of the New York Medical Times, Professor of Pathology in the United States Medical College of New York and author of **WILDER'S HISTORY OF MEDICINE**, we have this observation:

"Vaccination is the infusion of contaminating element into the system, and after such contamination you can never be sure of regaining the former purity of the body. Consumption follows in the wake of vaccination as certainly as effect follows cause."

⇒ Dr. **Walter M. James** of Philadelphia says:

"Vaccination does not stay the spread of smallpox nor even modify it in those who get it after vaccination. It does introduce into the system, and therefore **contributes to the spread of, tuberculosis, cancer and even leprosy**. It tends to make more virulent epidemics of smallpox and to make them more extensive. It does just what inoculation did - cause the spread of disease."

⇒ **Dr. Kalb, Royal Examiner of Statistics** for Bavaria, states:

"Examination shows vaccination a complete failure. In this single year, 3,994 vaccinated people died of smallpox; the total number attacked exceeded 29,000." (All were vaccinated.)

⇒ **Dr. L Hall Bakewell, Vaccinator General** of Trinidad said:

"I have very little faith in Vaccination even as modifying the disease, and none at all as a protective in virulent epidemics. Personally, I contracted smallpox less than six months after a most severe re-vaccination."

This doctor was in the vaccination business; his livelihood depended on it and he wanted to believe in it. In Trinidad where vaccination was compulsory he had ample opportunity to observe the full effects of it on a large scale, yet he voluntarily denounced the practice as a failure.

⇒ **Dr. L C. Carter** of London reports:

"In looking over the history of vaccination for smallpox, I am amazed to learn of the terrible deaths from vaccination, amputations of arms and leg., foot and mouth disease, tetanus (lockjaw), septicemia (blood poisoning), cerebro-spinal meningitis."

⇒ **Dr. J. C. Ward** M.R.C.S. at Harrogate, (England) among many others confesses to a change of heart on the vaccination question in this statement:

"I believed that vaccination prevented smallpox. I believed that if it did not absolutely prevent it in every

case, it modified the disease in some cases, and I believed that re-vaccination, if only frequent enough, gave absolute immunity. Experience has driven all that out of my head; I have seen vaccinated persons get smallpox, and persons who had been vaccinated get smallpox, and I have seen those who had had smallpox get it a second time and die of it."

⇒ **Professor Adolf Vogt**, who held the chair of vital Statistics and Hygiene in Berne University for 17 years said:

"After collecting the particulars of 400,000 cases of small pox I am compelled to admit that my belief in vaccination is absolutely destroyed."

⇒ **Dr. Charles E. Page** of Boston said:

"I have been a regular practitioner of medicine in Boston for 33 years. I have studied the question of vaccination conscientiously for 45 years. As for vaccination as a preventative of disease, there is not a scrap of evidence in its favor. Injection of virus

into the pure bloodstream of the people does not prevent Smallpox. Rather, it tends to increase its epidemics and makes the disease more deadly. Of this we have indisputable proof. In our country (U.S.) cancer mortality has increased from 9 per 100,000 to 80 per 100,000 or fully 900 per cent increase, within the past 50 years, and no conceivable thing could have

caused this but the universal blood poisoning now existing."

⇒ **Dr. Forbes Laurie says:**

"I can add my testimony to the others . . . that **vaccination contributes to the great increase in cancer.**

[THE POISONED NEEDLE]

2) “COVID-19 VACCINES ARE UNNECESSARY, INEFFECTIVE AND UNSAFE” - VACCINEIMPACT

Below is an excellent article by the experts on the true nature of the Covid vaccines!

<https://vaccineimpact.com/2021/doctors-for-covid-ethics-covid-19-vaccines-are-unnecessary-ineffective-and-unsafe/>

<https://healthimpactnews.com/2021/doctors-for-covid-ethics-covid-19-vaccines-are-unnecessary-ineffective-and-unsafe/>

COVID Vaccines: Necessity, Efficacy and Safety

by [Doctors for COVID Ethics](#)

Abstract: COVID-19 vaccine manufacturers have been exempted from legal liability for vaccine-induced harm. It is therefore in the interests of all those authorising, enforcing and administering COVID-19 vaccinations to understand the evidence regarding the risks and benefits of these vaccines, since liability for harm will fall on them.

In short, the available evidence and science indicate that COVID-19 vaccines are unnecessary, ineffective and unsafe.

- **Necessity:** Immunocompetent individuals are protected against SARS-CoV-2 by cellular immunity. Vaccinating low-risk groups is therefore unnecessary. For immunocompromised individuals who do fall ill with COVID-19 there is a range of medical treatments that have been proven safe and effective. Vaccinating the vulnerable is therefore equally unnecessary. Both immunocompetent and vulnerable groups are better protected against variants of SARS-CoV-2 by naturally acquired immunity and by medication than by vaccination.
- **Efficacy:** Covid-19 vaccines lack a viable mechanism of action against SARS-CoV-2 infection of the airways. Induction of antibodies cannot prevent infection by an agent such as SARS-CoV-2 that invades through the respiratory tract. Moreover, none of the vaccine trials have provided any evidence that vaccination prevents transmission of the infection by vaccinated

individuals; urging vaccination to “protect others” therefore has no basis in fact.

- **Safety:** The vaccines are dangerous to both healthy individuals and those with pre-existing chronic disease, for reasons such as the following: risk of lethal and non-lethal disruptions of blood clotting including bleeding disorders, thrombosis in the brain, stroke and heart attack; autoimmune and allergic reactions; antibody-dependent enhancement of disease; and vaccine impurities due to rushed manufacturing and unregulated production standards.

The **risk-benefit calculus** is therefore clear: the experimental vaccines are needless, ineffective and dangerous. Actors authorising, coercing or administering experimental COVID-19 vaccination are exposing populations and patients to serious, unnecessary, and unjustified medical risks.

1. The vaccines are unnecessary

1. Multiple lines of research indicate that immunocompetent people display “**robust**” and **lasting** cellular (T cell) immunity to

SARS-CoV viruses [1], including SARS-CoV-2 and its variants [2]. T cell protection stems not only from exposure to SARS-CoV-2 itself, but from cross-reactive immunity following previous exposure to common cold and SARS coronaviruses [1,3–10]. Such immunity was detectable after infections up to 17 years prior [1,3]. Therefore, immunocompetent people do not need vaccination against SARS-Cov-2.

2. **Natural T-Cell immunity provides stronger and more comprehensive protection** against all SARS-CoV-2 strains than vaccines, because naturally primed immunity recognises multiple virus epitopes and costimulatory signals, not merely a single (spike) protein. Thus, immunocompetent people are better protected against SARS-CoV-2 and any variants that may arise by their own immunity than by the current crop of vaccines.
3. The vaccines have been touted as a means to prevent asymptomatic infection [11], and by extension “asymptomatic transmission.” However, **“asymptomatic transmission” is an artefact** of invalid and unreliable PCR test procedures and interpretations, leading to high false-positive rates [12–15].

Evidence indicates that PCR-positive, asymptomatic people are healthy false-positives, not carriers. A comprehensive study of **9,899,828** people in China found that asymptomatic individuals testing positive for COVID-19 never infected others [16]. In contrast, the papers cited by the Centre for Disease Control [17,18] to justify claims of asymptomatic transmission are based on hypothetical models, not empirical studies; they present assumptions and estimates rather than evidence. Preventing asymptomatic infection is not a viable rationale for promoting vaccination of the general population.

4. In most countries, **most people now have immunity to SARS-CoV-2** [19]. Depending on their degree of previously acquired cross-immunity, they will have had no symptoms, mild and uncharacteristic symptoms, or more severe symptoms, possibly including anosmia (loss of sense of smell) or other somewhat characteristic signs of the COVID-19 disease. Regardless of disease severity, they will now have sufficient immunity to be protected from severe disease in the event of renewed exposure. This majority of the population will not benefit at all from being vaccinated.

5. **Population survival of COVID-19 exceeds 99.8% globally** [20–22]. In countries that have been intensely infected over several months, less than 0.2% of the population have died and had their deaths classified as ‘with covid19’. COVID-19 is also typically a mild to moderately severe illness. Therefore, the overwhelming majority of people are not at risk from COVID-19 and do not require vaccination for their own protection.
6. In those susceptible to severe infection, **Covid-19 is a treatable illness**. A convergence of evidence indicates that early treatment with existing drugs reduces hospitalisation and mortality by ~85% and 75%, respectively [23–27]. These drugs include many tried and true antiinflammatory, antiviral, and anticoagulant medications, as well as monoclonal antibodies, zinc, and vitamins C and D. Industry and government decisions to sideline such proven treatments through selective research support [24], regulatory bias, and even outright sanctions against doctors daring to use such treatments on their own initiative, have been out of step with existing laws, standard medical practice, and research; the legal requirement

to consider real world evidence has fallen by the wayside [28]. The systematic denial and denigration of these effective therapies has underpinned the spurious justification for the emergency use authorisation of the vaccines, which requires that “no standard acceptable treatment is available” [29]. Plainly stated, vaccines are not necessary to prevent severe disease.

2. The vaccines lack efficacy

1. At a mechanistic level, the concept of immunity to COVID-19 via antibody induction, as per **COVID-19 vaccination, is medical nonsense**. Airborne viruses such as SARS-CoV-2 enter the body via the airways and lungs, where antibody concentrations are too low to prevent infection. Vaccine-induced antibodies primarily circulate in the bloodstream, while concentrations on the mucous membranes of lungs and airways is low. Given that COVID-19 primarily spreads and causes disease by infecting these mucous membranes, vaccines miss the immunological mark. The documents submitted by the vaccine manufacturers to

the various regulatory bodies contain no evidence that vaccination prevents airway infection, which would be crucial for breaking the chain of transmission. Thus, vaccines are immunologically inappropriate for COVID-19.

2. **Medium to long-term vaccine efficacy is unknown.** Phase 3, medium term, 24-month trials will not be complete until 2023: There is no medium-term or long term longitudinal data regarding COVID-19 vaccine efficacy.
3. **Short term data has not established prevention of severe disease.** The European Medicines Agency has noted of the Comirnaty (Pfizer mRNA) vaccine that severe COVID-19 cases “were rare in the study, and statistically certain conclusion cannot be drawn” from it [30]. Similarly, the Pfizer document submitted to the FDA [31] concludes that efficacy against mortality could not be demonstrated. Thus, the vaccines have not been shown to prevent death or severe disease even in the short term.
4. **The correlates of protection against COVID-19 are unknown.** Researchers have not yet established how to measure protection against COVID-19. As a result, efficacy studies are stabbing around in the

dark. After completion of Phase 1 and 2 studies, for instance, a paper in the journal Vaccine noted that “without understanding the correlates of protection, it is impossible to currently address questions regarding vaccine-associated protection, risk of COVID-19 reinfection, herd immunity, and the possibility of elimination of SARS-CoV-2 from the human population” [32]. Thus, Vaccine efficacy cannot be evaluated because we have not yet established how to measure it.

3. The vaccines are dangerous

1. Just as smoking could be and was predicted to cause lung cancer based on first principles, **all gene-based vaccines can be expected to cause blood clotting and bleeding disorders** [33], based on their molecular mechanisms of action. Consistent with this, diseases of this kind have been observed across age groups, leading to temporary vaccine suspensions around the world: The vaccines are not safe.
2. Contrary to claims that blood disorders post-vaccination are “rare”, many **common vaccine side effects** (headaches, nausea,

vomiting and haematoma-like “rashes” over the body) **may indicate thrombosis and other severe abnormalities**. Moreover, vaccine-induced diffuse micro-thromboses in the lungs can mimic pneumonia and may be misdiagnosed as COVID-19. Clotting events currently receiving media attention are likely just the “tip of a huge iceberg” [34]: The vaccines are not safe.

3. Due to immunological priming, risks of **clotting, bleeding and other adverse events can be expected to increase with each re-vaccination** and each intervening coronavirus exposure. Over time, whether months or years [35], this renders both vaccination and coronaviruses dangerous to young and healthy age groups, for whom without vaccination COVID-19 poses no substantive risk. Since vaccine roll-out, COVID-19 incidence has risen in numerous areas with high vaccination rates [36–38]. Furthermore, multiple series of COVID-19 fatalities have occurred shortly after the onset vaccinations in senior homes [39,40]. These cases may have been due not only to antibody-dependent enhancement but also to a general immunosuppressive effect of the vaccines, which is suggested by the increased occurrence of Herpes zoster in

certain patients [41]. Immunosuppression may have caused a previously asymptomatic infection to become clinically manifest. Regardless of the exact mechanism responsible for these reported deaths, we must expect that the vaccines will increase rather than decrease lethality of COVID-19 — the vaccines are not safe.

4. **The vaccines are experimental by definition.** They will remain in Phase 3 trials until 2023. Recipients are human subjects entitled to free informed consent under Nuremberg and other protections, including the Parliamentary Assembly of the Council of Europe’s resolution 2361 [42] and the FDA’s terms of emergency use authorisation [29]. With respect to safety data from Phase 1 and 2 trials, in spite of initially large sample sizes the journal *Vaccine* reports that, “the vaccination strategy chosen for further development may have only been given to as few as 12 participants” [32]. With such extremely small sample sizes, the journal notes that, “larger Phase 3 studies conducted over longer periods of time will be necessary” to establish safety. The risks that remain to be evaluated in Phase 3 trials into 2023, with entire populations as subjects, include not

only thrombosis and bleeding abnormalities, but other autoimmune responses, allergic reactions, unknown tropisms (tissue destinations) of lipid nanoparticles [35], antibody-dependent enhancement [43–46] and the impact of rushed, questionably executed, poorly regulated [47] and reportedly inconsistent manufacturing methods, conferring risks of potentially harmful impurities such as uncontrolled DNA residues [48]. The vaccines are not safe, either for recipients or for those who administer them or authorise their use.

5. Initial experience might suggest that the adenovirus-derived vaccines (AstraZeneca/Johnson & Johnson) cause graver adverse effects than the mRNA (Pfizer/Moderna) vaccines. However, upon repeated injection, the former will soon induce antibodies against the proteins of the adenovirus vector. These antibodies will then neutralize most of the vaccine virus particles and cause their disposal before they can infect any cells, thereby limiting the intensity of tissue damage. In contrast, in the mRNA vaccines, there is no protein antigen for the antibodies to recognize. Thus, regardless of the existing degree of immunity, the vaccine mRNA is going to

reach its target — the body cells. These will then express the spike protein and subsequently suffer the full onslaught of the immune system. With the mRNA vaccines, the risk of severe adverse events is virtually guaranteed to increase with every successive injection. In the long term, they are therefore even more dangerous than the vector vaccines. Their apparent preferment over the latter is concerning in the highest degree; these vaccines are not safe.

4. Ethics and legal points to consider

1. Conflicts of interest abound in the scientific literature and within organisations that recommend and promote vaccines, while demonising alternate strategies (reliance on natural immunity and early treatment). Authorities, doctors and medical personnel need to protect themselves by evaluating the sources of their information for conflicts of interest extremely closely.
2. Authorities, doctors and medical personnel need to be similarly careful not to ignore the credible and independent literature on vaccine necessity, safety and efficacy, given the foreseeable mass deaths and harms that

- must be expected unless the vaccination campaign is stopped.
3. Vaccine manufacturers have exempted themselves from legal liability for adverse events for a reason. When vaccine deaths and harms occur, liability will fall to those responsible for the vaccines' authorisation, administration and/or coercion via vaccine passports, none of which can be justified on a sober, evidence-based risk-benefit analysis.
 4. All political, regulatory and medical actors involved in COVID-19 vaccination should familiarise themselves with the Nuremberg code and other legal provisions in order to protect themselves.

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Read the full article at [Doctors for COVID Ethics](#).
Comment on this article
at [HealthImpactNews.com](#).

3) 12,184 DEAD 1,196,190 Injuries: European Database of Adverse Drug Reactions for COVID-19 “Vaccines”

by **Brian Shilhavy Editor, Health Impact News**

The European database of suspected drug reaction reports is [EudraVigilance](#), which also tracks reports of injuries and deaths following the experimental COVID-19 “vaccines.”

Here is what [EudraVigilance](#) states about their database:

This website was launched by the [European Medicines Agency](#) in 2012 to provide public access to reports of suspected side effects (also known as suspected adverse drug reactions). These reports are submitted electronically to [EudraVigilance](#) by national medicines regulatory authorities and by pharmaceutical companies that hold marketing authorisations (licences) for the medicines.

EudraVigilance is a system designed for collecting reports of suspected side effects. These reports are used for evaluating the benefits and risks of medicines during their development and

monitoring their safety following their authorisation in the European Economic Area (EEA). EudraVigilance has been in use since December 2001.

This website was launched to comply with the [EudraVigilance Access Policy](#), which was developed to improve public health by supporting the monitoring of the safety of medicines and to increase transparency for stakeholders, including the general public.

The [Management Board of the European Medicines Agency](#) first approved the EudraVigilance Access Policy in December 2010. A revision was adopted by the Board in December 2015 based on the 2010 pharmacovigilance legislation. The policy aims to provide stakeholders such as national medicines regulatory authorities in the EEA, the European Commission, healthcare professionals, patients and consumers, as well as the pharmaceutical industry and research organisations, with access to reports on suspected side effects.

Transparency is a key guiding principle of the Agency, and is pivotal to building trust and confidence in the regulatory process. By increasing transparency, the Agency is better able

to address the growing need among stakeholders, including the general public, for access to information. ([Source.](#))

Their report through May 22, 2021 lists **12,184 deaths and 1,196,190 injuries** following injections of four experimental COVID-19 shots:

- [COVID-19 MRNA VACCINE MODERNA \(CX-024414\)](#)
- [COVID-19 MRNA VACCINE PFIZER-BIONTECH](#)
- [COVID-19 VACCINE ASTRAZENECA \(CHADOX1 NCOV-19\)](#)
- [COVID-19 VACCINE JANSSEN \(AD26.COV2.S\)](#)

From the total of injuries recorded, there are 604,744 **serious** injuries which equals over 50%.

*“**Seriousness** provides information on the suspected undesirable effect; it can be classified as ‘serious’ if it corresponds to a medical occurrence that results in **death**, is life-threatening, requires inpatient hospitalisation, results in another medically important condition, or prolongation of existing hospitalisation, results in persistent or significant disability or incapacity, or is a congenital anomaly/birth defect.”*

A *Health Impact News* subscriber in Europe ran the reports for each of the four COVID-19 shots we are including here. This subscriber has volunteered to do this, and it is a lot of work to tabulate each reaction with injuries and fatalities, since there is no place on the [EudraVigilance](#) system we have found that tabulates all the results.

Since we have started publishing this, others from Europe have also calculated the numbers and confirmed the totals.*

Here is the summary data through May 22, 2021.

A - PFIZER BIONTECH

Total reactions for the experimental mRNA vaccine **Tozinameran** (code **BNT162b2**, **Comiraty**) from **BioNTech/ Pfizer: 5,961 deaths** and **452,779 injuries** to 22/05/2021

- 13,531 Blood and lymphatic system disorders **incl. 59 deaths**
- 9,828 Cardiac disorders **incl. 735 deaths**
- 71 Congenital, familial and genetic disorders **incl. 4 deaths**

- 5,468 Ear and labyrinth disorders **incl. 3 deaths**
- 183 Endocrine disorders
- 6,266 Eye disorders **incl. 14 deaths**
- 41,214 Gastrointestinal disorders **incl. 216 deaths**
- 128,031 General disorders and administration site conditions **incl. 1,909 deaths**
- 327 Hepatobiliary disorders **incl. 27 deaths**
- 4,802 Immune system disorders **incl. 31 deaths**
- 13,948 Infections and infestations **incl. 648 deaths**
- 4,821 Injury, poisoning and procedural complications **incl. 81 deaths**
- 10,374 Investigations **incl. 221 deaths**
- 3,354 Metabolism and nutrition disorders **incl. 120 deaths**
- 65,326 Musculoskeletal and connective tissue disorders **incl. 71 deaths**
- 250 Neoplasms benign, malignant and unspecified (incl cysts and polyps) **incl. 15 deaths**
- 81,748 Nervous system disorders **incl. 616 deaths**
- 279 Pregnancy, puerperium and perinatal conditions **incl. 7 deaths**

- 88 Product issues
- 7,978 Psychiatric disorders **incl. 94 deaths**
- 1,342 Renal and urinary disorders **incl. 93 deaths**
- 1,570 Reproductive system and breast disorders **incl. 3 deaths**
- 18,597 Respiratory, thoracic and mediastinal disorders **incl. 697 deaths**
- 21,101 Skin and subcutaneous tissue disorders **incl. 53 deaths**
- 663 Social circumstances **incl. 9 deaths**
- 160 Surgical and medical procedures **incl. 10 deaths**
- 11,459 Vascular disorders **incl. 225 deaths**

B – MODERNA

Total reactions for the experimental mRNA vaccine mRNA-1273(CX 024414) from Moderna: 3,365 deaths and 72,596 injuries to 22/05/2021

- 1,335 Blood and lymphatic system disorders **incl. 22 deaths**
- 2,045 Cardiac disorders **incl. 370 deaths**
- 12 Congenital, familial and genetic disorders **incl. 2 deaths**

- 718 Ear and labyrinth disorders
- 37 Endocrine disorders **incl. 1 death**
- 997 Eye disorders **incl. 4 deaths**
- 6,305 Gastrointestinal disorders **incl. 108 deaths**
- 20,774 General disorders and administration site conditions **incl. 1,480 deaths**
- 129 Hepatobiliary disorders **incl. 8 deaths**
- 691 Immune system disorders **incl. 4 deaths**
- 2,392 Infections and infestations **incl. 183 deaths**
- 1,292 Injury, poisoning and procedural complications **incl. 63 deaths**
- 1,743 Investigations **incl. 77 deaths**
- 816 Metabolism and nutrition disorders **incl. 64 deaths**
- 9,149 Musculoskeletal and connective tissue disorders **incl. 62 deaths**
- 77 Neoplasms benign, malignant and unspecified (incl cysts and polyps) **incl. 11 deaths**
- 12,314 Nervous system disorders **incl. 339 deaths**
- 83 Pregnancy, puerperium and perinatal conditions
- 11 Product issues

- 1,375 Psychiatric disorders **incl. 51 deaths**
- 468 Renal and urinary disorders **incl. 40 deaths**
- 175 Reproductive system and breast disorders **incl. 1 death**
- 3,513 Respiratory, thoracic and mediastinal disorders **incl. 306 deaths**
- 3,726 Skin and subcutaneous tissue disorders **incl. 23 deaths**
- 259 Social circumstances **incl. 9 deaths**
- 235 Surgical and medical procedures **incl. 26 deaths**
- 1,925 Vascular disorders

C – OXFORD ASTRAZENECA

Total reactions for the experimental vaccine AZD1222/VAXZEVRIA (CHADOX1 NCOV-19) from Oxford/ AstraZeneca: 2,489 deaths and 655,534 injuries to 22/05/2021

- 7,200 Blood and lymphatic system disorders **incl. 100 deaths**
- 9,748 Cardiac disorders **incl. 311 deaths**
- 103 Congenital, familial and genetic disorders **incl. 2 deaths**

- 6,740 Ear and labyrinth disorders
- 217 Endocrine disorders **incl. 2 deaths**
- 10,591 Eye disorders **incl. 8 deaths**
- 69,826 Gastrointestinal disorders **incl. 116 deaths**
- 178,037 General disorders and administration site conditions **incl. 685 deaths**
- 396 Hepatobiliary disorders **incl. 20 deaths**
- 2,409 Immune system disorders **incl. 9 deaths**
- 13,832 Infections and infestations **incl. 163 deaths**
- 5,870 Injury, poisoning and procedural complications **incl. 46 deaths**
- 13,474 Investigations **incl. 50 deaths**
- 8,405 Metabolism and nutrition disorders **incl. 35 deaths**
- 104,075 Musculoskeletal and connective tissue disorders **incl. 25 deaths**
- 222 Neoplasms benign, malignant and unspecified (incl cysts and polyps) **incl. 6 deaths**
- 141,437 Nervous system disorders **incl. 388 deaths**
- 156 Pregnancy, puerperium and perinatal conditions **incl. 3 deaths**
- 76 Product issues

- 12,272 Psychiatric disorders **incl. 21 deaths**
- 2,264 Renal and urinary disorders **incl. 20 deaths**
- 3,327 Reproductive system and breast disorders
- 21,237 Respiratory, thoracic and mediastinal disorders **incl. 278 deaths**
- 29,750 Skin and subcutaneous tissue disorders **incl. 14 deaths**
- 582 Social circumstances **incl. 4 deaths**
- 498 Surgical and medical procedures **incl. 15 deaths**
- 12,790 Vascular disorders **incl. 168 deaths**

D – JANSSEN FROM JOHNSON & JOHNSON

Total reactions for the experimental COVID-19 vaccine JANSSEN (AD26.COV2.S) from Johnson & Johnson: 369 deaths and 15,281 injuries to 22/05/2021

- 145 Blood and lymphatic system disorders **incl. 10 deaths**
- 264 Cardiac disorders **incl. 34 deaths**
- 8 Congenital, familial and genetic disorders
- 77 Ear and labyrinth disorders

- 5 Endocrine disorders **incl. 1 death**
- 191 Eye disorders **incl. 2 deaths**
- 1,302 Gastrointestinal disorders **incl. 11 deaths**
- 3,619 General disorders and administration site conditions **incl. 97 deaths**
- 38 Hepatobiliary disorders **incl. 2 deaths**
- 51 Immune system disorders
- 245 Infections and infestations **incl. 8 deaths**
- 209 Injury, poisoning and procedural complications **incl. 6 deaths**
- 1,134 Investigations **incl. 23 deaths**
- 104 Metabolism and nutrition disorders **incl. 10 deaths**
- 2,368 Musculoskeletal and connective tissue disorders **incl. 12 deaths**
- 12 Neoplasms benign, malignant and unspecified (incl cysts and polyps)
- 3,051 Nervous system disorders **incl. 48 death**
- 7 Pregnancy, puerperium and perinatal conditions
- 8 Product issues
- 181 Psychiatric disorders **incl. 3 deaths**
- 69 Renal and urinary disorders **incl. 4 deaths**

- 62 Reproductive system and breast disorders
- 637 Respiratory, thoracic and mediastinal disorders **incl. 29 deaths**
- 324 Skin and subcutaneous tissue disorders **incl. 1 death**
- 39 Social circumstances **incl. 2 deaths**
- 214 Surgical and medical procedures **incl. 20 deaths**
- 917 Vascular disorders **incl. 46 deaths**

*These totals are estimates based on reports submitted to [EudraVigilance](#). Totals may be much higher based on percentage of adverse reactions that are reported. Some of these reports may also be reported to the individual country's adverse reaction databases, such as the U.S. VAERS database, and the UK Yellow Card system. The fatalities are grouped by symptoms, and some fatalities may have resulted from multiple symptoms.

Last Update: May 22 2021	Reported Cases	Fatalities	All Multiple Symptoms	Serious injuries	
Astrazeneca	237 648	2 489	655 534	372 019	56,75%
Pfizer-BioNTech	191 215	5 961	452 779	186 308	41,15%
Moderna	29 616	3 365	72 596	38 704	53,31%
Janssen	4 997	369	15 281	7 713	50,47%
Total:	463 476	12 184	1 196 190	604 744	50,56%



EudraVigilance - European database of suspected adverse drug reaction reports

The European Medicines Agency publishes these data so that its stakeholders, including the general public, can access information that European regulatory authorities use to review the safety of a medicine or active substance. **Transparency** is a key guiding principle of the Agency.

COVID-19 Vaccine Adverse Drug Reactions

12,184 DEAD

1,196,190 Injuries Through May 22, 2021

COVID-19 MRNA VACCINE MODERNA (CX-024414)

COVID-19 MRNA VACCINE PFIZER-BIONTECH

COVID-19 VACCINE ASTRAZENECA (CHADOX1 NCOV-19)

COVID-19 VACCINE JANSSEN (AD26.COV2.S)



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EudraVigilance 

4) VACCINE INGREDIENTS

What exactly is in vaccines? And, are the ingredients toxic?

If you want to be shocked, read this. It is a link to the CDC's vaccine ingredients contained in all of the approved vaccines. You can read it for yourself. If you want to be REALLY shocked, first read this section over the next several pages on the ingredients and the health risks presented by those ingredients, then go back and read which ones are in the different vaccines.

<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf>

Some of the things that you will see in this list are:

Formaldehyde, AKA Formalin (the trade name often used in vaccines) is a proven carcinogen, MSG (by itself and including several other forms of neuroexcitatory chemicals in these vaccines appearing as hydrolyzed, modified, autolyzed), the neurotoxic heavy metals aluminum and thimerosal (Mercury), human-diploid fibroblast cell cultures from aborted babies, fetal cow serum, 2-phenoxyethanol which the FDA has linked to

depression of the central nervous system, WI-38 and MRC-5 human cells from aborted babies, monkey kidney cells, antibiotics (neomycin, neomycin sulfate, kanamycin, streptomycin, tetracycline and gentamicin sulfate), polysorbate 80 (Tween 80), polysorbate 20, nonylphenol ethoxylate, acetone, unique animal derived retroviruses that have been found in human tumors and tissues, human serum albumin, human and animal DNA (even DNA fragments from aborted human fetuses), Human, cow and pig serum proteins, glutaraldehyde (a strong biocide disinfectant and sanitizer for industrial purposes), squalene, cetyltrimethylammonium bromide, β -propiolactone plus many other chemicals with names that are difficult, if not impossible to pronounce.

Mercury and aluminum have grabbed most of the headlines as toxic ingredients in vaccines, but there is so much more!

The heavy metal aluminum stimulates the immune system to react more vigorously to the vaccine. Both mercury and aluminum have been shown to cause serious neurotoxicity. **Much, much more on this later.** *(This ‘much, much more’ of approximately 80 pages of the A4-size is not mentioned in this short treatise, but in the original book entitled ‘1200 studies – The truth will prevail.’ The book from which we are quoting presents more*

than 1400 studies and is approximately 1000 pages which damns vaccination to Hell!!! - JamiatNC)

Details and concerns regarding the other vaccine ingredients than mercury and aluminum

The abbreviation **MSDS** that you will see in the excerpts from with many of these chemicals, stands for **Material Safety Data Sheet**. It is the sheet produced for all chemicals that detail their properties, precautions, warnings, reactivity and possible health hazards.

Some of the following information is provided by <http://vaxtruth.org/2011/08/vaccine-ingredients/> (and various other sources as indicated).

• **ABORTED FETAL TISSUE CELL LINES**

This raises serious religious, personal, ethical and moral issues. Abortion is a contentious issue because unborn babies are killed, plain and simple. The injection of DNA from aborted fetal cell lines into a person's body is unconscionable to many based on their personally held beliefs. **For many of you reading this, you had no idea that you were allowing these DNA particulates from aborted babies to be injected into the bodies of yourselves and your children.** Therein lies a big part of the problem. **There is often no true informed consent**

with vaccines. And if one is presented, it is usually sorely inadequate. People should be told EVERYTHING about what is in the vaccine, ALL the risks and what the ACCURATE effectiveness is. Lots more on all of this later!

Question my claim about aborted baby tissue used to make vaccines? Read this.....

Development of Vaccines from Aborted Babies by Jessica Farnsworth, M.D., May 2011.

http://www.epm.org/static/uploads/downloads/Vaccines_Using_Tissue_from_Aborted_Babies.pdf

This paper discusses the history of using aborted babies to produce the cell lines that are still used in many of the vaccines today.

Examples of fetal cell lines containing human DNA that are used in vaccines include:

WI-38, MRC-5, HEK-293, walvax-2, etc. More detail on these and the controversies surrounding them at the end of the vaccine ingredients summaries.

- **2- phenoxyethanol**

In 2008, the FDA has warned consumers not use nipple creams for breastfeeding mothers because the phenoxyethanol in it **“can depress the central nervous system and may cause vomiting and**

diarrhea, which can lead to dehydration in infants.”

<http://scienceblogs.com/terrasig/2008/05/25/nipple-cream-warning-harmful-t/>

- **Polysorbate-80**

This is from an article from the **Annals of Allergy, Asthma & Immunology** titled, **Polysorbate 80 in medical products and nonimmunologic anaphylactoid reactions**, showing that Polysorbate 80 which is one of the common ingredients in vaccines can cause **anaphylactic reactions**.

Volume 95, Issue 6, December 2005, Pages 593-599.

<https://www.ncbi.nlm.nih.gov/pubmed/16400901>

Quotes from the article:

“Polysorbate 80 was identified as the causative agent for the anaphylactoid reaction of nonimmunologic origin.” **Conclusions:** “Polysorbate 80 is a ubiquitously used solubilizing agent that can cause **severe** nonimmunologic anaphylactoid reactions.”

It is ironic that Polysorbate 80 is being studied and used in recent years to help transport nanoparticles and drugs that would normally be prevented from entering the brain by the blood brain barrier (BBB) into the brain. “It’s special property of actively crossing from the blood stream

into the brain has made it a novel transport mechanism for drug delivery of compounds that normally would not be able to cross the BBB”. **In fact, many of the articles demonstrated that it transported neurotoxic substances into the brain.**

A current search of PubMed using the key words Polysorbate 80 AND Blood Brain Barrier resulted in 77 studies. This is just one example...A study published in the Journal *NeuroRX: The Journal of the American Society for Experimental NeuroTherapeutics* titled, **The blood-brain barrier: bottleneck in brain drug development.**
<https://www.ncbi.nlm.nih.gov/pubmed/15717053>

From the article: **Solvent/adjuvant-mediated Blood Brain Barrier (BBB) disruption**

“The BBB, like cell membranes in general, is subject to solvent-mediated disruption with chemicals such as ethanol, dimethylsulfoxide (DMSO), or detergents such as SDS, or **Tween 80 also known as polysorbate-80.**” *This is really bad news, especially because a fetus, infants and young children already have an immature/incomplete BBB. These solvents will further disrupt that already “leaky” membrane allowing larger particles to shoot through into the brain!*

“Tween 80, also known as polysorbate-80, is frequently administered in CNS drug formulations. A

dose of polysorbate-80 of 3-30 mg/kg **will cause BBB disruption in mice**. Analgesia with kyotorphin, a oligopeptide that normally does not cross the BBB, is possible following the peripheral administration of the peptide, **providing Tween 80 is co-administered.**”

What does that have to do with the fact that it is found in vaccines? I thought you would never ask. **Currently 15 vaccines contain Polysorbate 80 (AKA Tween 80) and 3 contain Tween 20**, which has the same effect. **The Tween 80 and Tween 20 transport nanoparticles and larger particles into the brain. Aluminum, mercury and other components in vaccines are in various sizes including nanoparticle size. A current search on PubMed with the key words aluminum hydroxide and nanoparticles revealed 216 articles.**

So, essentially the neurotoxic metals in the vaccines have a convenient delivery system in the vaccine itself (polysorbate or Tween 80), that assist these heavy metals into the brain where they can do their damage. I wonder how many doctors or scientists even realize this? Have I seen studies that have shown this transport of aluminum and mercury specifically? No, but it was shown to carry iron oxide another metal into the brain.

<https://www.ncbi.nlm.nih.gov/pubmed/?term=27092793>

So, it makes perfect sense that the properties of the Tween 80 and 20 to transport numerous substances readily into the brain creates a high probability that it will do the same with the metals and many other chemicals found in vaccines. This needs to be investigated further.

These are the vaccines currently on the schedule containing Polysorbate 80 (Tween 80) and aluminum or Thimerosal (mercury)

*some that do not have the metals are listed with some of the other potentially harmful ingredients found in those vaccines

- DTaP (Infanrix) + aluminum
- DTaP-IPV (Kinrix) + aluminum
- DTaP-IPV (Quadracel) + aluminum
- DTaP-HepB-IPV (Pediarix) + aluminum
- DTaP-IPV/Hib (Pentacel) + aluminum
- Hep B (Heplisav-B)
- Human Papillomavirus (HPV) (Gardasil 9) + aluminum
- Influenza (Fluad) + Squalene, neomycin, kanamycin
- Influenza (Fluarix) Trivalent & Quadrivalent + gentamicin sulfate
- Influenza (Flucelvax) Trivalent & Quadrivalent + β -propiolactone
 - Influenza (Flulaval) Trivalent & Quadrivalent + thimerosal (multi-dose)

- Meningococcal (MenB – Trumenba) + aluminum
- Pneumococcal (PCV13 – Prevnar 13) + aluminum
- Rotavirus (RotaTeq)
- Tdap (Boostrix) + aluminum
- Zoster (Shingles) (Shingrix)

Polysorbate 20 (Tween 20)

- Hep A (Havrix) + aluminum
- Hep A / Hep B (Twinrix) + aluminum (2 types)
- Influenza (Flublok) Trivalent & Quadrivalent

Interestingly, Polysorbate 80 is also being studied to deliver natural substances into the brain. A 2016 study in the *Journal of Microencapsulation*, titled **Polysorbate-80-coated, polymeric curcumin nanoparticles for in vivo anti-depressant activity across BBB and envisaged biomolecular mechanism of action through a proposed pharmacophore model**, successfully tests the transport of curcumin to affect an anti-inflammatory action in the brain.

<https://www.ncbi.nlm.nih.gov/pubmed/?term=27682805>

From the abstract:

“Depression is a modern world epidemic. Its main causative factor is oxidative stress, as reported in study subjects.”

Another 2008 article from the *Bulletin of Experimental Biology and Medicine* titled, **Antiparkinsonian effect of nerve growth factor adsorbed on polybutylcyanoacrylate nanoparticles coated with polysorbate-80**, describes great success with using the Polysorbate 80 coated drug. <https://www.ncbi.nlm.nih.gov/pubmed/?term=19023984>

From the Abstract:

“These data attest to the possibility of using nanoparticles prepared from amphiphilic polymers and coated with polysorbate-80 for the delivery of nerve growth factor into the brain during systemic treatment.”

As you will see on page 477, Polysorbate 80 was used along with aluminum as the “placebo” in the clinical trials for the HPV vaccine Gardasil. That breaks every scientific precedent for what a true placebo is (typically a saline or mildly salty solution, like normal body fluids which will not create a reaction of any kind).

- **Polysorbate 20 (Tween 20)**

Polysorbate 20 has a relatively clean toxicity report based on the Material Safety Data Sheet. The Environmental Working Group states, that the chemical in and of itself has a relatively safe track

record

<https://www.ewg.org/skindeep/ingredient/705137/POLYSORBATE-20/>, although it cites concerns over possible contamination by Ethylene Oxide, a known human carcinogen

https://www.ewg.org/skindeep/ingredient/726229/ETHYLENE_OXIDE/

and 1,4-Dioxane a possible human carcinogen.

<https://www.ewg.org/skindeep/ingredient/726331/1%2C4-DIOXANE/>

- **Formalin, AKA Formaldehyde-**

(Source: vaxtruth.org) - Formalin is an aqueous, form of Formaldehyde. **Formaldehyde is toxic and is known to cause cancer.** The International Agency for Research on Cancer (IARC) **classifies formaldehyde as a human carcinogen**, [International Agency for Research on Cancer (June 2004). *IARC Monographs on the Evaluation of Carcinogenic Risks to Humans Volume 88 (2006): Formaldehyde, 2-Butoxyethanol and 1-tert-Butoxypropan-2-ol*. Retrieved June 10, 2011, from:

<http://monographs.iarc.fr/ENG/Monographs/vol88/index.php>].

In 2011, the *National Toxicology Program*, an interagency program of the Department of Health and Human Services, named formaldehyde as a known **human carcinogen** in its **12th Report on**

Carcinogens [National Toxicology Program (June 2011). Report on Carcinogens, Twelfth Edition. Department of Health and Human Services, Public Health Service, National Toxicology Program. Retrieved June 10, 2011, from: <http://ntp.niehs.nih.gov/go/roc12>].

Also, in a bulletin dated August 08, 2014, the *National Academy of Sciences and Institute of Medicine* classified formaldehyde as a known human carcinogen.

<http://www8.nationalacademies.org/onpinews/newsitem.aspx?RecordID=18948>

Formaldehyde at body temperature is oxidized into formic acid which leads to acidosis and nerve damage. Acidosis can be described as a condition in which the acidity of the body tissues and fluids is abnormally high. The liver and the kidneys may also be damaged. Interestingly, formic acid is the same chemical that fire ants secrete when they bite. If you've ever been bitten by a fire ant, I'm sure that you will remember the pain and swelling that it can cause.

Many people experience an allergic reaction to formaldehyde. According to the *National Research Council*: Fewer than 20%, but perhaps more than 10% of the general population may be susceptible to formaldehyde allergies *and may react acutely at any exposure level*. Therefore, if 15% of individuals will

suffer an allergic reaction to it, it makes no sense to keep it in vaccines.

Other known side effects from exposure to formaldehyde:

- Alters tissue proteins
- anemia
- antibodies formation
- apathy
- blood in urine
- body aches
- cardiac impairment
- palpitations and arrhythmias
- central nervous system depression
- changes in higher cognitive functions
- chest pains and tightness
- colds
- coma
- constipation
- convulsions
- death
- destruction of red blood cells
- depression
- diarrhea
- difficulty concentrating
- disorientation
- dizziness
- ear aches
- eczema
- emotional upsets

- fatigue
- fetal asphyxiation [SIDS, perhaps?]
- flu-like or cold like illness
- UTI
- gastritis
- gastrointestinal inflammation
- headaches
- hyperactivity
- hypo-menstrual syndrome
- immune system sensitizer
- impaired (short) attention span
- inability to recall words and names
- inconsistent IQ profiles
- asthma
- irritability
- jaundice
- retarded speech pattern
- schizophrenic-type symptoms
- sensitivity to sound

Vaccine proponents will claim that the amount of formaldehyde (formalin), in vaccines is so small that it has no adverse health effects. Most studies on the toxicity of formalin have been done on inhaled and ingested exposure. Most toxicity comes from environmental sources like particle board, plywood and other building materials, cigarette smoke, e-cigarettes, automobile exhaust, some synthetic fabrics (i.e. polyester), permanent press fabrics including bedsheets, flame retardant chemicals and some personal care products.

The issue is that while even very small levels are a bi-product of some biochemical reactions in the body, in processes that are corrected by the body, there have been no studies on injecting it into a newborn or passed through the placenta to the fetus. **Both the flu and Tdap Vaccines recommended and given to pregnant women contain formaldehyde**, as do many other vaccines given to both children and adults.

- **Benzethonium Chloride-**

(Source: vaxtruth.org)- (referred to as “BC”) is an anti-microbial agent used as a preservative in some vaccines. There has been no testing done on humans to find out information regarding the injection of BC into the blood stream. I have been searching for over a year with no luck in finding any such information. What has been documented about BC under the MSDS (Material Safety Data Sheet) under section 11 is that it is **toxic when inhaled or ingested and is also hazardous to human skin**. Based on animal testing, it may **cause mutations in genetic information** and also be **carcinogenic** (cause cancer).

The known side effects of ingesting BC are (according to its Material Safety Data Sheet):

- Seizures
- Coma
- Respiratory depression

- Central Nervous System Depression
- Convulsions
- Coma
- Urinary system reaction

• **Beta-Propiolactone-**

According to *Wikipedia*, Beta-Propiolactone is made industrially by the reaction of formaldehyde and ketene. Beta-Propiolactone is an excellent sterilizing and sporicidal agent, but **its carcinogenicity** precludes that use. β -Propiolactone is "reasonably anticipated to be a human carcinogen" (*International Agency for Research on Cancer...IARC*, 1999). **It is one of 13 "OSHA-regulated carcinogens,"** chemicals regarded occupational carcinogens by the Occupational Safety and Health Administration (*OSHA*), despite not having an established permissible exposure limit.

<https://en.wikipedia.org/wiki/Beta-Propiolactone>

Classified as a potential human carcinogen on the *Occupational Safety and Health Guideline* found on the CDC's website

<https://www.cdc.gov/niosh/docs/81-123/pdfs/0528.pdf>.

Summary of toxicology: *Effects on animals:* In rats, acute oral administration or intraperitoneal injection of beta-propiolactone caused muscular spasms, respiratory difficulty, convulsions, and death. Acute

intravenous injection caused kidney tubule and liver damage.

According to the *National Toxicology Program, Department of Health and Human Services*

Subcutaneous injection of β -propiolactone caused cancer at the injection site in mice of unspecified sex (fibrosarcoma, adenocarcinoma, and squamous-cell carcinoma) and in rats of both sexes (sarcoma), (IARC 1974). In nursing mice, **a single intraperitoneal injection of β -propiolactone caused lymphoma in both sexes and liver tumors (hepatocellular tumors) in males.**

Beta Propiolactone is a “polyester” and highly carcinogenic according to *Stanislaw Penczek, Stanislaw Slomkowski, in Comprehensive Polymer Science and Supplements, 1989, chapter 50 titled, Some Properties of Polyesters, “ β -Propiolactone has been found to be highly carcinogenic, and is banned from any practical use, although its polymer might have been an interesting product for the plastic and fiber industry.” In other words, if it wasn’t for its highly carcinogenic properties, it may have been useful as a polyester fiber in the textile industry.*

Amazingly, beta-propiolactone is still found in the Afluria Influenza Vaccine (Trivalent and Quadrivalent versions).

<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf>

• Glutaraldehyde-

(source: vaxtruth.org)- is an organic compound that is used to disinfect medical and dental equipment. In vaccines, it is used as a chemical preservative. Vaxtruth.org

There have been several studies done on Glutaraldehyde and it has been found that exposure to it can cause:

- Asthma
- Allergic reactions (up to 10% of up people can be allergic to Glutaraldehyde.)
- Induced respiratory issues
- diarrhea

Sources: “Glutaraldehyde-induced and formaldehyde-induced allergic contact dermatitis” SCOTT M. RAVIS, M.D., MATTHEW P. SHAFFER, M.D., CHRISTY L. SHAFFER, M.D., SEENA DEHKHAGHANI, M.D. and DONALD V. BELSITO, M.D.; “Glutaraldehyde-induced asthma.” Quirce S, Gómez M, Bombín C, Sastre J. 1999 Oct;54(10):1121-2.; Genetic toxicity and carcinogenicity studies of glutaraldehyde—a review. Zeiger E, Gollapudi B, Spencer P. Mutat Res. 2005 Mar;589(2):136-51; Divergent immunological responses following glutaraldehyde exposure. Azadi

S, Klink KJ, Meade BJ. Toxicol Appl Pharmacol. 2004 May 15;197(1):1-8.

- **Phenol- AKA Carbolic Acid. This one is a BOMB shell-**

It is a known mutagen, (meaning it causes cells to mutate), a teratogen (meaning causes birth defects), and fetotoxic (or toxic to the fetus). According to the Material Safety Data Sheet (MSDS) on Phenol, “Special Remarks on Chronic Effects on Humans: Animal: passes through the placental barrier. May cause adverse reproductive effects and birth defects (teratogenic). Embryotoxic and/or foetotoxic in animal (The definition of foetotoxic or fetotoxic is “Poisonous to the fetus”). May affect genetic material (mutagenic)....The substance may be toxic to kidneys, liver, central nervous system (CNS). Repeated or prolonged exposure to the substance can produce target organs damage”.

In addition to all that, according to the EPA cited in a CDC document: “Phenol is also considered to be an **extremely** hazardous substance (EPA 2006i)....“Designated as a **toxic pollutant** in accordance with Section 307(a)(1) of the Federal Water Pollution Control Act”

<https://www.atsdr.cdc.gov/toxprofiles/tp115-c8.pdf>

Yet, with all that damning evidence on phenol, the CDC recommends vaccines containing Phenol for pregnant women.

I'm going to take some literary license on this and take extra time to make a very important point, because it has to do with careless exposure of unborn babies to this very toxic chemical. Most of these other compounds are discussed in more detail in other sections of this manuscript, but I felt compelled to linger here on this one a little longer.

This list of recommended vaccines during pregnancy comes from the CDC website at <https://www.cdc.gov/vaccines/pregnancy/hcp/guidelines.html>

Routine Vaccines:

- | | |
|--|--|
| • Hepatitis A | • Pneumococcal Conjugate (PCV13) |
| • Hepatitis B | • Pneumococcal Polysaccharide (PPSV23) |
| • Human Papillomavirus (HPV) | • Polio (IPV) |
| • Influenza (inactivated) | • Tetanus, Diphtheria, and Pertussis (Tdap); & Tetanus and Diphtheria (Td) |
| • Influenza (LAIV) | • Varicella |
| • Measles, Mumps, Rubella (MMR) | • Zoster |
| • Meningococcal (MenACWY or MPSV4) | |
| • Meningococcal (MenB) | |

The only ones that are specifically contraindicated (NOT recommended) in the list above, are the HPV, Live Influenza Nasal (LAIV), MMR,

**Varicella (Chickenpox) and Zoster (Shingles)-
(The red strikethroughs I have added)**

The pneumococcal Polysaccharide (PPSV23) listed above contains phenol according to page 3 of the latest Vaccine Excipient list...

<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf>

Yes, phenol is an ingredient in the PPSV23 Pneumococcal vaccine allowed for pregnant women. The CDC website says that there is inadequate data for specific recommendation. In other words, it isn't outright recommended, yet not contraindicated. This leaves doctors the latitude to make the decision whether to give it or not. This is a very precarious position for doctors that don't know what's in it (probably 99% of them). **Phenol which the Material Safety Data Sheet (MSDS) says crosses the placental barrier into the fetus. The same phenol that the MSDS says is "poisonous" to the fetus and has the capacity to cause birth defects!** When concocting these vaccines, don't they ever consider looking into this stuff? Because if they know this, the vaccine manufacturer should red flag this vaccine as contraindicated during pregnancy, or certainly the FDA or the CDC should have if they haven't. Where is the governmental oversight designed to protect the consumer?

This is by no means an exhaustive review of all of the potential interactions that could occur between ingredients co-mingling in the human body from a variety of combinations of vaccines.

Well, it's long overdue! I am calling on the scientific community to an exhaustive review of just that.

Not only that, but the Pneumovax PPSV23 package insert states the following:

“Tell your doctor if:

- **you are pregnant or intend to become pregnant. It is **not known** whether the vaccine is harmful to an unborn baby when given to a pregnant woman. (*What?*) Your doctor will give you PNEUMOVAX 23 only if it is clearly needed.**
- **you are breast-feeding. It is **not known** whether PNEUMOVAX 23 passes into breast milk. Your doctor will discuss the possible risks and benefits of you being given PNEUMOVAX 23 while breast-feeding.”**

Women are often given multiple vaccines during pregnancy. Some of those vaccines contain ingredients that are incompatible or cross-react with ingredients in the other vaccines.

The MSDS also states that phenol “is incompatible” with formaldehyde. Pregnant women are also recommended to receive the Tdap (see above), both versions which contains formaldehyde. The Fluarix, Fluzone Quadrivalent and High Dose, and Flulaval vaccines contains formaldehyde. If a woman is given the PPSV23 vaccine along with any of these others a cross reaction between phenol and formaldehyde could occur. Another vaccine contains both phenol and formaldehyde in the same shot, is the Typhoid vaccine given to people all over the world. (CDC chart says inadequate data regarding pregnancy).

The MSDS also says that phenol is incompatible with metals and metal alloys. As stated earlier, the flu shot is recommended to pregnant women. The multi-dose version of Fluzone Quadrivalent flu vaccine contains Thimerosal, (mercury, a heavy metal). The Tdap, which is recommended during pregnancy contains aluminum.

The various versions of the Meningococcal and Hepatitis A & B vaccines contain formaldehyde, aluminum and mercury.

There needs to be more scrutiny of the possible cross-reactions and interactions of the various vaccine components contained in vaccines that are given together.

- **Nonylphenol Ethoxylate (NPEs)-**

According to the EPA's website, NPEs are nonionic surfactants that are used in a wide variety of industrial applications and consumer products. Many of these, such as laundry detergents, are “down-the-drain” applications. Some others, such as dust-control agents and deicers, lead to direct release to the environment. NPEs, though less toxic and persistent than NP, are also **highly toxic to aquatic organisms**, and, in the environment, degrade into NP. NP has also been shown to **exhibit estrogenic properties** in in vitro and in vivo assays. **Nonylphenol is also neurotoxic.**
<https://www.ncbi.nlm.nih.gov/pubmed/23334477>

- **Octylphenol ethoxylate (OPEs)
and Octoxynol-10; AKA Triton X-
100-**

Closely related to Nonylphenol Ethoxylate. OPEs act as a detergent and are widely used in cleaning agents. They are also added to paints, coatings, treatments for textiles and chemicals used in paper manufacture. According to Wikipedia, Triton X-100 is widely used to lyse cells to extract protein or organelles, or to permeabilize the membranes of living cells.

- **Cetyltrimethylammonium bromide-**

According to the Material Safety Data Sheet at <http://datasheets.scbt.com/sc-278833.pdf>, “there is some evidence that human exposure to the material may result in developmental toxicity....”

Toxic Effects on Humans:

“May cause adverse reproductive effects and birth defects (teratogenic) based on animal test data.”
<http://www.sciencelab.com/msds.php?msdsId=9923367>

“The substance may be toxic to liver, cardiovascular system, central nervous system (CNS)”.

“CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910. This material and its container must be disposed of as hazardous waste”.

The Flud Influenza vaccine contains this compound, which as we just read may result in developmental toxicity, adverse reproductive effects and birth defects. In addition, Flud contains 2 antibiotics that are not supposed to be given with pregnancy (Neomycin and Kanamycin *see next section), formaldehyde and

polysorbate 80. Flu vaccines are recommended for all pregnant women. Frightening isn't it?

The following four antibiotics are found in several flu vaccines and are contraindicated (not recommended), for pregnant women or nursing mothers. Yet, the CDC recommends the flu vaccine for all pregnant women. They are also not established to be safe in children under the age of 18. More details on these on pages 193-194, along with the references.

- **Neomycin sulfate-**

Same family of antibiotics as Gentamycin Sulfate and Kanamycin called **aminoglycosides**

According to the warning label, **“Aminoglycosides can cause fetal harm when administered to pregnant women. Aminoglycoside antibiotics cross the placenta and there have been several reports of total, irreversible, bilateral congenital deafness in children whose mothers received streptomycin during pregnancy.”**

Neomycin Sulfate is found in the following vaccines:

- **Influenza (Afluria) Trivalent & Quadrivalent**
- **Influenza (Fluad)**
- **Influenza (Fluvirin)**

- **Gentamicin Sulfate-**

Same family of antibiotics as Neomycin and Kanamycin called **aminoglycosides**. It is found in the **Influenza (Fluarix) Trivalent & Quadrivalent vaccine**. The warning label states “This medication is not recommended for use during pregnancy.”

- **Kanamycin-**

Same family of antibiotics as Neomycin and Gentamicin Sulfate called **aminoglycosides**. The **Influenza (Fluad) vaccine contains both Kanamycin and Neomycin Sulfate**. Again, like in the case of the other aminoglycosides, they are **contraindicated for pregnant and nursing mothers or children**.

- **Polymyxin B-**

An antibiotic. The warning label on PubMed Health says it can cause kidney and nerve problems and diarrhea. **This same document,** https://www.ncbi.nlm.nih.gov/pubmedhealth/PMHT0011783/?report=details#side_effects **states that this antibiotic should not be taken with neomycin, one of the other antibiotics just discussed. Yet, the Fluvirin brand of influenza**

(Flu) vaccine has BOTH of these antibiotics in it!
Refer to the CDC's Vaccine Excipient and Media Summary and look under Influenza (Fluvirin).
<https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf>

WARNING LABEL:

“THE CONCURRENT OR SEQUENTIAL USE OF OTHER NEUROTOXIC AND/OR NEPHROTOXIC DRUGS WITH POLYMYXIN B (polymyxin b sulfate) SULFATE, PARTICULARLY BACITRACIN, STREPTOMYCIN, NEOMYCIN, KANAMYCIN, GENTAMICIN, TOBRAMYCIN, AMIKACIN, CEPHALORI-DINE, PAROMOMYCIN, VIOMYCIN, AND COLISTIN SHOULD BE AVOIDED.”

Note that it calls Neomycin, Kanamycin and Gentamicin neurotoxic (nerve damaging) and nephrotoxic (kidney damaging)!!!

“WARNING

CAUTION: WHEN THIS DRUG IS GIVEN INTRAMUSCULARLY AND/OR INTRATHECALLY, IT SHOULD BE GIVEN ONLY TO HOSPITALIZED PATIENTS, SO AS TO PROVIDE CONSTANT SUPERVISION BY A PHYSICIAN.” (when it is injected as part of a vaccine, **that is intramuscular injection**). If that doesn't make your skin crawl, I don't know what would!

- **Monosodium Glutamate or MSG-**

MSG is a neuroexcitatory agent that upregulates the NMDA receptors in the brain. This **can lead to damage of the brain cells**. MSG and other neuroexcitatory agents are the topic of one of the best books I have read on the subject by the prominent Neurosurgeon Russell Blaylock M.D., *Excitotoxins-The Taste That Kills...*
<https://www.amazon.com/Excitotoxins-Taste-Russell-L-Blaylock/dp/0929173147>

- **Squalene-**

Squalene is **an oil-based adjuvant** used in certain vaccines. It has been implicated as a possible causative factor in *Gulf War Syndrome* and in **batches of the H1N1 flu vaccine that has been linked to the autoimmune condition narcolepsy**. **Much more on both of those later.**

Squalene is found in the human body and manufactured in the liver. It is a precursor to cholesterol and thus to sex steroid hormones. It has been reported to have numerous health benefits similar to omega-3 fatty acids. Just like with other fats, these essential fats make up the cell membranes of our body's tissues. The richest source of squalene is in shark liver oil. Vegetarian sources include olive, amaranth, palm, wheat germ and rice bran oils. It is

used in many cosmetics as a prized ingredient for healthy skin. **Squalene in and of itself is not dangerous, BUT when it is injected, the body's immune system over-reacts (which is why they put it in the vaccine in the first place), and produces antibodies that attack all the other squalene in the body, including in places where it can be beneficial like your nervous system and other organs and tissues.**

In a 2000 study published in the *American Journal of Pathology*, titled, **The Endogenous Adjuvant Squalene Can Induce a Chronic T-Cell-Mediated Arthritis in Rats**, they injected squalene into arthritis prone rats caused them to develop rheumatoid arthritis.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1850095/>.

A similar issue was also identified in this 1999 study, published in the *Scandinavian Journal of Immunology* titled, **Identification of Arthritogenic Adjuvants of Self and Foreign Origin.**

<https://onlinelibrary.wiley.com/doi/epdf/10.1046/j.1365-3083.1999.00463.x>

One has to wonder why it has been continued to be used for the past 20 years, after the ability of **injected squalene to trigger inflammatory and autoimmune reactions in the body has been well known?** It also begs the question, where else in the body can this

compound when injected, trigger other autoimmune diseases in persons that may be genetically susceptible to that particular disease? As you will see in this eBook, just because you have the genes for something, it doesn't mean you are doomed to develop it. This is the concept of **epigenetics**, which we will explore more later.

- **Acetone-**

Acetone is a solvent. The MSDS contains the following warnings: **“Causes damage to the following organs: central nervous system (CNS) characterized by depression, fatigue, excitement, stupor, coma, headache, altered sleep time, ataxia, tremors.**

May cause damage to the following organs: kidneys, the reproductive system, liver, skin. May contain trace amounts of benzene and formaldehyde which may cancer and birth defects. Human: passes the placental barrier.”

Acetone is found in the Adenovirus vaccine, which is currently only available to the military.

- **Sodium Borate (Borax)-**

Found in the following vaccines:

- Hep A (Vaqta)

- Hib/Hep B (Comvax)- *also contains aluminum - Comvax was discontinued in 2014
- HPV (Gardasil)
- HPV (Gardasil 9)

Sodium Borate is a common **ingredient found in rat poison, pesticides, and various commercial applications** such as flame retardants, enamel glazes, and laundry detergent. **The FDA has outlawed Sodium Borate from use as a food preservative in the U.S.**

<http://www.rightinginjustice.com/news/2012/03/28/is-borax-responsible-for-gardasils-adverse-side-effects/>

According to one source, the *U.S. National Library of Medicine* states in an article that boric acid is "no longer commonly used in medical preparations." It's a good thing, too, considering that the U.S. National Library of Medicine also reports that this substance used to be used to disinfect and treat wounds and that individuals "who received such treatment over and over again got sick, and some died." In fact, the U.S. National Library of Medicine provides the number for Poison Control for people exposed to this chemical and notes that treatment for those exposed to it may include gastric lavage (stomach pumping), dialysis, and liquids by mouth or IV.

<http://www.offtheradar.co.nz/vaccines/104-rat-poison-chemical-in-gardasil.html>

Because of reproductive and developmental toxicity concerns, borax was added to the European Union's (EU) **Substance of Very High Concern (SVHC)** candidate list in December 2010. The SVHC candidate list is part of the EU Regulations on the Registration, Evaluation, Authorization and Restriction of Chemicals 2006, and the addition was based on the revised classification of borax **as toxic for reproduction** category 1B under the Classification, Labeling and Packaging Regulations. **Substances and mixtures imported into the EU which contain borax are now required to be labeled with the warnings 'May damage fertility' and 'May damage the unborn child'.** Riederer A, Caravanos J. Borax—Summary of Health Human Risks Associated with Borax in Artisanal and Small-Scale Gold Mining. *Global Alliance on Health and Pollution* Apr. 1, 2013.

Based on that information, vaccines with sodium borate should never be given to pregnant women, yet one of the Hepatitis A vaccines (Vaqta) has it in it. Hepatitis A is recommended to women under certain circumstances during pregnancy. Another vaccine containing sodium borate, is the HPV vaccine Gardasil 9.

Yet, according to the ***Immunization Action Coalition*** an organization funded in part by the CDC as published in their vaccinations for Pregnant Women flier....“You need this vaccine if you have a specific

risk factor for hepatitis A virus infection* or simply want to be protected from this disease. The vaccine is usually given in 2 doses, 6–12 months apart. If you need to get or continue the HepA vaccine series, it's safe to do so during pregnancy.” “Technical content reviewed by the Centers for Disease Control and Prevention”

<http://www.immunize.org/catg.d/p4040.pdf>

• VERO Cells-

They are cell lines from the African Green Monkey kidney cultures. Vaccines such as the Smallpox vaccine using live Smallpox virus grown in the VERO cells have a laundry list of serious potential side effects. *The following is from the Smallpox Vaccine package insert* and can be found on the FDA's web site at

<https://www.fda.gov/downloads/BiologicsBloodVaccines/Vaccines/ApprovedProducts/UCM142572.pdf>:

“Suspected cases of myocarditis and/or pericarditis have been observed in healthy adult primary vaccinees (**at an approximate rate of 5.7 per 1000**, 95% CI: 1.9-13.3) receiving ACAM2000 [see Warnings and Precautions (5.1)]. Encephalitis, encephalomyelitis, encephalopathy, progressive vaccinia, generalized vaccinia, severe vaccinia skin infections, erythema multiforme major (including STEVENS-JOHNSON SYNDROME), eczema

vaccinatum resulting in permanent sequelae or death, ocular complications, blindness, and fetal death have occurred following either primary vaccination or revaccination with live vaccinia virus smallpox vaccines [see Warnings and Precautions (5)]. These risks are increased in vaccinees with the following conditions and may result in severe disability, permanent neurological sequelae and/or death: Cardiac disease or a history of cardiac disease Eye disease treated with topical steroids, Congenital or acquired immune deficiency disorders, including those taking immunosuppressive medications Eczema and persons with a history of eczema or other acute or chronic exfoliative skin conditions Infants less than 12 months of age Pregnancy

ACAM2000 is a live vaccinia virus that can be transmitted to persons who have close contact with the vaccinee and the risks in contacts are the same as those for the vaccinee. The risk for experiencing serious vaccination complications must be weighed against the risks for experiencing a potentially fatal smallpox infection.”

This 2018 study also verifies this danger of myocarditis following smallpox vaccination. The study published in the *British Medical Journal Case reports* titled, **Myocarditis secondary to smallpox vaccination** confirms the associated risk with the smallpox vaccine.

<https://www.ncbi.nlm.nih.gov/pubmed/29572367>

From the Abstract:

“...vaccines are not without risk; reactions can range from injection site reactions to life-threatening anaphylaxis. Among the more serious vaccine-related sequela is myocarditis. Although myocarditis has been reported following many different vaccines, the smallpox vaccine has the strongest association.”

“Vaccine-associated myocarditis should always be on the differential for patients that exhibit cardiopulmonary symptoms after recent vaccinations.”

More on the use of aborted fetal cell lines and the DNA fragments from those cells found in vaccines

First of all, why is this important? It boils down to religious, moral, ethical and personal beliefs about abortion, sale of aborted baby parts for profit, freedom to choose what I put in my or my child's body and the question of **what happens when the DNA of one human being is inserted into the DNA of another human being**. The short answer to that last question is, **WE DON'T KNOW!** Are any of those concerns important to you? That is why I will now devote a larger section to this topic.

The **WI-38** cell line was developed by Dr. Leonard Hayflick in 1962, by taking lung tissue from an aborted baby. The WI comes from Wistar Institute and the 38 is the number of aborted babies used until they found the “perfect” cell line for their purposes.

The **MRC-5** cell line was developed for the Medical Research Council in England by J.P. Jacobs in 1966 from lung tissue of an aborted baby. These are vaccines that contain human DNA and aborted fetal tissue from these cell lines: Adenovirus, DTaP, hepatitis A, hepatitis B, MMR, MMRV, rabies, varicella (Chickenpox) and zoster (Shingles).

The **HEK-293** is used for research (*and vaccines*). This cell line originated from a legally aborted fetus in the Netherlands in 1973. The tissue came from the baby’s kidneys, hence Human Embryonic Kidney (HEK). The lab culturing the cells was Alex van der Eb's laboratory. Frank Graham was the scientist running the experiments refining the cell culture process. The 293 was incorporated in the name because it was produced from his 293rd experiment.
https://en.wikipedia.org/wiki/HEK_293_cells

Current vaccines that contain DNA from this cell line are for Cystic Fibrosis, Ebola, Heart (Abciximab-Repro), Hemophilia, Infection prevention (G-CSF). It is also used in other products. According to Creative Biolabs, at least five therapeutic agents produced in HEK293 cells have been approved by the FDA or the

European Medicines Agency (EMA) for therapeutic use.

The **PER.C6** cell line is a line that is not only being used in vaccine production, but in many other medicines and more in production. http://www.gmp-creativebiolabs.com/per-c6-cell-lines_74.htm

It was developed in 1995. These are quotes from GMP-Creative Biolabs web site...

“The PER.C6 cell line is derived from human embryonic retinal cells, originally from the retinal tissue of an 18 week old fetus aborted in 1985 and further developed and prepared as cell line by transfection with defined E1 region of the adenovirus type 5 followed by selection for transfectants with an immortal phenotype. At the beginning, this cell line was mainly applied for the production of human adenovirus vectors for use in vaccine development and gene therapy, and further optimization makes PER.C6 become a superexcellent host cell line for large-scale industrial production of therapeutic proteins, especially the human IgG.”

“The PER.C6 cell line is a superduper and commercial available manufacturing system that can be used to produce a variety of biopharmaceutical products, including vaccines, gene therapy products, antibodies and other therapeutic proteins. Up to now, more than fourteen biopharmaceutical products

utilizing the PER.C6 cell line are in Phase I/II clinical trials, for example, the MOR103 mAb, a human IgG antibody against granulocyte macrophage colony-stimulating factor in clinical development for the treatment of rheumatoid arthritis and multiple sclerosis; another example is CL184, a combination of two monoclonal antibodies (mAbs) against the rabies virus, which has been granted FDA fast-track approval status. Furthermore, mostly PER.C6-based vaccines against tuberculosis, malaria and HIV are also currently in clinical trials.”

According to LifeCanada.org, “It is being used in the development of numerous new vaccines against “influenza A, influenza B, ‘avian flu’, tuberculosis, respiratory syncytial virus, HIV, anthrax and various encephalopathic viruses.” (34) In 2002, PER.C6 was also “launched into commercial production of fully human monoclonal antibodies” (Mabs), totally unrelated to vaccine production. Mabs are currently used in a broad array of cancer therapies, chronic autoimmune inflammatory diseases such as rheumatoid arthritis and ulcerative colitis, and have potential for use in treating infectious diseases, SARS, rabies and others. While Mabs currently in use were not developed using human cell strains, and animal strains have worked well, various biotech companies are aggressively pursuing Mab development using human strains such as PER.C6. In addition, gene therapy is being developed using PER.C6.”

The **walvax-2** cell line is the most recent development of human fetal cell lines from an aborted baby. In a 2015 article titled Characteristics and viral propagation properties of a new human diploid cell line, walvax-2, and its suitability as a candidate cell substrate for vaccine production. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4526020/#cit0007>

It is thought that the walvax-2 cell line will eventually take the place of the MRC-5 and the WI-38 lines as they lose the ability to self-replicate.

There were 9 aborted fetuses “vying” for the one that produced the best cell line to make vaccines from. The cells eventually used, came from lung tissue of a 3-month-old female aborted baby in China. **The method they used to deliver the fetus was the “water bag” method which was done so as to deliver the baby intact, so as to provide the freshest and most viable tissue samples possible.** “The tissues from the freshly aborted fetuses were immediately sent to the laboratory for the preparation of the cells.”

According to ethicalresearch.net, there was **“Questionable complicity between the doctors who performed the abortion and vaccine researchers who benefited from obtaining freshly aborted fetal lung fibroblast tissue.** Ethicists have universally insisted that, in the development of viral vaccines from aborted fetal tissue, there should be no collusion

between the woman who has decided to abort her baby (and, by extension, the doctors doing the abortion) and the researchers. The mother must have made her decision to abort before she is asked whether she wants to donate fetal tissue for research purposes. It appears this was done in the Walvax-2 research.”

“By extension, the involved physicians performing the abortion should not deviate from the normal method of aborting the fetus (in the case of a three-month fetus, a D&C) just so they might provide “optimal fetal tissue” for the vaccine researchers. But this is what the doctors did in aborting the 3-month old female fetus whose tissue eventually proved to produce the best diploid cell strain out of the batch of 9 aborted fetuses for the Walvax-2 cell substrate. They employed a special means of induction (the water bag method) so they or someone they delegated, could deliver to Bo Ma et al intact fetal cadavers with fresh organs which would facilitate, in turn, the ready harvest of the needed fetal fibroblast lung tissue from which they developed the human diploid cell strain conducive to the growth of the respective viruses (rabies, hepatitis-A and varicella [chicken-pox]).” . <http://ethicalresearch.net/positions/the-ethics-of-the-walvax-2-cell-strain/>

The question of whether a fetus is a human life or not has created polarizing battles in our nation. To take it to the next level, this methodology brings into

question a whole other moral and ethical dilemma as to whether a fetus should be terminated (killed) inside or outside the womb. Does it suffer more if killed before being delivered alive or not. A very morbid thought, but a real world one that I'm sure many reading this have never considered. Personally, I can't imagine being the person performing that "procedure". To witness and experience the pain, suffering and aftermath of the baby that you are killing, without conscious or self-remorse is beyond me.

Other aborted fetal cell lines are used for vaccines and medical/scientific purposes

From <http://www.lifecanada.org/vaccines/vaccines-fetal-tissue-qa> - "Numerous other cell strains have been made as back-ups for the current strains, and for research. Two of the most commonly known stains are:

MRC-9 (Medical Research Council cell strain 9) was derived from the lungs of a female fetus aborted in 1974 and developed by Jacobs and colleagues for research and as a back-up for vaccine manufacture.

IMR-90 (Institute for Medical Research cell strain 90) was derived from the lungs of a sixteen-week old

female fetus aborted in July 1975. IMR-90 is designated for “research and related activities.”

How can fetal cells from as far back as 1962 still be available for use today?

To answer that let's take a look at LifeCanada.org's website- Vaccines and Fetal Tissue Q&As discussing the WI-38 cell line.
<http://www.lifecanada.org/vaccines/vaccines-fetal-tissue-qa>

“Tissue was taken from the lungs, kidneys, skin, muscles, heart, liver, thymus, and thyroid of 19 electively-aborted fetuses. Batches of cells taken from these tissues were incubated in a laboratory setting. After a cell batch had multiplied sufficiently to form a mass big enough to harvest, the mass was divided up into smaller batches, and incubated again. After about 50 'cell population doublings,' the cells divided more slowly and deteriorated. Although cell strains have a finite life-span, by freezing excess cells at each sub-cultivation, one could have cells available at any given time in almost limitless numbers. The frozen cells can be thawed, sub-cultivated repeatedly, and the excess from each of these sub- cultivations can, in turn, be frozen and later thawed for use. **This pattern can be repeated until the total potential yield of about 20 million metric tons of cells (wet weight) is reached.**” *WOW!*

More on MRC-5, DNA, MRC-5 Cellular Protein, Human Serum Albumin-

All of these derive from either human tissue or human blood. (Source for the following is vaxtruth.org)

• MRC-5, MRC-5 Cellular Protein-

In the 1970's, a second human cell line was created from an infant boy at 14 weeks gestation and became known as MRC-5. To explain MRC-5, let's look at a brief history before MRC-5 came about. In 1964, during an outbreak of Rubella, some doctors urged women who had been exposed to the Rubella virus to abort their pregnancy. (Why? Rubella is an extremely mild virus

[see: <http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0002541/>]. Most people don't show any symptoms, especially children, some may get a rash all over their body. Rubella becomes dangerous when a pregnant woman is exposed to the virus because it has the potential to cause severe abnormalities in the child.) From one of these aborted children that had been exposed to Rubella Virus, doctors developed a virus strain that became known as RA/27/3 — Rubella; Abortus; 27th aborted fetus; 3rd tissue explant. **In other words, it took 26 aborted infants to get the right strain. The virus was then cultivated on the lung tissue of another aborted child, and this child**

became known as **WI-38 — Winster Institute 38**). WI -38 was an infant girl at 3 months gestation. What makes this seem somewhat ridiculous is that the Japanese, years before the first aborted infant was used to extract the Rubella virus, proved that the virus can be taken from a **living** child simply by swabbing their throat.

WI-38 and MRC-5 have become the most used cell lines to make vaccinations. Labs currently use these 2 cell lines, as well as new sources (*i.e. Walvax-2*) to create new vaccines.

The use of tissue from aborted infants has caused heated debate because **it is ethically questionable**. Pro-life groups, which include many churches and parents whose morals condemn profiting from aborted infants, continue to fight the pharmaceutical companies to produce vaccines that do not contain this tissue. And the thing is, it's possible. Vaccines *can* be made from other sources.

Investigative videos released in 2015 by *the Center for Medical Progress* exposed Planned Parenthood and their practice of harvesting body parts from aborted babies for profit. Even though the aborted fetuses, whose cell line is still used to produce vaccines are from decades ago, the videos exposing Planned Parenthood's marketing of aborted baby organs and tissue brings the whole ethical question front and center.

[Video links deleted because animate videos are Haraam]

- **DNA-**

DNA is harvested from the aborted fetuses cell lines. It is used as adjuvant in vaccines. In vaccines, **100,000,000 bits and strands of human DNA are allowed per dose.** Again, we encounter the issue of the ethical dilemma. Not only that, but **many scientists believe that these DNA strands and the genetic code that they carry, can be incorporated to the person's own DNA.** More about those concerns later in this document.

- **Human Serum Albumin-**

Human Serum Albumin is a stabilizing protein made from human blood donated by screened donors. We already discussed above why injecting a protein directly into the body is dangerous.

With that aside, let's look at the points we reach regarding these 4 different ingredients:

We have human DNA, human cell lines from aborted infants, and protein from human blood in 23 of our vaccines. When we need a blood transfusion, or a blood donation of some kind, what is absolutely required? A match, correct? For

example, if a person with type O blood receives type A+ blood, the outcome is fatal. There are rules of science that cannot be crossed regarding DNA and blood. It is imperative to be tested when receiving any type of tissue or blood to ensure that a fatal blood or tissue type isn't put into your body. So, may I ask: **How many of you or your children were given a blood test before receiving vaccinations?** We all know the answer to that. It doesn't happen. The outcome to mixing and NOT matching human blood and tissue with other humans can be virtually disastrous. **Remember that every one of those 4 ingredients have human DNA in them. Even after the protein is extracted from human blood, DNA remains.**

More on fetal cell lines and their possible involvement in the continuing rise in the percentage of children with autism after the autism statistics section. (not included in this treatise, but available in the actual book)

When the vaccine inserts don't list all of the ingredients that the CDC lists, how do you know who to believe?

From the package insert found on the FDA's website dated December 26, 2017:

“What are the ingredients in Fluzone Quadrivalent Southern Hemisphere vaccine? Fluzone Quadrivalent Southern Hemisphere vaccine contains 4 killed flu virus strains.”

“Inactive ingredients include formaldehyde and octylphenol ethoxylate. The preservative thimerosal is only in the multi-dose vial of Fluzone Quadrivalent Southern Hemisphere vaccine.”

<https://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm112854.htm>

The CDC website lists the following ingredients *(bolded items are not disclosed on the package insert)*:

formaldehyde, **egg protein**, octylphenol ethoxylate (Triton X-100), **sodium phosphate-buffered isotonic sodium chloride solution**, thimerosal (multi-dose vials), **sucrose**

It's what is in vaccines that aren't even supposed to be there that is another huge cause for concern

A 2017 study using sophisticated technology, finds toxic compounds not listed in the ingredients lists of 44 different vaccines

A 2016 article published in the *International Journal of Vaccines and Vaccination* titled, **New Quality-Control Investigations on Vaccines: Micro- and Nanocontamination**, reveals a shocking conglomeration of **NON-biocompatible particulates and foreign bodies in randomly selected batches of 43 different human vaccines and one veterinary vaccine**. Ironically, the veterinarian vaccine checked out to be cleaner than all of the human vaccines. **This essentially means that all of the human vaccines are “dirty”, containing unintended particulates and aggregates of metals and foreign matter, most likely from the manufacturing process.**

<http://medcraveonline.com/IJVV/IJVV-04-00072.php>

The researchers used Field Emission Gun Environmental Electron Scanning Microscope, equipped with an X-ray microprobe. The study highlights pictures of the particulates and substances found.

“all samples checked vaccines contain non biocompatible and bio-persistent foreign bodies which are not declared by the Producers, against which the body reacts in any case.”

In addition to aluminum, which is disclosed in some vaccines, **they found aluminum in some vaccines that don’t list in in the ingredients list. Also**

discovered was lead, stainless steel, tungsten, silicon, gold, silver, nickel, iron, chromium, copper, zirconium, Hafnium, Strontium, Antimony, Platinum, Bismuth, Cerium, and aggregates of combinations of these metals and biological compounds the researchers called nano-bio-interactions, some with what they describe as having a “protein corona”.

“Figure 5a-5f show examples of these nano-bio-interactions. Aggregates can be seen (stable composite entities) containing particles of Lead in Meningitec, (Figure 5a & 5b) of stainless steel (Iron, Chromium and Nickel, Figure 5c & 5d) and of Copper, Zinc and Lead in Cervarix (Figure 5e & 5f). Similar aggregates, though in different situations (patients suffering from leukemia or cryoglobulinemia), have already been described in literature. **The link between these two entities generates an unfolding of the proteins that can induce an autoimmune effect once those proteins are injected into humans.**”

“The investigations revealed that some particles are embedded in a biological substrate, probably proteins, endo-toxins and residues of bacteria. As soon as a particle comes in contact with proteic fluids, a nano-bio-interaction [6] occurs and a “protein corona” is formed. **The nano-bio-interaction generates a bigger-sized compound that is not biodegradable**

and can induce adverse effects, since it is not recognized as self by the body.”

“(Figure 7a & 7b) present an area of Repevax where the morphology of red cells - we cannot tell whether they are human or animal- is clearly visible.” *What? Wow!*

Ok, you have got to read this! It is the discussion by the researchers at the send of the study. It is worthy to print nearly the entire section.

Discussion:

“The quantity of foreign bodies detected and, in some cases, their unusual chemical compositions baffled us. The inorganic particles identified **are neither biocompatible nor biodegradable, that means that they are **biopersistent and can induce effects** that can become evident either immediately close to injection time or after a certain time from administration. It is important to remember that particles (crystals and not molecules) **are bodies foreign to the organism and they behave as such**. More in particular, their toxicity is in some respects different from that of the chemical elements composing them, **adding to that toxicity** which, in any case, is still there, that typical of foreign bodies. For that reason, **they induce an inflammatory reaction.**”**

“After being injected, those microparticles, nanoparticles and aggregates can stay around the injection site forming swellings and granulomas. But **they can also be carried by the blood circulation, escaping any attempt to guess what will be their final destination.** We believe that in many cases they get distributed throughout the body without causing any visible reaction, but **it is also likely that, in some circumstances, they reach some organ, none excluded and including the microbiota, in a fair quantity.** As happens with all foreign bodies, particularly that small, **they induce an inflammatory reaction that is chronic** because most of those particles cannot be degraded. Furthermore, the protein- corona effect (due to a nano-bio-interaction) can produce organic/inorganic composite particles **capable of stimulating the immune system in an undesirable way. It is impossible not to add that particles the size often observed in vaccines can enter cell nuclei and interact with the DNA.”**
WOW!

“In some cases, e.g. as occurs with Iron and some Iron alloys, **they can corrode and the corrosion products exert a toxicity affecting the tissues.”**

“The detection of presence of Aluminum and NaCl salts is obvious as they are substances used by the Producers and declared as components, but other materials are not supposed to be in the vaccine or in any other injectable drug, at that, and, in any case,

Aluminum has already been linked with neurological diseases.”

“Given the contaminations we observed in all samples of human-use vaccines, adverse effects after the injection of those vaccines are possible and credible and have the character of randomness, since they depend on where the contaminants are carried by the blood circulation. It is only obvious that similar quantities of these foreign bodies can have a more serious impact on very small organisms like those of children. Their presence in the muscles, due an extravasation from the blood, could heavily impair the muscle functionality.”

“In any case, whatever their origin, they should not be present in any injectable medicament, let alone in vaccines, more in particular those meant for infants.”

“Other forms of so-far unknown contaminations have recently been observed and, in any case, vaccines contain components that could themselves be the cause of adverse effects. It is a well-known fact in toxicology that contaminants exert a mutual, synergic effect, and as the number of contaminants increases, the effects grow less and less predictable. The more so when some substances are unknown.”

All of that should frighten anyone reading this!

The introduction of the article also has much to say **about the known side effects of vaccines**. Here is part of that discussion:

“**Side effects** have always been reported but in the latest years it seems that they **have increased in number and seriousness, particularly in children** as the *American Academy of pediatrics* reports [1,2]. “For instance, the diphtheria-tetanus-pertussis (DTaP) vaccine was linked to cases of **sudden infant death syndrome (SIDS)** [3]; (*MMR*) measles-mumps-rubella vaccine **with autism** [4,5]; **multiple immunizations with immune disorders** [6]; **hepatitis B vaccines with multiple sclerosis, etc.**”

“The notice of Tripedia DTaP by Sanofi Pasteur reports “**Adverse events reported during post-approval use of Tripedia vaccine include idiopathic thrombocytopenic purpura, SIDS, anaphylactic reaction, cellulitis, autism, convulsion/grand mal convulsion, encephalopathia, hypotonia, neuropathy, somnolence and apnea**”. The epidemiological studies carried out did not show a clear evidence of those associations, even if in 2011 the National Academy of Medicine (formerly, IOM) admitted: “**Vaccines are not free from side effects, or adverse effects**” [7].”

“Specific researches on components of the vaccines like **adjuvants (in most instances, Aluminum salts)**

are already indicated as possible responsible of **neurological symptoms** [8-10] and in some cases, in-vivo tests and epidemiological studies demonstrated a possible correlation with **neurological diseases** [10,11]. **Neurological damages** induced in patients under hemodialysis treated with water containing **Aluminum** are reported in literature [12].”

“Recently, with the worldwide-adopted vaccines against **Human Papillomavirus (HPV)**, the debate was reawakened due to some adverse effects reported by some young subjects. Specific studies communicated the existence of **symptoms related to never-described-before syndromes developed after the vaccine was administered**. For instance, **Complex Regional Pain Syndrome (CRPS)**, **Postural Orthostatic Tachycardia Syndrome (POTS)**, and **Chronic Fatigue Syndrome (CFS)** [13]. The side-effects that can arise within a relatively short time can be local or systemic.”

[1200 STUDIES – THE TRUTH WILL PREVAIL]

Need we say more!!!

CONCLUSION

Vaccination and all vaccines are Haraam! ‘Mufti’ Ebrahim Desai and his sciolist ilk have miserably failed to academically prove the permissibility of vaccines from the Fiqhi point of view. According to the principles of Iftaa, vaccination is Haraam.

Vaccination causes harm and the Shariah does not permit the introduction of filth and poison into one’s body with the silly purpose of preventing or combatting an imaginary and hallucinated future sickness – an illness which would not arise even in the absence of a vaccine!

VACCINATION IS HARAAM!!!

THIS BOOK IS ALSO DOWNLOADABLE FROM
THE FOLLOWING WEBSITE:

www.jamiatnc.co.za/books



*Nabi Sallallahu Alayhi Wasallam said:
“Allah did not create the shifa’ (cure)
of my Ummah in substances which
have been made haraam for them.”*

[Sunan Abu Dawood]