

FUTURE VOICE[®]



mRNA

HUMAN RIGHTS | VOICES

MAGAZINE VII - 03 | 2022

*All human beings are born free
and equal in dignity and rights.*

*They are endowed with reason and conscience
and should act towards one another in a spirit of
brotherhood.*

Human Rights Charta, Article 1

Alarmed by the flood of reports on the terrible side effects of the Covid-19 vaccines, as well as by an explosion in the number of deaths following the vaccinations, independent medical professionals and scientists in many parts of the world have begun to take a closer look at these vaccines produced by various manufacturers.

The discoveries explain a lot

So, in this magazine, we take a closer look at the remarkable research findings from New Zealand (Page 8-19), Spain (Page 20-41), Argentina (Page 42-59) and Germany (Page 60-71). At the end of each article, you will also find links to presentations, PDFs, interviews and videos on the important first-hand information.

To introduce this magazine, we give the floor to the research team from Argentina and take over the introduction from their presentation, which is only available in Spanish, but is definitely highly recommended.

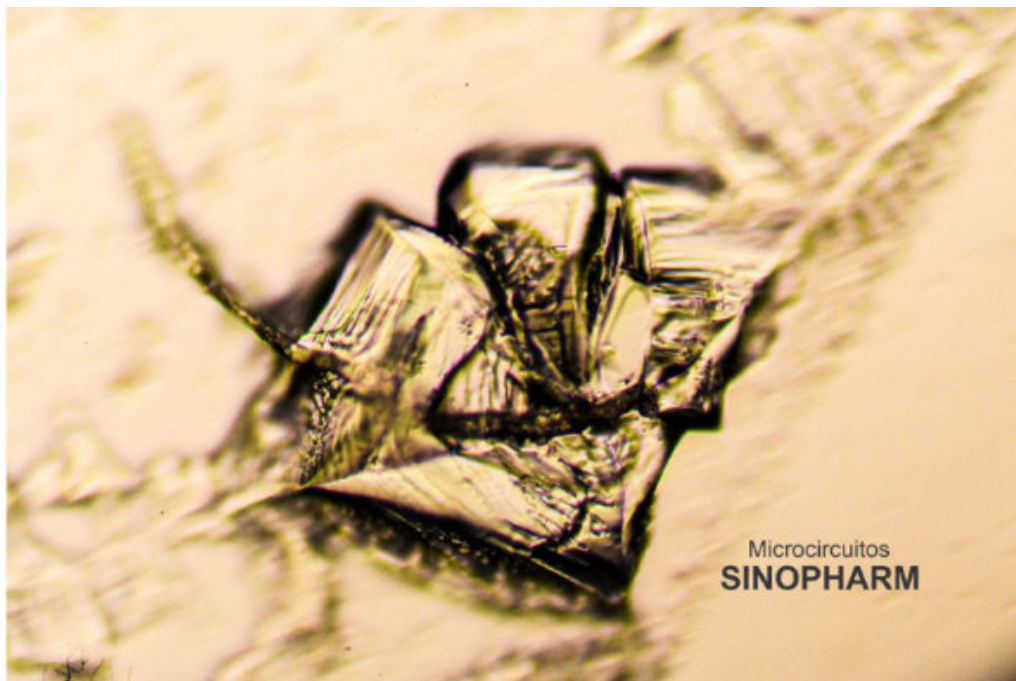
INTRODUCTION

From:

Analisis Argentino de los viales Astrazeneca, Pfizer, Sinopharm

Translation by:

<https://dailyexpose.uk>



Taking into account that in the Chinese scientists' publication of the Lancet on 22 February 2020 they themselves admit that they artificially created a genome by consensus using at least 3 softwares and extracting data from the internet Genebank.

That after that publication no country or institution in the world has been able to isolate or sequence in a real way, nor cultivate the supposed SARS-CoV-2. That therefore the virus does not exist in nature nor does it circulate among human beings.

That the WHO has banned autopsies in all countries.

That the Italian doctor Pasquale Bacco performed 400 autopsies in June, July, August 2020 on patients diagnosed with Covid, but did not find damage to the lung compatible with viral pneumonia, but instead found micro clots disseminated in the lung.

That in patients suffering from massive pulmonary thromboembolism intubation is contraindicated.

That Mr. Bill Gates established a level of total censorship on the networks so that dissident doctors and scientists would not be heard.

That 86 grandparents died in a residence in 6 hours in Spain.

In Washington, 80 grandparents died in a residence in 4 hours.

That the grandparents had previously been vaccinated with the 2019-2020 influenza vaccine.

That the Barbastro report showed that they had deceased grandparents who were vaccinated.

That the flu vaccine contained graphene, analysis of Ricardo Delgado.

That once the year 2021 and the Vaccination Campaign began, death statistics began to rise in the reporting countries.

That we began to see serious damage from the vaccine, neurodegeneration, seizures, Alzheimer's, thrombosis, arrhythmias, sudden deaths, paralysis, blindness, myelitis encephalitis, haemorrhages, pregnancy losses multiplied by 6,800.

That simultaneously we began to observe the phenomenon of magnetism in the vaccinated.

That we also observe that the vaccinated emit a Bluetooth code.

That they immediately forced the population to a second dose, then a third, then a fourth ...

That Mr. Bill Gates and Mr. Klaus Schwab they have an obsession with reducing the world's population.

That in June 2021 Professor Pablo Campra confirmed the presence of graphene in a Pfizer vial, which was ratified in November 2021 with vials from AstraZeneca, Moderna, Janssen and Pfizer.

That the Chilean researchers confirmed the presence of graphene in the vials of Sinovac, AstraZeneca and Pfizer.

Likewise, in the United States, Dr. Carrie Madej, Dr. Jane Ruby, and the scientist Robert Young confirmed the presence of graphene in the vials.

Also in the United States, Dr. Zandre Botta confirmed the presence of graphene microbubbles in the blood of those vaccinated, as did the French scientists who found graphene in blood samples.

That German scientists found graphene when analysing vials and in the blood of those vaccinated.

That Japan withdrew 2,600,000 Moderna vials for containing magnetic metallic particles.

That the Argentine Ministers of Health have not answered our questions regarding the contents of the vials.

The National Congress passed a law granting confidentiality on the content and impunity to the laboratories for any damage that the vaccines could cause.

Our President of the Nation declared that Argentina was one of the 10 countries chosen to experiment with the population.

That the ANMAT did not analyse a single vial.

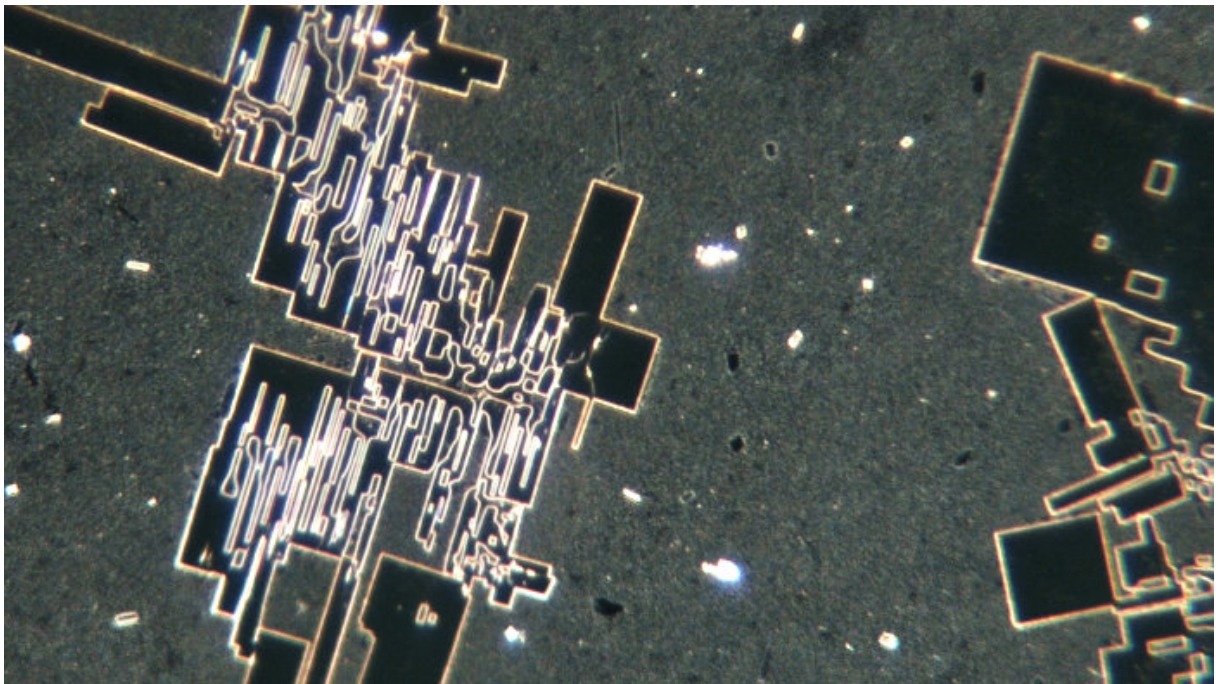
That in Argentina more than 30 children have died one day after the vaccine.

Throughout the world it is evident daily how professional athletes collapse or become unbalanced in full sports activity.

That the governments and the media are covering everything up.

For all these reasons, we have decided to do our own research on the content of vials from Pfizer, Astrazeneca, Sputnik, Sinopharm and Cansino.

NEW ZEALAND



IT'S a small world: MICRO-TECH IN THE JABS?

February 8, 2022

Article by:

© NZDSOS
New Zealand Doctors Speaking Out With Science

Disclaimer: The following article contains information alleging contamination of COVID-19 vaccines. We have sent this to Government Ministers and Medsafe but they have ignored multiple requests to meet.

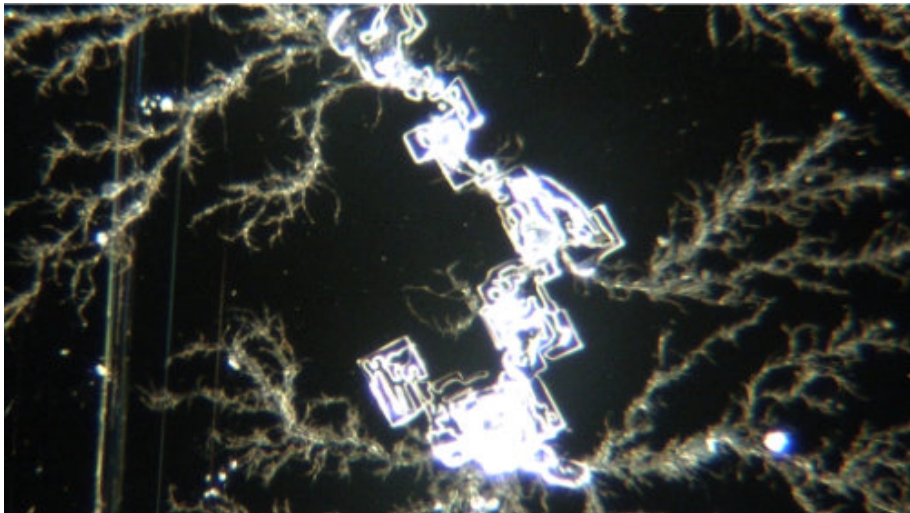
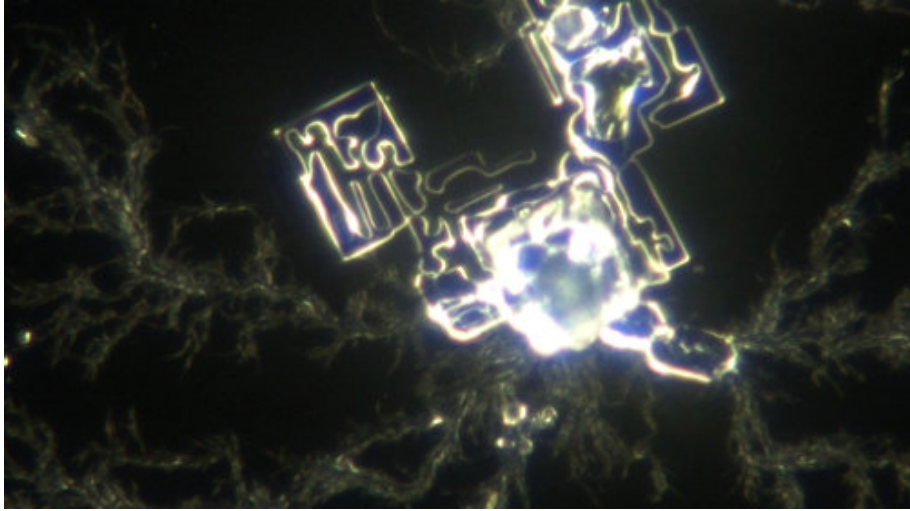
Micro-tech? Short version.

There seem to be micro-scale and possibly self-assembling electronic components in the Covid-19 jabs. We have seen pictures of this in the jabs given in New Zealand. This could provide further explanation for the [harm](#) already apparent. We have called on the government to stop the rollout immediately and investigate these findings. However, they won't or can't. So, we must act, and before who knows what happens next to people. Read the last few paragraphs, then see some of the images.

Micro-tech? Long version.

For some months we have watched with mounting alarm whilst evidence emerged from overseas groups of microscopic-sized gadgets and graphene compounds in all the current C-19 injections. Some awake Kiwis are aware of these scientists already. [Orwell.city](#) is a good starter. [So is this](#). Everyone should watch these eminent [German pathologists](#).

This information we received was high quality, of legal standard for court actions and completely consistent with the known state-of-the-art work in interfacing the human brain with technology. Much of this work has been [driven by the world's military](#), so that battlefield soldiers can assimilate more information, make smarter decisions and coordinate with ever more high-tech ways of killing other people. Tiresome topics like 'neuro-ethics' are being rationalised away, a bit like free speech, and binary gender.



Informed consent.

Whatever the intent of this added extra, none of the billions vaccinated were ever asked, or gave their consent, to be 'vaccinated' with microscopic components, seemingly of an electronic nature. We felt it urgent to confirm if the participants in our country were exposed to this tiny technology, but feared the worst, given the global destinations from the Pfizer factories.

Seeing for ourselves.

We bought a good microscope and had a look at some kindly donated unused vials, warmed to approximately body temperature. Lo and behold, after several hours of a drop drying and warming on a slide, from a possible soup of the very tiny lipid nanoparticles, we started to find geometric shapes appear, perfect right angles, and 3-D, like cut pastry. These objects did not appear organic and certainly not what is found in nature. If the [vial contains](#) RNA (made of up sugar, phosphate, carbon and nitrogen), some fat, salt and sugar then what are these man-made appearing microscopic objects?

Nature rarely does straight lines, and these structures looked precision cut, and very similar to images from the overseas expert science groups. Their spectroscopy already had confirmed the presence of graphene, aluminium and other elements not found in nature's recipe book.

Stupidly, we did not think to confirm "chain of custody" at the time, an essential step the police demand to investigate claims of contamination. It's gift wrapping the evidence and doing their job for them in our view, but prosecutors absolutely demand it.

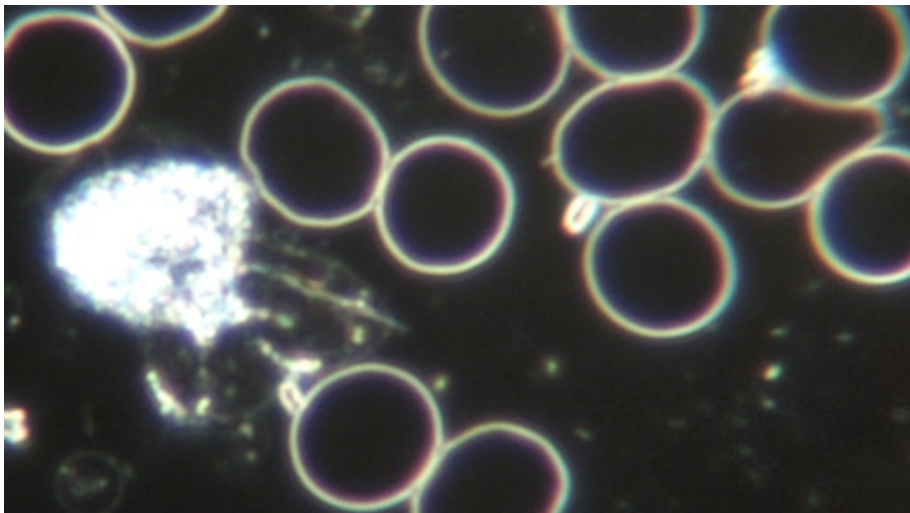
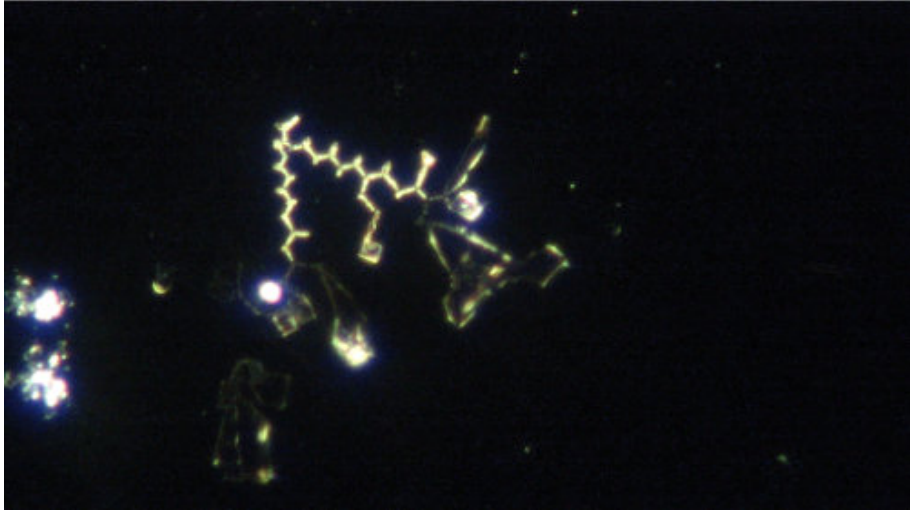
We kicked ourselves. There were clues of a possible crime beforehand though: the coup against informed consent and primum non nocere and persecution of ethical doctors; the suppression of early treatments and doctors who tried to use them; the dreadful scale of death and injury flatly ignored by the government; the cruelty and coercion of the mandates; using children ostensibly to shield the elderly; refusing further exemptions for people already wounded by their jabs. Most egregious is the weaponisation of the community against itself by a relentless military-grade psy-op, using cynical media messaging that would make Goebbels proud.

Back to our story, now becoming a bit 007. As we realised the stark truth of probably computerised Comirnaty, we heard of another group in New Zealand doing their own assessments, with more skill, training, and better gear. We visited them, trusted their technique and equipment, and the implications of what they found really shocked us. They recorded what looked like circuit boards, chips, possible antenna arrays and routers and modems. Comirnaty looked less like a medicine and more like an Alibaba electronics catalogue. Videos clearly show glinting, and reflection from flat surfaces, as in shiny metal or glass. There were identical structures repeated often, possibly wiring themselves together, and many tiny circular doughnut shapes that seemed to be the progenitor “egg” from which other structures would form. In one incredible sequence, there is what appears to be an assembly process in real time, possibly of a carbon microtube, with tiny bots seeming to spin the end longer. The Spaniards postulate this may be all be driven by synthetic DNA crystals containing computer code.

To be clear, nano-scale means objects down to billionths of a meter, or millionths of a millimeter. Yes, scanning electron microscopes are required at this scale. Our microscopes observe down to micro-scale. A red blood cell is around 8 microns, or micrometers, in diameter.

The microscope images show structures, shapes, geometry, symmetry and interconnectedness that **do not occur in nature**, or in other vaccines, as far as we can tell. [Previous work](#) has showed contaminants in other vaccines, but not of this nature.

Despite again lacking final proof of chain-of-custody of the samples provided, we had seen the vials and were convinced that this all needed urgent investigation. Back in Wellington, on January 28th we called for an immediate meeting with officials and regulators to talk them through these stunning images. After initial agreement, their lawyers pulled them out with hours to go. Whilst meeting anyway and planning what to do next, one of our team received a text notifying of the death of a 15 year old girl post vaccine. The irony was savage.



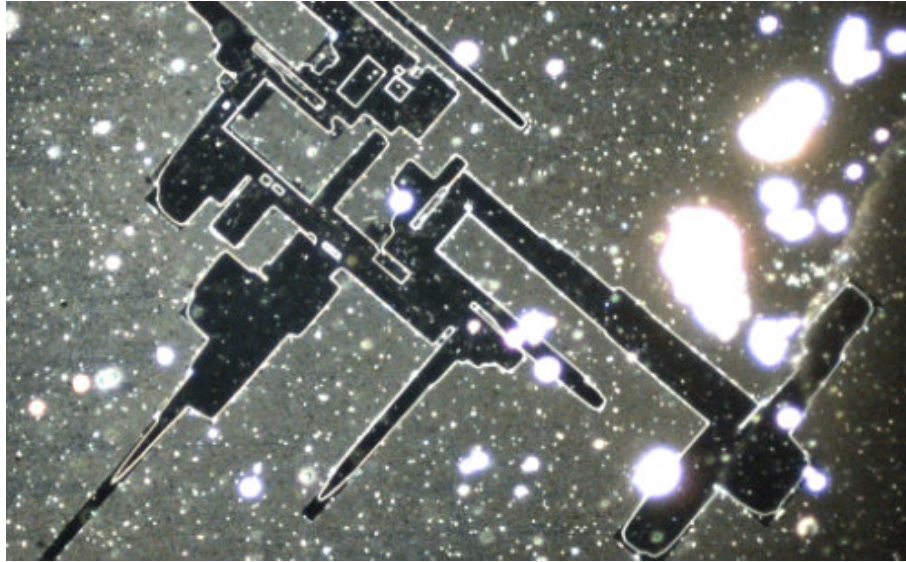
An hour later we appealed to the Health Select Committee during a livestream, explaining serious health concerns and the regulators avoiding us. No-one rang us to follow up. We have subsequently sent 2 lawyer's letters asking for a response from Ministers and a final appeal directly to the Medsafe regulator. We have learned that these are being labelled as faked line drawings and they will not investigate further – and frankly maybe they can't. Pfizer's contract with the Government is said to include a clause forbidding any testing. This has been outed by whistle-blowers in other countries who have seen the Pfizer contracts.

These findings are so alarming that governments would be hard-pressed to find anyone in their right mind to consent to taking the jab, had they seen the evidence first.

Increasingly, overseas groups are finding the same micro-tech, reporting on the web and sleuthing the meaning. So we are not the first to bring this information to light. The European public, for instance, are waking up.

Remember that Pfizer and Moderna have negotiated the 'legal' right to withhold some ingredients. It may be legal, but it is surely not moral. We've done our bit trying responsibly to make the regulators and Government aware of this evidence, suggesting as it does further harmful ingredients in this witch's brew. Maybe this microtech is what is also causing the harm, not just the spike protein, PEG, and untested lipids etc. You will notice how sharp some of the gadget corners are.

The very people who could pull an immediate plug, as the rollout ploughs through our primary schoolers, are lost at sea. So, we are now presenting publicly in the hope that pressure can be brought for a full investigation. Many obvious but very unpleasant questions arise if we accept these images are real. We have to go to the police, with or without chain of custody proof although we are busting a gut to get it. The public are at risk. Some police staff are aware of what we have found and advise that proving CoC will help prevent political interference. Evidential files accepted by London's Metropolitan police and the International Criminal Court also contain the nano research from overseas, in addition to the evidence already gathered of the scale of death and injuries, and alleged deception and fraud. We are in a position to make sworn statements that can at least get us through the station door, perhaps the one shoulder-barged on behalf of the vaccine injured at New Plymouth last week.



It is not for NZDSOS to surmise what this all represents despite our grave suspicions. It is for us however – versed in clinical sciences, research and lab work, governance, the history of tyranny and control – to ask questions. Here's one: what on earth will this stuff do inside us? And another: how do the authorities know there is no risk to the public? Can they really afford to ignore us, and just hope that we are wrong and they are right?

Klaus Schwab, of the World Economic Forum, and his ilk have been writing for years in plain sight, [of their 'visions' for humanity](#). [Their ideas](#) have been endlessly espoused and criticised on the internet. Based on the findings here, and previously from Spain, Argentina, and the UK, we must ask if their musing of uploading human consciousness is an actual smokescreen for a much more sinister downloading, of very high frequency bits and bytes that may take over a person's thoughts, feelings and behaviour – if not permanently damage the nervous system? It sounds ridiculous, that someone may be made a prisoner in their own body, but it is easy to verify that 'biohacking' and brainNet are sharp-edge science. The brain is where most of these injected micro-components will end up by the way, as it is a sponge for blood flow. Around a third of each heartbeat goes straight to the brain.

Your turn to look at the possible micro-tech.

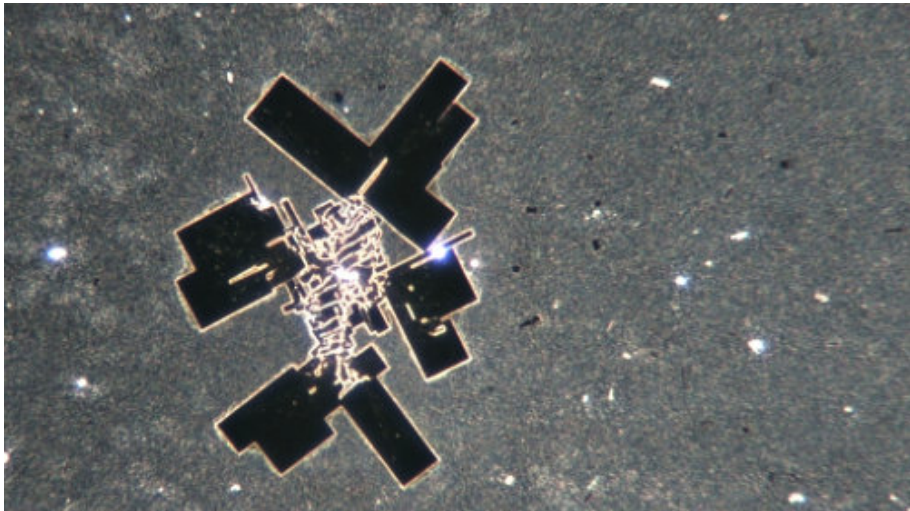
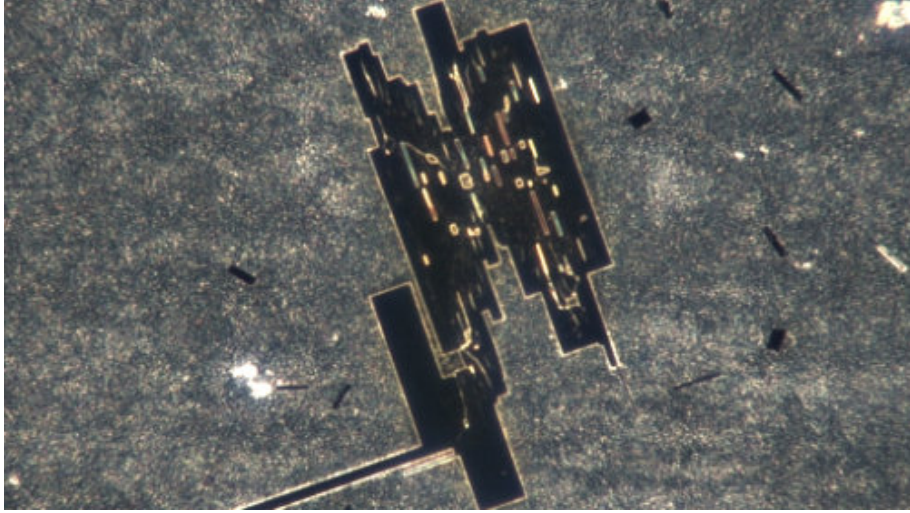
Before viewing the images [on the website](#) the Kiwi science team have created, please remember the following:

1. MOST INJECTED PEOPLE SEEM TO BE FINE, despite this being the most harmful vaccine in modern medical history. We discovered the Government planned for a 1.1% serious injury rate, which seems about ballpark. In our little country of few degrees of separation, most of the other 99% will know of others with a serious adverse event. SO, FURTHER JABS MUST STOP IMMEDIATELY. Quit while you are ahead; do not push your luck by loading up on possible graphene cocktails, particularly since omicron is relatively mild and needs no treatment in most.

2. The images are highly magnified, up to 4000x – the digital camera can magnify another 4 times over the optical lens system – and, yes, they can look freaky, but the scariest thing is that some people seem to have adulterated the shots on purpose. We have yet to find any evidence that these appearances have occurred before Covid and may only be artefacts. We are open to the remote possibility that this is all a storm in a teacup, a constellation of incredible coincidences. That is our wish, but we have consulted widely amongst science colleagues, and we are out of luck.

3. If very smart – but very dark, it must be said – people can put this ‘plan’ together, then our brightest and best can figure out what needs to be done about it all. They need the funding, the equipment, the truth about hidden technologies, and to not be killed.

4. If we do accept the images are real, and do represent a deliberate implantation of secret technology, what else is waiting in the wings? Does the micro-technology become active straight away; is it really just ‘the way the world is going’ to enable peace and prosperity for all; or do all the new fifth generation radio-frequency towers (many appearing during our first lockdown) and constantly circulating new satellites have more to do than just allow our underwear to talk to our stereo via the Internet of Things? We thought that streaming movies downloaded fast enough already with coal-fired 4G technology, but perhaps now they are to be beamed directly into our heads. Well, we’ll take that remote control back from you Mr Schwab et al, thanks very much.



Sardonic joking aside, it seems to us there is a range of possibilities that would fit the facts as alleged here, most of them a real danger to humanity, if it will still remain as such. It is abundantly clear by now that the real danger in all this is not coming from the unvaccinated.

PLEASE consider this information, despite any instinct to reject it, then make a conscious choice to accept whether we have been lied to, over and over, and on a monstrous scale.

Then please ACT. Demand that your local and national representatives investigate.

Whilst you still can.

We have not had time to catalogue and provide detailed descriptions here, suffice to say these appearances are not normal and we pass on the responsibility to investigating authorities, and inform the public.

See the [scientists' images here](#). We have sent a few of ours for consideration too.

LINKS

NZDSOS Website | It's a Small World: Micro-tech in the Jabs?

<https://nzdsos.com/2022/02/08/its-a-small-world-micro-tech-in-the-jabs/>

Life of the Blood

<https://lifeoftheblood.com/who-we-are/>

Interview with Dr. Matt Shelton (Member of NZDSOS)

'Nanotech found in Pfizer jab by New Zealand lab'

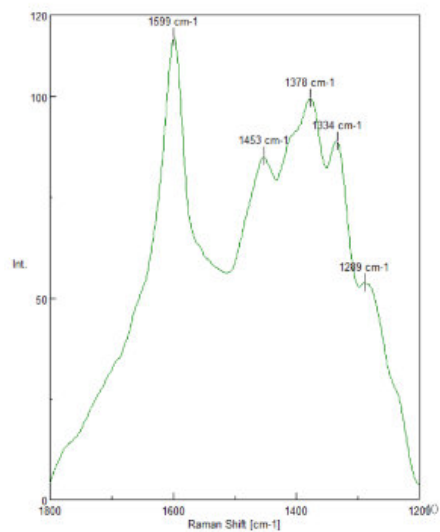
Bitchute | Odysee

SPAIN

20. PFIZER 3 ROS 2 OBJ2



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DETECTION OF GRAPHENE IN COVID19 VACCINES BY MICRO-RAMAN SPECTROSCOPY

November 2, 2021, Almeria, Spain

Excerpts from:

**Technical Report | Final Version,
published by
© Prof. Dr. Pablo Campra Madrid**

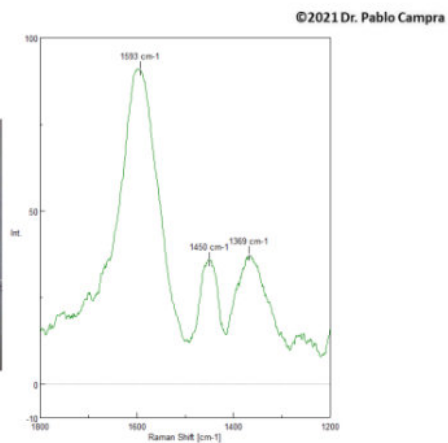
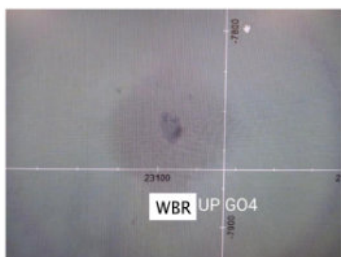
ASSOCIATE UNIVERSITY PROFESSOR
PhD in Chemical Sciences
Degree in Biological Sciences

We present here our research on the presence of graphene in covid vaccines. We have carried out a random screening of graphene-like nanoparticles visible at the optical microscopy in seven random samples of vials from four different trademarks, coupling images with their spectral signatures of RAMAN vibration.

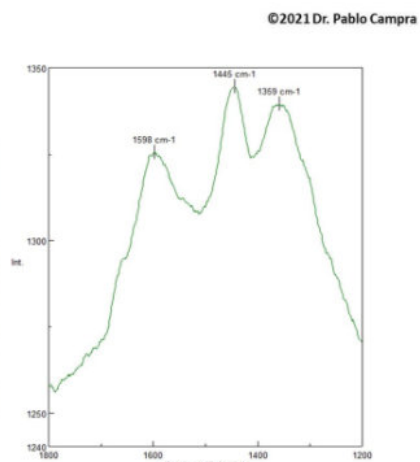
By this technique, called micro-RAMAN, we have been able to determine the presence of graphene in these samples, after **screening more than 110 objects** selected for their graphene- like appearance under optical microscopy. Out of them, a group of **28 objects have been selected, due to the compatibility of both images and spectra with the presence of graphene derivatives**, based on the correspondence of these signals with those obtained from standards and scientific literature. **The identification of graphene oxide structures can be regarded as conclusive** in 8 of them, due to the high spectral correlation with the standard. In the remaining 20 objects, images coupled with Raman signals **show a very high level of compatibility with undetermined graphene structures**, however different than the standard used here.

This research remains open and is made available to scientific community for discussion. We make a call for independent researchers, with no conflict of interest or coercion from any institution to make wider counter-analysis of these products to achieve a more detailed knowledge of the composition and potential health risk of these experimental drugs, reminding that graphene materials have a potential toxicity on human beings and its presence has not been declared in any emergency use authorization.

14. PFIZER 2 WBR UP GO4



16. FIZER 2 WBR DOWN GO3



1. ANALYTICAL METHODOLOGY

1.1. Fundamentals of the micro-Raman technique

Due to the characteristics of the sample and to the dispersion of objects with a graphene appearance of micrometric size in a complex matrix of indeterminate composition, the direct application of spectroscopic methods does not allow characterization of the nanoparticles studied here without a previous microscopic localization or fractionation from the original sample. Therefore, microscopy coupled to RAMAN spectroscopy (micro- RAMAN) was selected as an effective technique for an exhaustive screening of micrometric objects visible under the optical microscope.

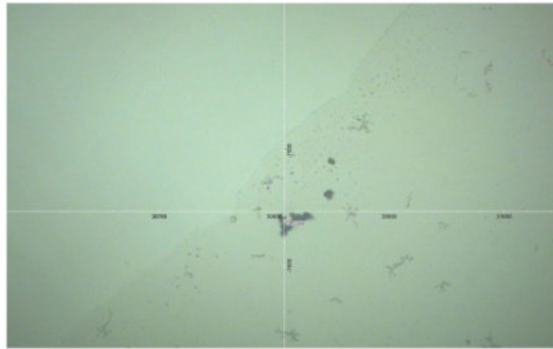
RAMAN infrared spectroscopy is a fast, non-destructive technique that allows the verification of the structure of this material by identifying vibrational modes and phonons generated after excitation with monochromatic laser, generating inelastic dispersion that manifests itself in peaks of infrared emission that are a characteristic signature of the reticular structure of graphene and derivatives. Coupled optical microscopy allows the excitation laser to be focused on specific objects and points located on objects, to reinforce the degree of confidence in identifying the nature of the material, and to obtain complementary information on thickness, defects, thermal conductivity and edge geometry of graphene nanocrystalline structures.

1.1.GROUP 1

OBJECTS WITH RAMAN SIGNAL SIMILAR TO THE REDUCED GRAPHENE OXIDE STANDARD

5. ASTRAZENECA AZMIT UP CARB1

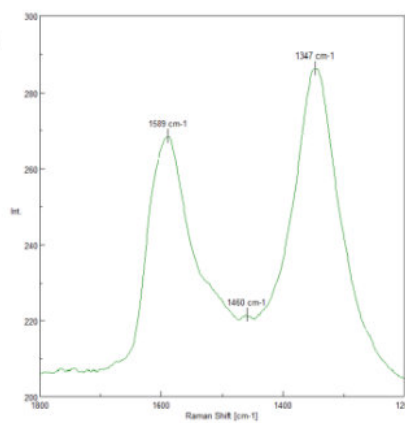
©2021 Dr. Pablo Campra



5. ASTRAZENECA AZMIT UPCARB1

©2021 Dr. Pablo Campra

$$I_D/I_G = 1.07$$

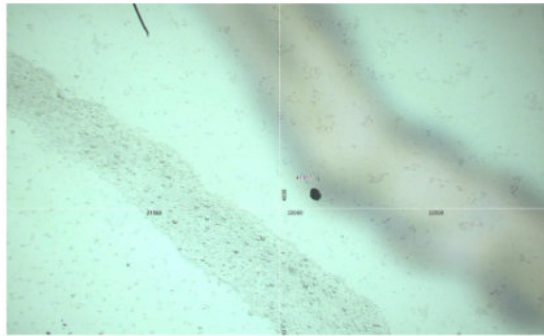


3. RESULTS AND DISCUSSION (*Excerpts*)

GROUP 1 included **8 objects whose spectral patterns were similar to the spectrum of the rGO pattern, and therefore** the presence of **graphene oxide (nº 1-8)** can be affirmed with certainty. This spectral correspondence can be considered **unequivocal** and is characterized by 2 dominant peaks in the scanned range (between 1200-1800 cm^{-1}), peaks called G ($\sim 1584 \text{ cm}^{-1}$) and D ($\sim 1344 \text{ cm}^{-1}$), characteristic of graphene oxides. This characterization by spectral correspondence between the signals of these nanoparticles and the rGO pattern is **f u r t h e r** reinforced by the microscopic appearance of these objects, all of them with an opaque carbonaceous appearance similar to that of the standard objects, as can be seen in the photographs in the Results annex. Therefore, **we can affirm with a high level of confidence that the identification of graphene material in all the analyzed samples of Group 1 IS CONCLUSIVE**, and with high probability graphene oxide structures can be assigned to these nanoparticles. These group 1 objects presented a micrometric size in ranges of tens of microns (shown as a blue line in photographs of some of them).

2. PFIZER 3
ROS 2 HY GO1

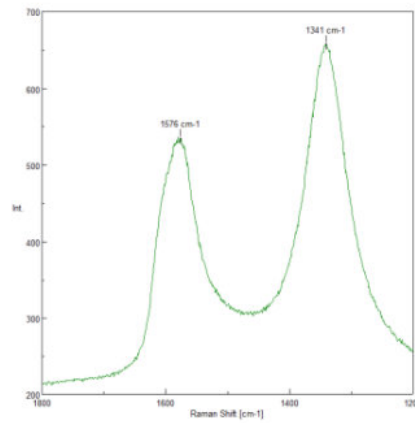
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2. PFIZER 3
ROS 2 HY GO1

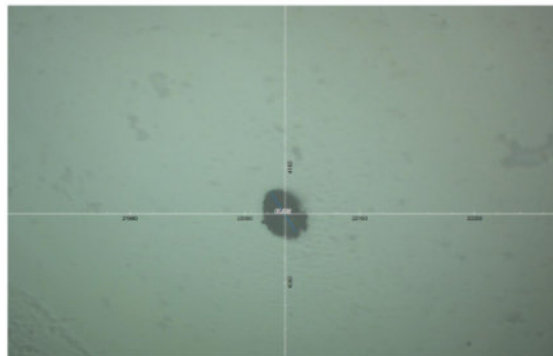
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$I_D/I_G = 1.22$

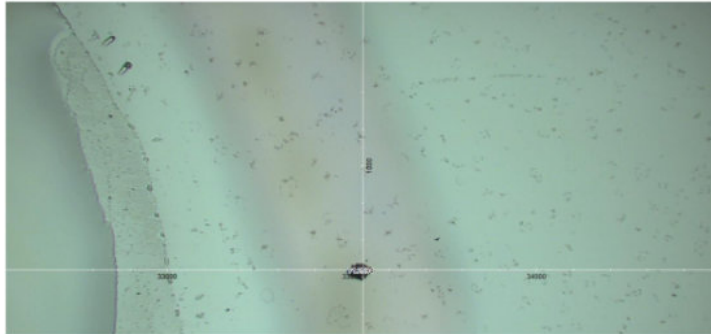


2. PFIZER 3
ROS 2 HY GO1

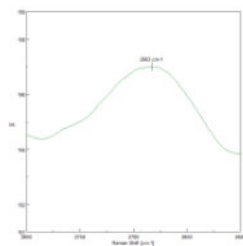
©2021 Dr. Pablo Campra



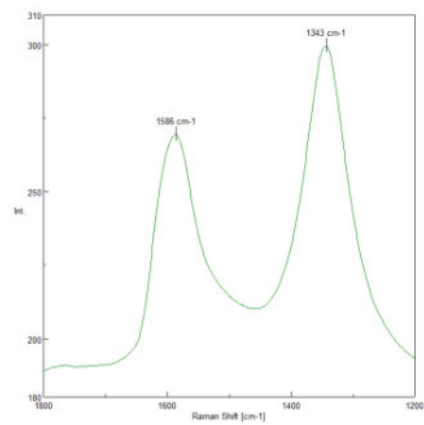
8. MODERNA MOD lump1



8. MODERNA MOD lump1



$$I_b/I_g = 1.11$$

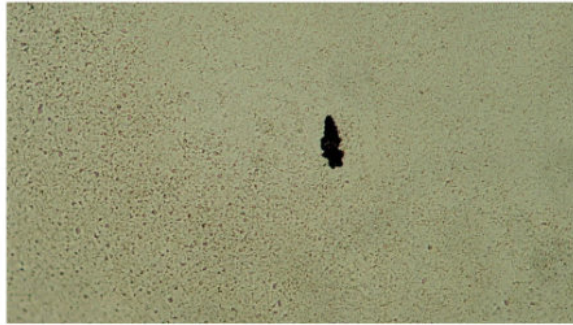


1.2.GROUP 2

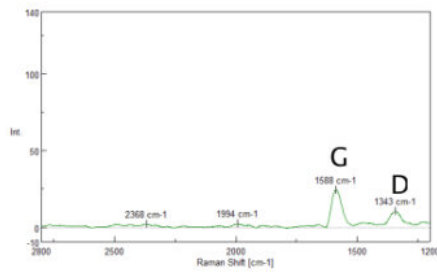
OBJECTS WITH SIGNALS COMPATIBLE WITH GRAPHITE OR GRAPHENE DERIVATIVES

In the second group of 20 objects (**GROUP 2**, nº 9-28), **RAMAN signals compatible with the presence of graphene** or graphitic structures have been detected, showing peaks of RAMAN vibrations around the G band (1585-1600 cm^{-1}), compatible with the G peak of the nanocrystalline structure of graphene or graphite. This vibrational mode is generated by the allowed vibration of the phonon in the plane of the aromatic ring (sp^2). Its drifting towards higher frequencies in some objects, tending towards 1600 cm^{-1} (*blue shift*) can be assigned to a wide variety of modifications referred extensively in the literature, such as, for example, the number of graphene layers or doping with functional groups or heavy metals others (Ferrari et al, 2007). Visually, this group includes the two types of appearances observed in the standards: whether opaque micrometric objects with a carbonaceous appearance (nº 9, 11, 16, 21, 22, 23, 24, 25, 26, 27 and 28) or translucent sheets with graphene-like appearance (nº 10, 12, 13, 14, 18, 19 and 20).

11. PFIZER 2 WBR2 GO7



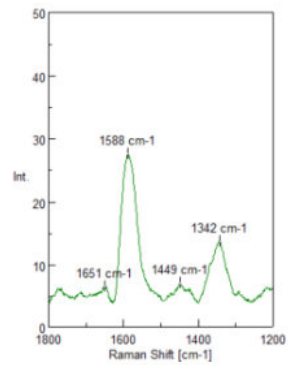
11. PFIZER 2 WBRGO7(1200-2800cm⁻¹)



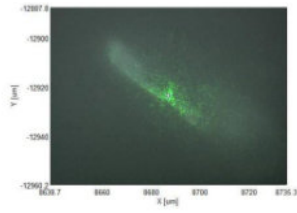
11. PFIZER 2 WBR GO 7



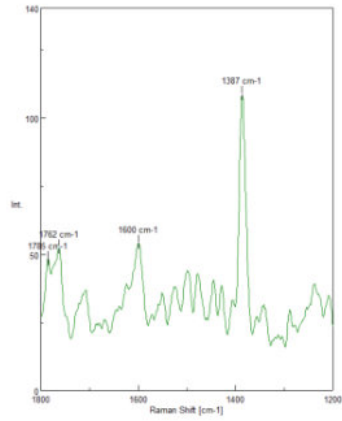
b/lc = 0.48



13. PFIZER WBR UP GO3b

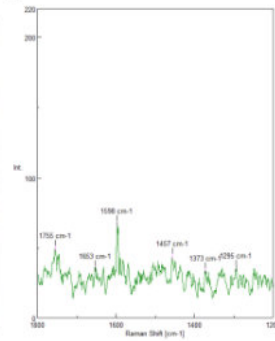
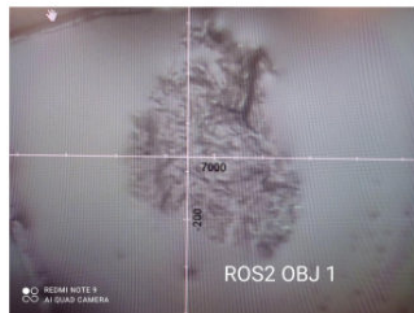


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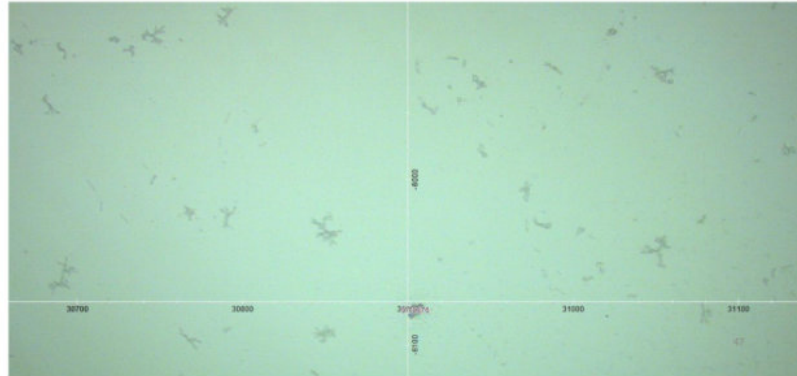


19. PFIZER 3 ROS 2 OBJ 1

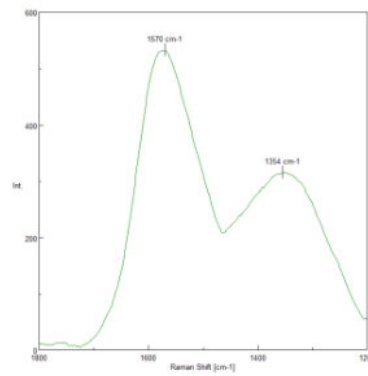
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24. ASTRAZENECA AZ MIT UP CARB5

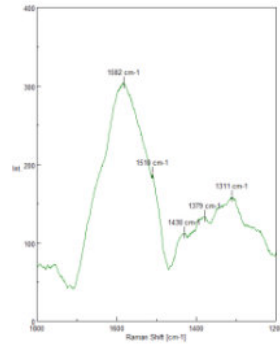
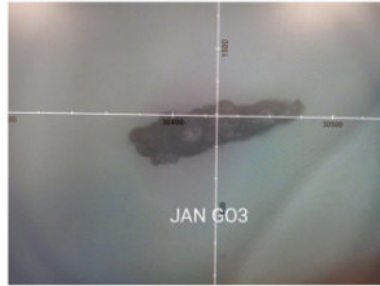


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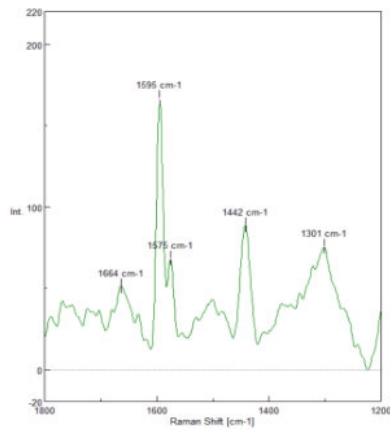


$$I_D/I_G = 0.59$$

27. JANSSEN JAN GO3



28. JANSSEN JAN GO4



CONCLUSIONS

A random sampling of COVID19 vaccine vials has been performed using a coupled micro-RAMAN technique to characterize graphene-like microscopic objects using spectroscopic fingerprints characteristic of the molecular structure.

The micro-RAMAN technique allows to reinforce the level of confidence in the identification of the material by coupling imaging and spectral analysis as observational evidence to be considered together.

Objects have been detected whose RAMAN signals by similarity with the standard unequivocally correspond to **GRAPHENE OXIDE**.

Another group of objects present variable spectral signals compatible with graphene derivatives, due to the presence of a majority of specific RAMAN signals (G-band) that can be assigned to the aromatic structure of this material, in conjunction with its visible appearance.

This research remains open for continuation, contrasting and replication. Further analyses based on significant sampling, using the described technique or others which are complementary would allow us to assess with adequate statistical significance the level of presence of graphene materials in these drugs, as well as their detailed chemical and structural characterization.

LINKS

Technical Report | Final Version | November, 2 2021 | EN | PDF

Website: LA QUINTA COLUMNA | www.laquintacolumna.net

Interim Report | June, 28 2021 | EN | PDF

Website: <https://revwarfare.com/mrna-vaccine-studied-under-electron-microscope/>

Special Program on the technical report on the detection of graphene oxide in COVID vaccines, explained by Dr. Pablo Campra

Website: ORWELL CITY | www.orwell.city/2021/11/special-program.html

Video presentation on Rumble

IDENTIFICATION OF PATTERNS IN coron@v |rus vaccines: nanorouters

November 25, 2021

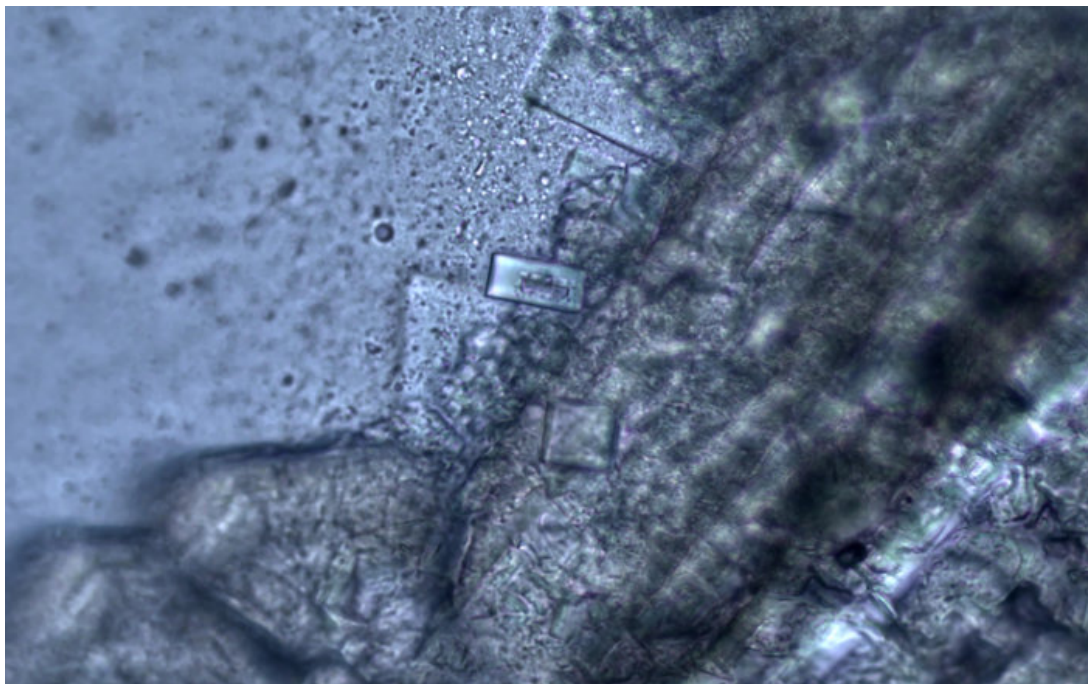
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Images by:

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Presentation: DNA CRYSTALS IN COVID19 VACCINES, Feb. 5th, 2022



Since graphene oxide was discovered in c0r0n@v|r0s vaccines, all the findings and discoveries made have only confirmed its presence (Campra, P. 2021). To date, more than reasonable evidence and indications of the existence of [carbon nanotubes and nanooctopuses](#), [mesoporous spheres](#), [colloidal nano-robots](#) have also been found; objects that should not be part of any vaccine and that are not declared among the components of the same. Additionally, other types of objects have been identified and evidenced in images of blood samples, of people vaccinated with the c0r0n@v|r0s vaccines, specifically [micro-swimmers](#), [Crystallized graphene nano-antennas](#) and [graphene quantum dots](#), also known as GQDs.

On this occasion, analyzing [one of the images obtained by Dr. Campra](#), corresponding to a sample of the Pfizer vaccine, see Figure 1, what is most likely a nanorouter or part of its circuitry has been discovered. In the original image, a well-defined drop can be seen in which crystalline structures of quadrangular or cubic format appear. If you look closely, you can see some marks on these crystals, with a regular pattern, well defined in some cases, but limited by the microscope optics.

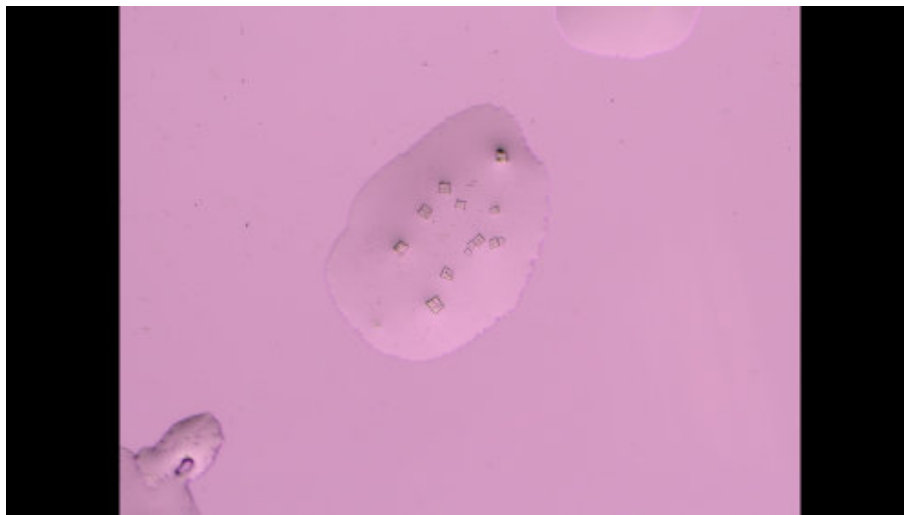


Fig.1. Crystal formations that show marks of what appear to be circuits. Among these objects, the circuit of what could be a nanorouter has been discovered. Image of a sample of the Pfizer vaccine, obtained by (Campra, P. 2021).

The finding has been possible by isolating each quadrangular crystal, applying a rasterization process, focusing and delimiting the edges of the image, in order to further pronounce the observed marks. Once this process was complete, a rough draft was drawn with the lines and patterns inscribed on the glass, creating a clean outline of what actually looked like a circuit. The fact of finding parallel and perpendicular lines with a distribution far from the fractal patterns was very striking, which allowed to automatically infer the possibility that it had been a product of manufacture. For this reason, similar patterns were searched for in the scientific literature, which had a similar scheme, similar to the circuit that had just been drawn. The search result was almost immediate.

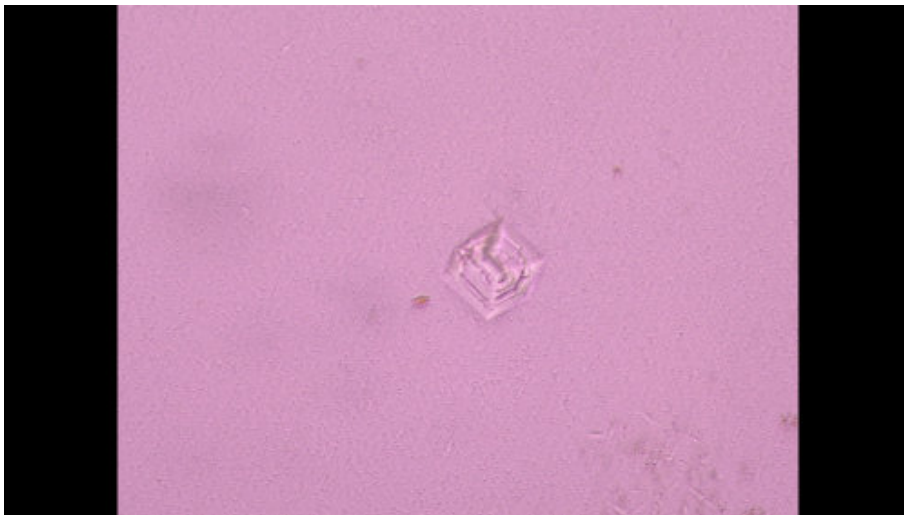


Fig.2. Possible quantum dot nanorouter observed in a quadrangular crystal, in an image obtained by the doctor (Campra, P. 2021).

This discovery is of fundamental relevance, not only to understand the true purpose and components of the c0r0n@v|rus vaccines, but also to explain the existence of the phenomenon of MAC addresses, visible through the bluetooth of many mobile devices.

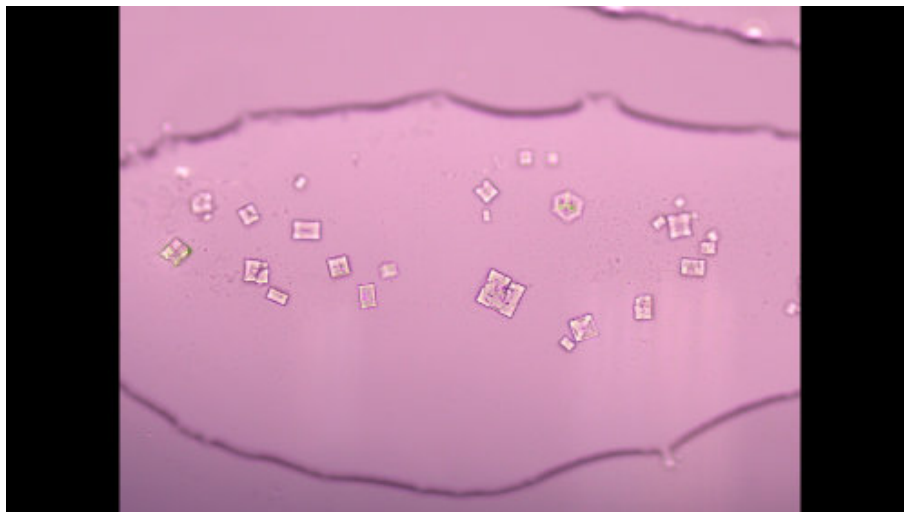
Discovery Context

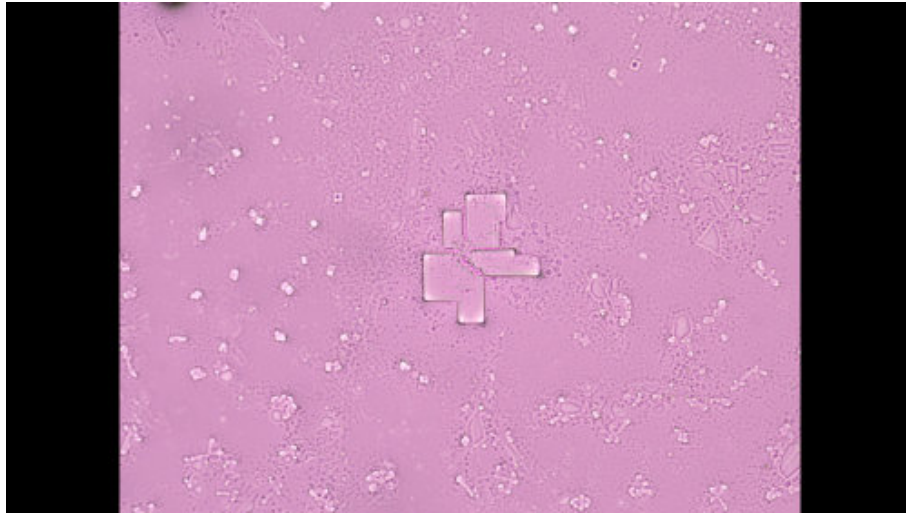
Before proceeding to the explanation of the finding, it is convenient to remember the context in which it is framed, in order to ensure its understanding and subsequent deepening.

First of all, it should be kept in mind that graphene and its derivatives, graphene oxide (GO) and carbon nanotubes (CNT), are part of the components of vaccines, according to what has already been explained in this blog. The properties of graphene are exceptional from a physical point of view, but also from a thermodynamic, electronic, mechanical and magnetic point of view. Its characteristics allow its use as a superconductor, absorbing material for electromagnetic waves (EM microwaves), emitter, receiver of signals, quantum antenna, which makes it possible to create advanced electronics on a nano and micrometric scale. So much so, that it is the fundamental nanomaterial for the development of nano-biomedicine (*Mitragotri, S.; Anderson, DG; Chen, X.; Chow, EK; Ho, D.; Kabanov, AV; Xu, C. 2015*), communication nano-networks (*Kumar, MR 2019*), new drug delivery therapies (*Yu, J.; Zhang, Y.; Yan, J.; Kahkoska, AR; Gu, Z. 2018*) and cancer treatments (*Huang, G.; Huang, H. 2018*) and neurological treatment of neurodegenerative diseases (*John, AA; Subramanian, AP; Vellayappan, MV; Balaji, A.; Mohandas, H.; Jaganathan, SK 2015*).

However, aside from all the benefits, the scientific literature is very clear regarding the health implications for the human body. It is well known that graphene (G), graphene oxide (GO) and other derivatives such as carbon nanotubes (CNT) are toxic in almost all their forms, causing mutagenesis, cell death (apoptosis), release of free radicals, lung toxicity, bilateral pneumonia, genotoxicity or DNA damage, inflammation, immunosuppression, damage to the nervous system. ['Damage and toxicity of graphene oxide'](#) and ['Damage and toxicity of graphene-carbon nanotubes'](#).

Second, graphene is a radiomodulatable nanomaterial, [capable of absorbing electromagnetic waves](#) and multiplying radiation, acting as a [nanoantenna](#), or a signal repeater (Chen, Y.; Fu, X.; Liu, L.; Zhang, Y., Cao, L., Yuan, D., Liu, P. 2019). Exposure to electromagnetic radiation can cause the material to exfoliate into smaller particles (Lu, J.; Yeo, PSE; Gan, CK; Wu, P.; Loh, KP 2011), called graphene quantum dots or GQDs (Graphene Quantum Dots), whose properties and physical particularities improve due to its even smaller scale, due to the effect of 'Quantum Hall', since they act by amplifying electromagnetic signals (Massicotte, M.; Yu, V.; Whiteway, E.; Vatnik, D.; Hilke, M. 2013 | Zhang, X.; Zhou, Q.; Yuan, M. ; Liao, B.; Wu, X.; Ying, M. 2020), and thus the emission distance, especially in environments such as the human body (Chopra, N.; Phipott, M.; Alomainy, A.; Abbasi, QH; Qaraqe, K.; Shubair, RM 2016). GQDs can take on various morphologies, for example hexagonal, triangular, circular or irregular polygon (Tian, P.; Tang, L.; Teng, KS; Lau, SP 2018).





The superconducting and transducing capacity make graphene one of the most suitable materials to create [wireless nanocommunication networks for the administration of nanotechnology in the human body](#). This approach has been intensively worked on by the scientific community, after having found and analyzed the [available protocols and specifications](#), but also the [routing systems for data packets](#), generated by nano-devices and nano-nodes inside the body, in a complex of systems called CORONA, whose objective is the effective transmission of signals and data in the network, optimizing energy consumption (to the minimum possible), and reducing likewise, failures in the transmission of data packets (*Bouchedjera, IA; Aliouat, Z.; Louail, L. 2020 | Bouchedjera, IA; Louail, L.; Aliouat, Z.; Harous, S. 2020 | Tsioliaridou, A., Liaskos C., Ioannidis S., Pitsillides A. 2015*).

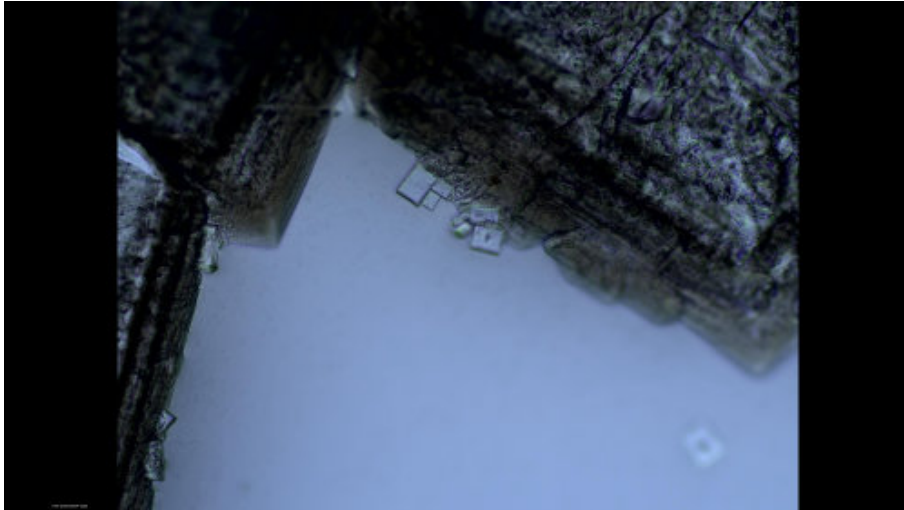
In this nanocommunication network, a type of TS-OOK (Time-Spread On-Off Keying) signal is used that allows the transmission of binary codes of 0 and 1, by means of short pulses that involve the activation and deactivation of the signal during time intervals very small of a few femtoseconds (*Zhang, R.; Yang, K.; Abbasi, QH; Qaraqe, KA; Alomainy, A. 2017 | Vavouris, AK; Dervisi, F.D.; Papanikolaou, VK; Karagiannidis, GK 2018*). Due to the complexity of nanocommunications in the human body, where the nano-nodes of the network are distributed throughout the body, in many cases in motion, due to blood flow, and in others attached to the endothelium of the arterial walls and capillaries or in the tissues of other organs, researchers have required the [development of software for the simulation of such conditions](#), in order to verify and validate the nanocommunication protocols that were being developed (*Dhoutaut, D.; Arrabal, T.; Dedu, E. 2018*).

On the other hand, the nanocommunication network oriented to the human body (*Balghusoon, AO; Mahfoudh, S. 2020*), has been carefully designed in its topological aspects, conceiving specialized components in the performance of said task. For example, electromagnetic nanocommunication is made up in its most basic layer by nano-nodes that are devices (presumably graphene, carbon nanotubes, GQD, among other objects and materials) that have the ability to interact as nanosensors, piezoelectric actuators, and in any case as nano-antennas that propagate the signals to the rest of the nano-nodes. The nano-nodes, find in the nano-router (also called nano-controllers) the next step in the topology.

Its function is to receive the signals emitted by the nano-nodes, process them and send them to the nano-interfaces, which will emit them outside the body with the necessary frequency and range, since it must overcome the skin barrier without losing signal clarity, so that it can be received by a mobile device at a close enough distance (usually a few meters). That mobile device would actually be a smartphone or any other device with an Internet connection, which allows it to perform the function of 'gateway'. The topology also defines the possibility that the entire infrastructure of nano-nodes, nano-router and nano-interface is unified in a single nano-device, called pole or metamaterial defined by SDM software (*Lee, SJ; Jung, C. ; Choi, K.; Kim, S. 2015*). This model simplifies the topology, but increases the size of the device and the complexity of its construction, conceived in several layers of graphene. In any case, regardless of the topology, the nanorouters are necessary to route and decode the signals correctly, for their sending, but also for their reception, since they can be designed for a bidirectional service, which implies de facto the capacity to receive signals, commands, orders, operations that interact with network objects.

The article continues here > COrOn@2Inspect

<https://corona2inspect.net/2021/11/25/identificacion-de-patrones-en-vacunas-de-c0r0nvrus-nanorouters/>



LINKS

Dr. Pablo Campra Madrid

DNA CRYSTALS IN COVID19 VACCINES, Feb. 5th, 2022

[Presentation | PDF](#)

Article: Self-assembly of DNA crystals | February 18, 2022

<https://corona2inspect.net/2022/02/18/autoensamblaje-de-cristales-de-adn/>

Orwell City | Dr. Pablo Campra on DNA crystals in COVID vaccines

<https://www.orwell.city/2022/02/DNA-crystals.html>

And further:

Dr. Pablo Campra Madrid

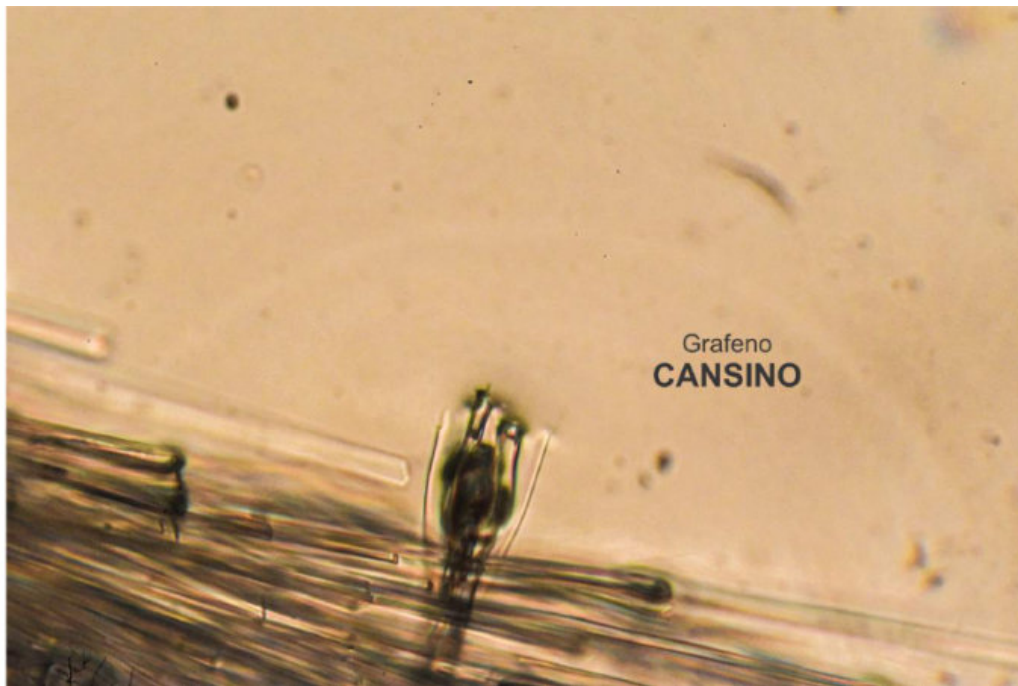
OBSERVATIONS OF POSSIBLE MICROBIOTA IN COVID mRNA
VACCINES, October 15th, 2021

[Presentation | PDF](#)

**Orwell City | OBSERVATIONS OF POSSIBLE MICROBIOTA IN COVID
mRNA VACCINES**

<https://www.orwell.city/2021/10/microbiota.html>

ARGENTINA



IDENTIFICATION OF MICROTECHNOLOGY FOUND IN CANSINO, PFIZER, ASTRAZENECA, SINOPHARM, AND SPUTNIK VACCINATION VIALS

January 30, 2022

© Martín Monteverde, Médico | Anabela Femia,
Biotecnóloga | Lisandro Lafferreire, Biotecnólogo

Translation by:
Orwell.City

In an exclusive presentation to the Chilean radio station [El Mirador del Gallo](#), Argentine doctor Martín Monteverde presented the analyses carried out by researchers behind the Corona2Inspect blog on the [microtechnology found in Cansino, Pfizer, AstraZeneca, Sinopharm, and Sputnik vaccination vials](#).

As research progresses, it becomes more and more evident that the substance they call a vaccine is an advanced technology designed to perform functions completely unrelated to immunization.

Dr. Martín Monteverde: Alright. We really take advantage, Jorge, of your channel to thank the scientists of a blog from Europe, a blog called **Corona2Inspect**, because they analyzed our images.

And they have been studying for some time this whole issue of nanotechnology. Well, for those of us who aren't familiar with it, it's absolutely new. But they have been investigating it with scientific articles, and they have been making small comments on our images. If you want, we can look at them.

The notes of Corona2Inspect on the images can be seen in the video (Link at the end of the interview).

So, about that image (Figure 1) you see there - Do you see it? It says, "Image of what may be a single-walled carbon micro or nanotube that may have some pores in which case... ." There could also be some other material, some other metal in there. And there's the technological designation there, which is SWCNT (Single wall carbon nanotube). Of course, these are all small nanotechnology compounds.

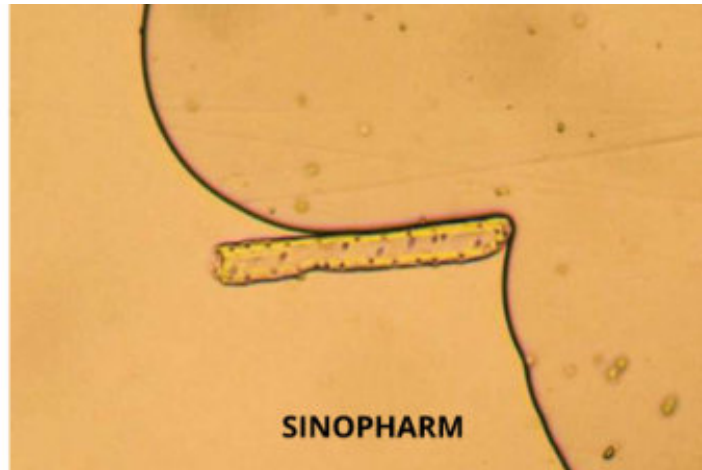


Figure 1



Figure 2

That one too (Figure 2). That rare image that we found.

There are a lot of images of this one in the literature. And well, Dr. Campra also found similar images. But here, these scientists explain it to you. It says, "This image shows what would be a single-walled carbon nanotube that's split by the effect of a precursor material at the branching point."

Well, this was one of the images (Figure 3) that surprised us the most. That rectangular image you see down there. It says, Also compatible with those observed by Dr. Campra, it could act as a graphene/hydrogel transistor.

It continues, "It's unknown whether it's fully formed or not. Scientists that are familiar with this subject say that all these parts eventually self-assemble inside the body and form more complex circuits." They say, for example. Here they say that they don't know if it's finished or if it was being assembled. They say we would have to wait about seven days.

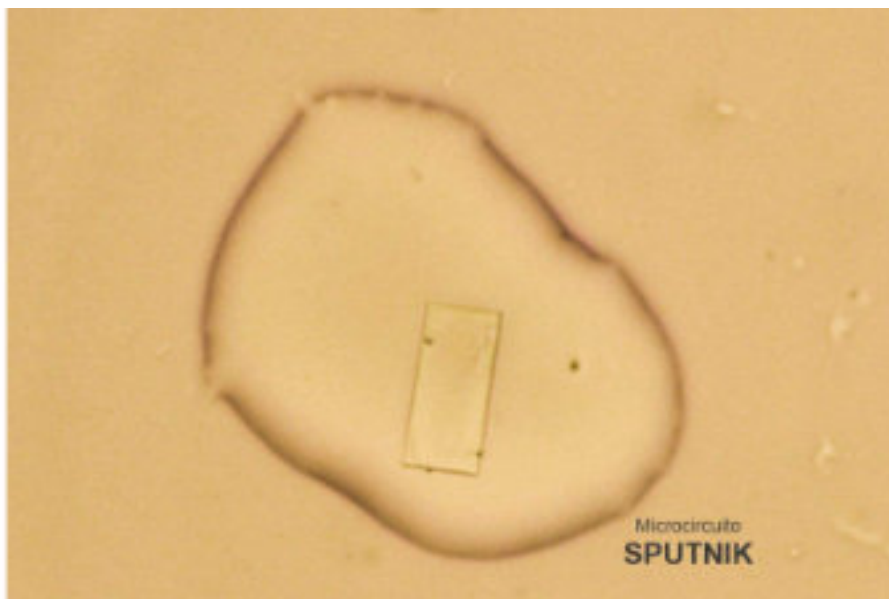


Figure 3



Figure 4

Well, that image (Figure 4), yes, it's similar too. A carbon microtube would be the correct designation. We were calling it a graphene ribbon because we knew it was graphene from the similar images we were looking at before we looked under the microscope. But yes, the correct name is carbon microtube. It's graphene after all, isn't it?

We can move on to the next one. Well, look at this (Figure 5). Those are two pieces, aren't they? Two pieces of a microcircuit in the picture that we took. And there next to that's what the microcircuit would be. That's already described. This is very striking.

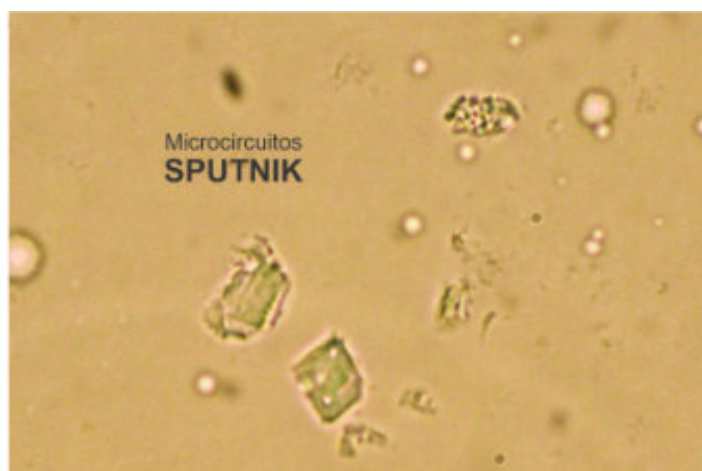


Figure 5

Jorge Osorio: These things eventually self-assemble, right, Martín?

Dr. Martín Monteverde: Yes, yes. This would then apparently assemble itself by that teslaphoresis mechanism, which is like a mechanism, in a way, magnetic as well. They self-assemble and form larger and larger circuits. More complex. Yes. Obviously, they put a lot of these little parts in vials.

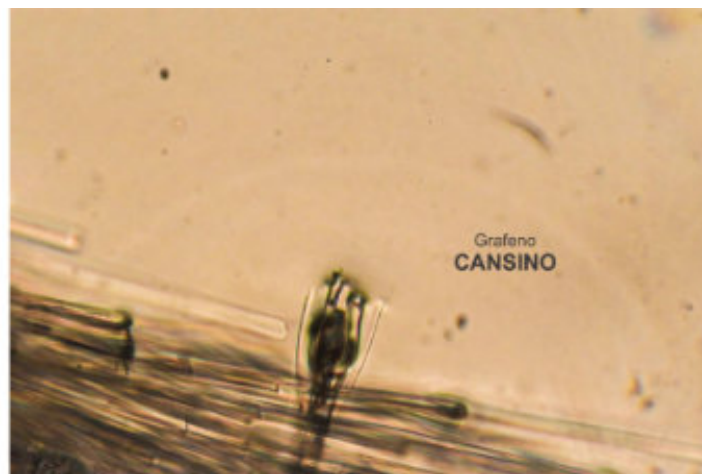


Figure 6

Jorge Osorio: This is Cansino.

Dr. Martín Monteverde: Yes, it is. This is a weird structure (Figure 6) that we didn't know what was. But we photographed it because it caught our attention. And it says, multi-walled microtubes. And it gives you the specific technological designation.

And there was a lot of that stuff that you see down there and that looks like little brown sticks in this whole bottom part. A lot! We doubted. We thought at one moment that they could be salts, and that's why we didn't photograph them. But there was a lot.

And now that I see it again, it's very similar to what this Argentine doctor who shared a video the day before yesterday found. Marcelo Dignani.

He's an Argentine doctor who was looking at some vials of COVID vaccines under a microscope at home and he found these same images that were like brown wires or sticks. See? So, he found a lot of them. And so did we.

Now I remember we found a lot of these, but we thought they weren't graphene. We thought they might be, maybe, rare salts in the Cansino vaccine. We said, Well, it must be some excipient. And that's why it wasn't photographed. And it turns out they're not salts, see? They're single-walled microtubes. And there's the technological designation.

So, in the end, it's all graphene. There is a lot of this.



Figure 7

Dr. Martín Monteverde: That X-ray... That slide, sorry (Figure 7). This is a structure that caught our attention because it was a black, solid structure, which was there as if it was floating, somehow.

Jorge Zamora: Excuse me, Martín, what size, more or less, are we talking about?

Dr. Martín Monteverde: It may be a little more than, perhaps, 200 microns or a little more in length. Width, much less. Well, there it is. An object, evidently, which they call micronator. That has a function too, for sure. It says, A hydrogel microtape combined with graphene. No transparency is observed. Right. It's a solid object. It really caught our attention. Of those with this very defined shape, it was the only one we saw. But we saw others that had the same aspect or with undefined or rocky looking borders. But this was the only such image we saw.



Figure 8

Well, this other object (Figure 8) is clearly very rectangular, very artificial. How do you explain that that's inside a vaccine? It says, Graphene transistor. This type of object can correspond to intra-body nano-communication network electronics. A graphene transistor usually has a rectangular shape and consists of a few layers of graphene and other materials, such as a sandwich hydrogel.



Figure 9

That one (Figure 9). It's also known in the scientific literature as a graphite meniscus. We used to call it little rocks, but now we're learning that it's called graphite meniscus.

Yes, and Dr. Campra indeed found quite a picture of these as well. He says they would act as electrodes. Notice that each moving part has a function.

This other image (Figure 10) is also strange and rectangular. It says, That one too. They, who are used to it, say that it's forming and that it would be a few days away. It says it's a circuit, but it's being formed. It says, "Some type of transistor or element of the nano-network isn't yet defined. It requires time." Of course, maybe, a few more days. This, inside the body, in the blood. All these materials are developing and self-assembling.



Figure 10

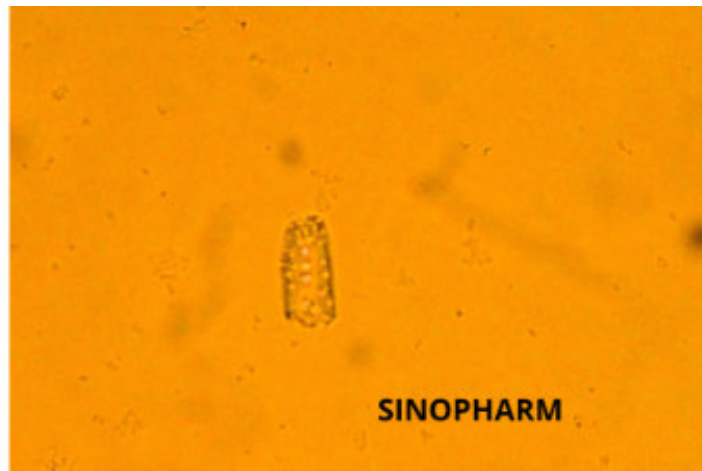


Figure 11

Well, this image (Figure 11) was another one that caught our attention because it's an image that has something built inside. And it's an image that's something artificial. That's a little artificial artifact. That was our only intuition. Then we see in the scientific literature, that in the same way, it would be a kind of half-formed circuit, which is still being formed. It says that one can see there some of the intermediate layers of its structure.

That one (Figure 12) also has like those little sticks. We knew it was graphene, but it says that these little sticks form a kind of mesh. And it talks about liquid graphene, beads, and polycrystalline graphite. And they call this structure a graphite meniscus.



Figure 12

Another artificial structure (Figure 13) is also rectangular in shape. We, to tell you the truth, were very surprised to find this. We didn't expect it.

Although just the last week of December, Ricardo had seen this and published a report about it. When we found this, we were also shocked. Another object that's under construction. A microcircuit under construction.



Figure 13

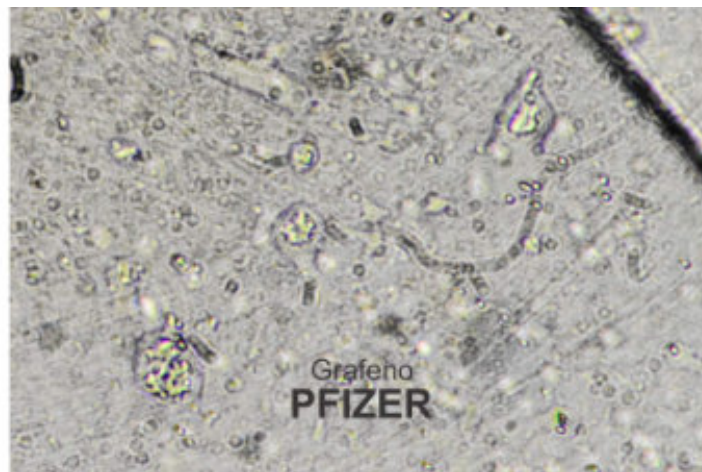


Figure 14

Well, those (Figure 14) that looked like little snakes or little worms also caught our attention. They looked like microbubbles lined up, Those little worms also caught our attention. Dr. Campra had also photographed something similar. It says: "And a translucent tube is formed inside which these dots or microbubbles are added." We found those microbubbles in all the samples. It says: "They're actually precursor materials to form..." And that's where he gives you the technological name of the little worm.

From these objects, there's assimilation and growth of the microtube. And the addition of other precursors. They add up. And the result is carbon nano-octopuses or micro-octopuses. So it's also a forming structure. And it says that those little worms appear in the photograph. And it's true. They appear near this more rocky formation that, in the case of Dr. Campra, there was also the little worm. And near the little worm, there was this formation called meniscus. It can be seen that they have a relationship in that assembly that they make later.



Figure 15

Jorge Osorio: Impressive, impressive. Now, Martín, excuse me for asking you a question in the heat of, let's say, showing the images. Can you tell us what other indescribable particles you found? I remember, and you and Jorge know about this, that Dr. Pablo Campra had said that he found structures in the study that were, let's say, indescribable. He couldn't describe what other things there were, let's say, inside the study of the vials. Did the same thing happen to you?

Dr. Martín Monteverde: I tell you the truth. Our microscope came with a magnification of - we used 10x, 20x, which in reality you have to add 10 more for the binocular. So, it would be 100x, 200x, and 400x. Those were our magnifications. With that, you can't reach the tiniest particles. Much less the nanoparticles, which are the ones that Campra says he cannot find an explanation for. Our microscope has its limitations. It doesn't have its own camera either. But more than anything else, it doesn't have a high magnification. However, you could see these structures, which are, let's say, fat or thick structures. Or very, very large structures, very obvious to be present there.

This one (Figure 15) we call graphene ribbons because we saw a lot of them. We also saw that they were in the literature and in the Campra report. But it's true. They look like ribbons, but there they make the clarification and say they are tubular objects. Single-walled carbon microtube. And being formed, too. Notice, they're being formed. We found a lot of these in all the vials. Some even looked like the leg of an insect. I think we're going to see it now. It's just right there. Take a look.



Figure 16

That too (Figure 16). They're cylindrical carbon tubes bent on themselves. And you can also see that they're structures that then form. And it also has a name. It has a defined technological name, which is down there. After this picture on the side, which looks like an agglutination. We thought it was an agglutination of microbubbles. And it says, AstraZeneca presents several methods of micro and nanotube growth. And it can also grow like that, like a hood. Yes, but ultimately, notice that it's all graphene, all carbon. Different structures, but

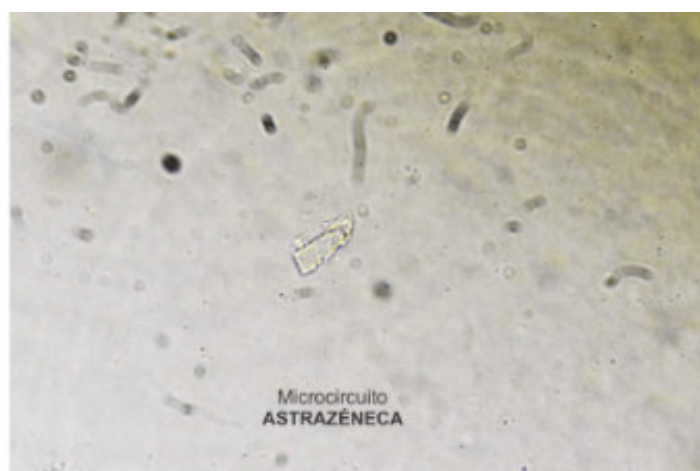


Figure 17

There (Figure 17) you see a microcircuit as well. Something weird and rectangular. And which is being formed. Well, that object (Figure 18) is really weird. Look at its shape. This is obviously something.

Jorge Osorio: It's shaped like a transistor or a micro antenna like the picture says there.

Dr. Martín Monteverde: Yes. This is something electronic. It's clearly an electronic component. So we found a lot of graphenes in different shapes and a lot of electronic components.

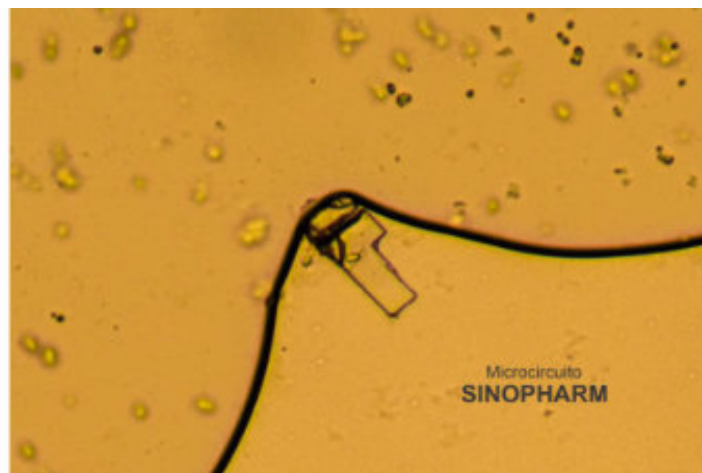


Figure 18

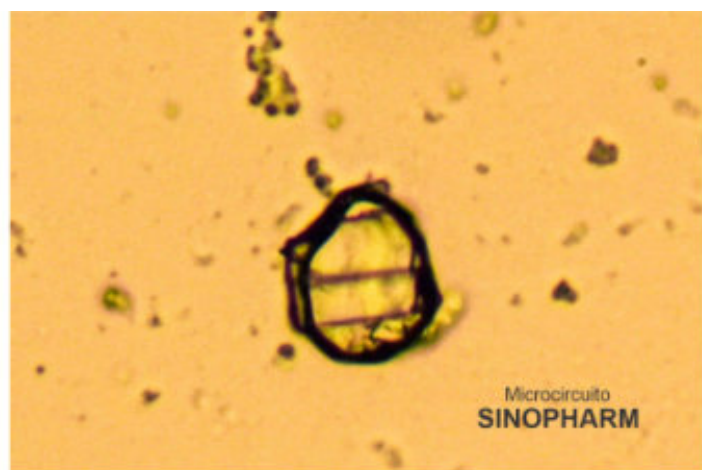


Figure 19

Well, that's a weird structure too (Figure 19), because notice that inside there are two pretty perfect rectangles. It says, It has the peculiarity of having a rectilinear structure. It could be a FET transistor, a field-effect transistor.

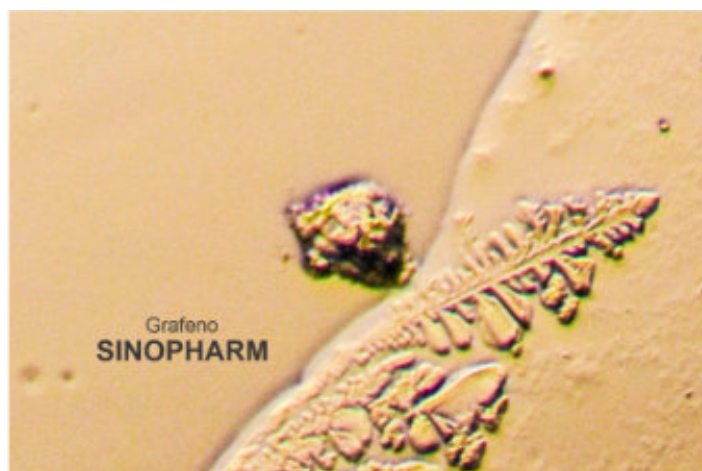


Figure 20

This one (Figure 20). Let's see. What we saw in that structure was what we call the graphene rocks. That formation there looks like a pebble. But it says that the correct name is the following. Fractals are formed that could act as plasmonic antennas in the Terahertz band.

It's the rock. That's what you see as a rock. The other thing you see below looks like it's tree-like, bush-like. That's the beginning of the drying. When the drop starts to dry some salts start to crystallize. The drop begins to dry and that's what's formed. That bush-like formation develops, right? At the moment of drying. It was precisely when the drying started. So that could be seen.

Well, this photo (Figure 21) caught our attention, but we didn't know what it was. But we were very struck by those square shapes. That's not the drying of salt. The drying rather of salt would correspond with what I showed you in the previous image, of a bush. But this... Finding these shapes so square, so rectangular when it dries it's really striking. We didn't know what they were. It says, A chain of quadrangular structures as already observed in Campora's image can be seen, in which you can see the formation of holes or complex structures in its interior. It's true. It has like sinks or little dots. They could be compatible with more complex electronic structures. We saw a lot of these structures. There's this photo, but we took three or four. There was a lot of this too.

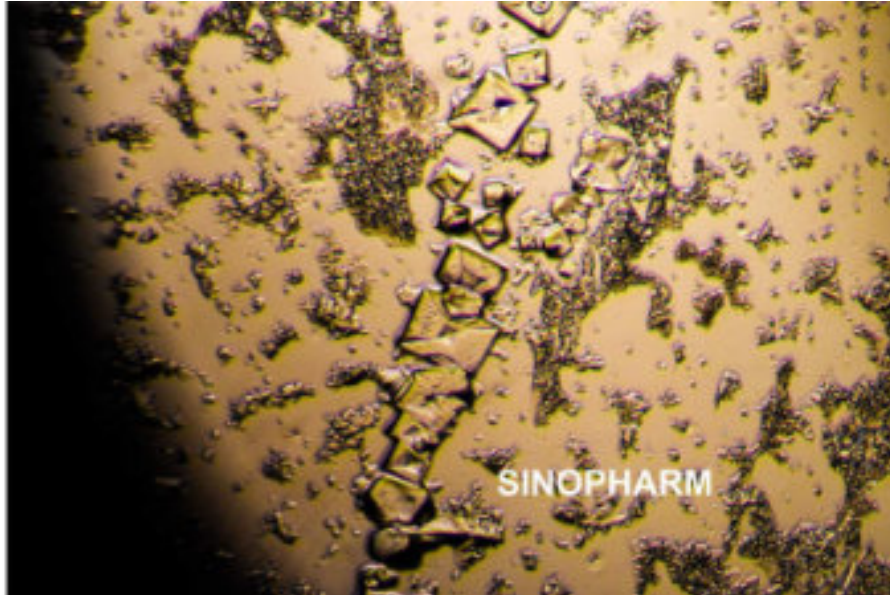


Figure 21

LINKS

**ANALISIS ARGENTINO DE LOS VIALES ASTRAZENECA PFIZER
SINOPHARM | ES**

[Presentation | PDF](#)

Translation Presentation

<https://www.orwell.city/2022/01/microtechnology-in-vials.html>

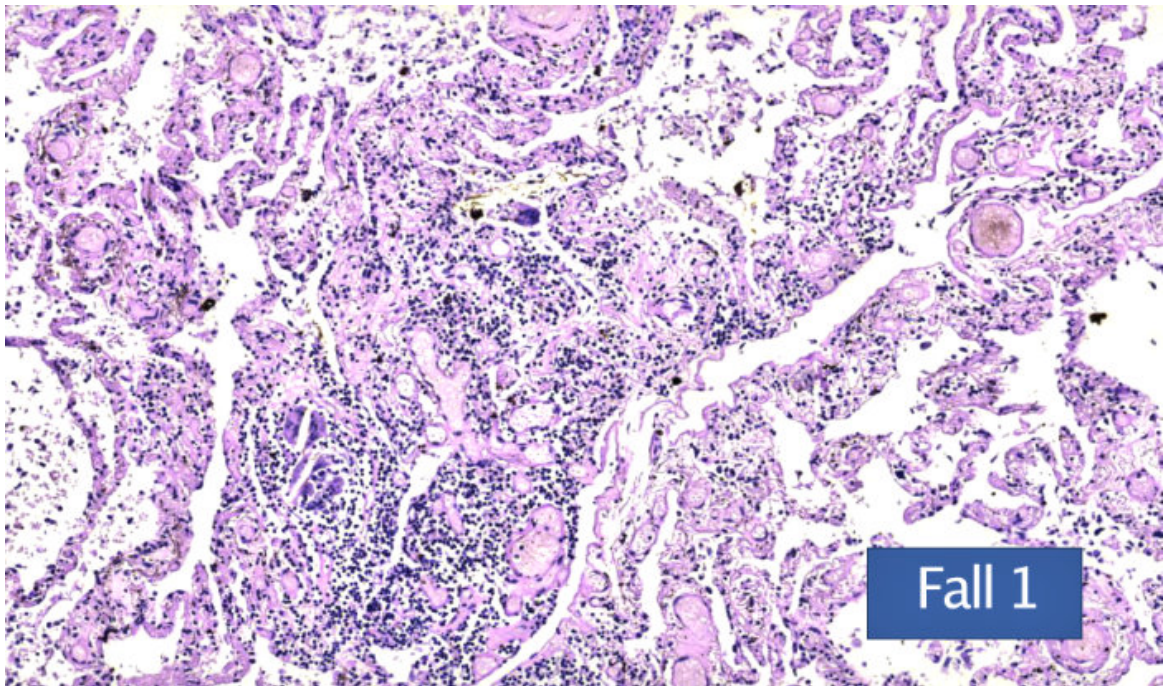
Presentation Video

[Bitchute](#) | [Rumble](#)

Corona2Inspect

<https://corona2inspect.net>

GERMANY



ARE DEATHS AND ADVERSE HEALTH EFFECTS FOLLOWING VACCINATION AGAINST COVID-19 PATHOLOGICALLY RELATED?

Article & Images by:
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Institut Prof. Dr. Arne Burkhardt

On Monday, 9/20/2021 in the pathological institute in Reutlingen, the results of the autopsies of eight people who died after COVID19 vaccination will be presented. The fine tissue analyses were performed by pathologists Prof. Dr. Arne Burkhardt and Prof. Dr. Walter Lang. The findings confirm Prof. Dr. Peter Schirmacher's finding that among more than 40 corpses he autopsied who had died within two weeks of COVID19 vaccination, approximately one-third of those deaths were caused by the vaccination. Microscopic details of the tissue changes will be shown during the live-streamed press conference. Prof. Dr. Werner Bergholz will report on the current parameters of the statistical recording of vaccination events.

The press conference will also present the results of the analysis of COVID-19 vaccine samples by an Austrian research group, which are in line with the findings of scientists from Japan and the USA. Undeclared metal-containing components were found in the vaccine. Visually, vaccine elements are conspicuous by their unusual shape.

The results of the investigation have led to legal and political demands, for example, for the immediate collection of information by the authorities in order to be able to assess the health risk posed to the population by the COVID-19 vaccines. For example, early signals of impaired fertility in vaccinated individuals can be examined by consulting IVF registries. Through the cancer registry, insights can be gained into the development of cancer due to the genetic modifications of the viral RNA. Suspension of COVID-19 vaccination should be considered.

<https://pathologie-konferenz.de>

on COVID vaccines: WHY THEY cannot work, and irrefutable evidence of their causative role in DEATHS after vaccination

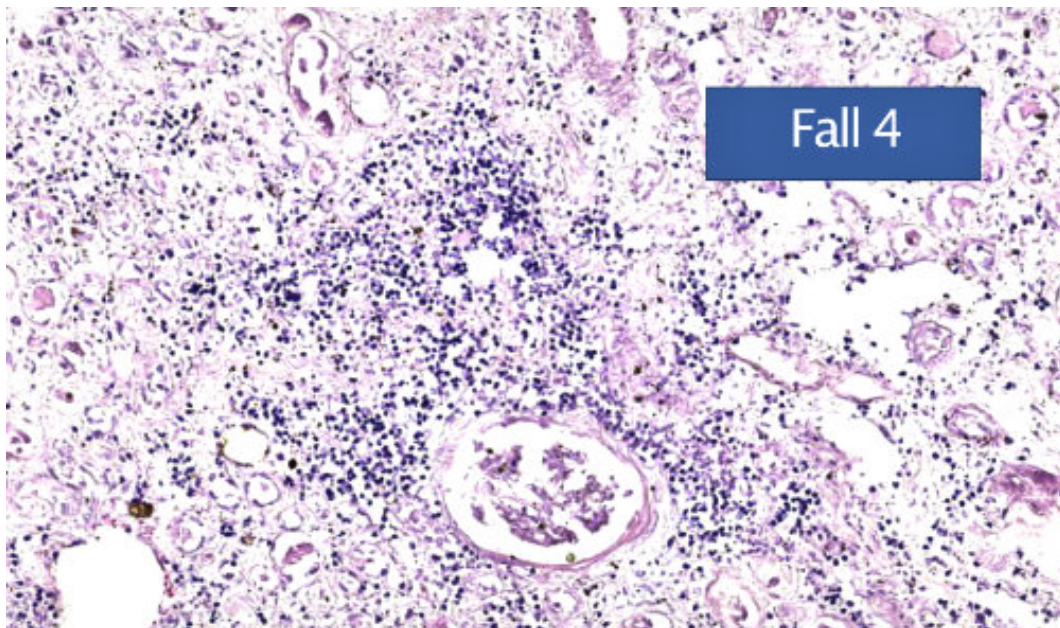
December 15, 2021

Article by:

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Images by

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Sucharit Bhakdi, MD and Arne Burkhardt, MD

This text is a written summary of Dr. Bhakdi's and Dr. Burkhardt's presentations at the Doctors for COVID Ethics symposium that was livestreamed by [UKColumn](#) on December 10th, 2021. The two presentations can be viewed at the very beginning of [the video recording](#) of the symposium.

The authors

Dr. Bhakdi has spent his life practicing, teaching and researching medical microbiology and infectious diseases. He chaired the Institute of Medical Microbiology and Hygiene at the Johannes Gutenberg University of Mainz, Germany, from 1990 until his retirement in 2012. He has published over 300 research articles in the fields of immunology, bacteriology, virology and parasitology, and served from 1990 to 2012 as Editor-in-Chief of Medical Microbiology and Immunology, one of the first scientific journals of this field that was founded by Robert Koch in 1887.

Dr. Arne Burkhardt is a pathologist who has taught at the Universities of Hamburg, Berne and Tübingen. He was invited for visiting professorships/ study visits in Japan (Nihon University), the United States (Brookhaven National Institute), Korea, Sweden, Malaysia and Turkey. He headed the Institute of Pathology in Reutlingen for 18 years. Subsequently, he worked as an independent practicing pathologist with consulting contracts with laboratories in the US. Burkhardt has published more than 150 scientific articles in German and international scientific journals as well as contributions to handbooks in German, English and Japanese. Over many years he has audited and certified institutes of pathology in Germany.

The evidence

We herewith present scientific evidence that calls for an immediate stop of the use of gene-based COVID-19 vaccines. We first lay out why the agents cannot protect against viral infection. While no positive effects can be expected, we show that the vaccines can trigger self-destructive processes that lead to debilitating illness and death.

Why the vaccines cannot protect against infection

A fundamental mistake underlying the development of the COVID-19 vaccines was to neglect the functional distinction between the two major categories of antibodies which the body produces in order to protect itself from pathogenic microbes.

The first category (secretory IgA) is produced by immune cells (lymphocytes) which are located directly underneath the mucous membranes that line the respiratory and intestinal tract. The antibodies produced by these lymphocytes are secreted through and to the surface of the mucous membranes. These antibodies are thus on site to meet airborne viruses, and they may be able to prevent viral binding and infection of the cells.

The second category of antibodies (IgG and circulating IgA) occur in the bloodstream. These antibodies protect the internal organs of the body from infectious agents that try to spread via the bloodstream.

Vaccines that are injected into the muscle – i.e., the interior of the body – will only induce IgG and circulating IgA, not secretory IgA. Such antibodies cannot and will not effectively protect the mucous membranes from infection by SARS-CoV-2. Thus, the currently observed “breakthrough infections” among vaccinated individuals merely confirm the fundamental design flaws of the vaccines. Measurements of antibodies in the blood can never yield any information on the true status of immunity against infection of the respiratory tract.

The inability of vaccine-induced antibodies to prevent coronavirus infections has been reported in recent scientific publications.

The vaccines can trigger self-destruction

A natural infection with SARS-CoV-2 (coronavirus) will in most individuals remain localized to the respiratory tract. In contrast, the vaccines cause cells deep inside our body to express the viral spike protein, which they were never meant to do by nature. Any cell which expresses this foreign antigen will come under attack by the immune system, which will involve both IgG antibodies and cytotoxic T- lymphocytes. This may occur in any organ. We are seeing now that the heart is affected in many young people, leading to myocarditis or even sudden cardiac arrest and death. How and why such tragedies might causally be linked to vaccination has remained a matter of conjecture because scientific evidence has been lacking. This situation has now been rectified.

Histopathologic studies: the patients

Histopathologic analyses have been performed on the organs of 15 persons who died after vaccination. The age, gender, vaccination record, and time of death after injection of each patient are listed in the table on the next page. The following points are of utmost importance:

- > Prior to death, only 4 of the 15 patients had been treated in the ICU for more than 2 days. The majority were never hospitalized and died at home (5), on the street (1), at work (1), in the car (1), or in home-care facilities (1). Therefore, in most cases, therapeutic intervention is unlikely to have significantly influenced the post-mortem findings.
- > Not a single death was brought into any possible association with the vaccination by the coroner or the public prosecutor; this association was only established by our autopsy findings.
- > The initially performed conventional post-mortems also uncovered no obvious hints to a possible role of vaccination, since the macroscopic appearance of the organs was overall unremarkable. In most cases, “rhythmogenic heart failure” was postulated as the cause of death.

But our subsequent histopathological analyses then brought about a complete turnaround. A summary of the fundamental findings follows.

Case #	Gender	Age (years)	Vaccine (Injections)	Time of death after last injection
1	female	82	Moderna (1. and 2.)	37 days
2	male	72	Pfizer (1.)	31 days
3	female	95	Moderna (1. and 2.)	68 days
4	female	73	Pfizer (1.)	unknown
5	male	54	Janssen (1.)	65 days
6	female	55	Pfizer (1. and 2.)	11 days
7	male	56	Pfizer (1. and 2.)	8 days
8	male	80	Pfizer (1. and 2.)	37 days
9	female	89	Unknown (1. and 2.)	6 months
10	female	81	Unknown (1. and 2.)	unknown
11	male	64	AstraZeneca (1. and 2.)	7 days
12	female	71	Pfizer (1. and 2.)	20 days
13	male	28	AstraZeneca (1.) Pfizer (2.)	4 weeks
14	male	78	Pfizer (1. and 2.)	65 days
15	female	60	Pfizer (1.)	23 days

Histopathologic studies: findings

Histopathologic findings of a similar nature were detected in organs of 14 of the 15 deceased. Most frequently afflicted were the heart (14 of 15 cases) and the lung (13 of 15 cases). Pathologic alterations were furthermore observed in the liver (2 cases), thyroid gland (Hashimoto's thyroiditis, 2 cases), salivary glands (Sjögren's Syndrome; 2 cases) and brain (2 cases).

A number of salient aspects dominated in all affected tissues of all cases:

1. inflammatory events in small blood vessels (endothelitis), characterized by an abundance of T- lymphocytes and sequestered, dead endothelial cells within the vessel lumen;
2. the extensive perivascular accumulation of T-lymphocytes;
3. a massive lymphocytic infiltration of surrounding non-lymphatic organs or tissue with T- lymphocytes.

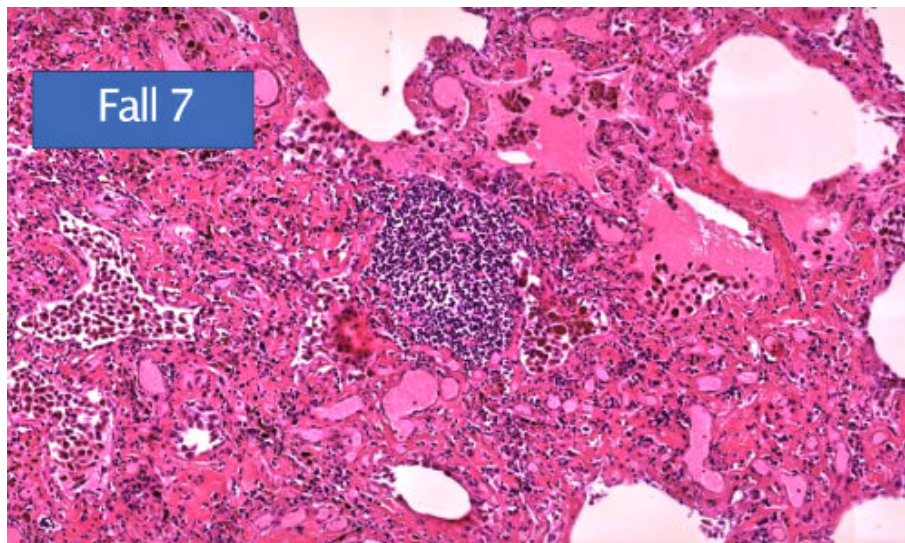
Lymphocytic infiltration occasionally occurred in combination with intense lymphocytic activation and follicle formation. Where these were present, they were usually accompanied by tissue destruction.

This combination of multifocal, T-lymphocyte-dominated pathology that clearly reflects the process of immunological self-attack is without precedent. Because vaccination was the single common denominator between all cases, there can be no doubt that it was the trigger of self-destruction in these deceased individuals.

Conclusion

Histopathologic analysis show clear evidence of vaccine-induced autoimmune-like pathology in multiple organs. That myriad adverse events deriving from such auto-attack processes must be expected to very frequently occur in all individuals, particularly following booster injections, is self-evident.

Beyond any doubt, injection of gene-based COVID-19 vaccines places lives under threat of illness and death. We note that both mRNA and vector-based vaccines are represented among these cases, as are all four major manufacturers.



LINKS

[Article online | Doctors for COVID Ethics](#)

PATHOLOGY CONFERENCE

[Cause of death after COVID-19 vaccination | PDF | DE](#)

Astra-Zeneca, Biontech-Pfizer and Johnson&Johnson COVID-19 „vaccines“ investigated by means of Scanning Electron Microscopy (SEM) | PDF

1st Pathology Conference Reutlingen, Sep. 20, 2021 | Video

Cause of death after COVID-19 vaccination & Undeclared components of the COVID-19 vaccines

[Odysee | Bitchute](#)

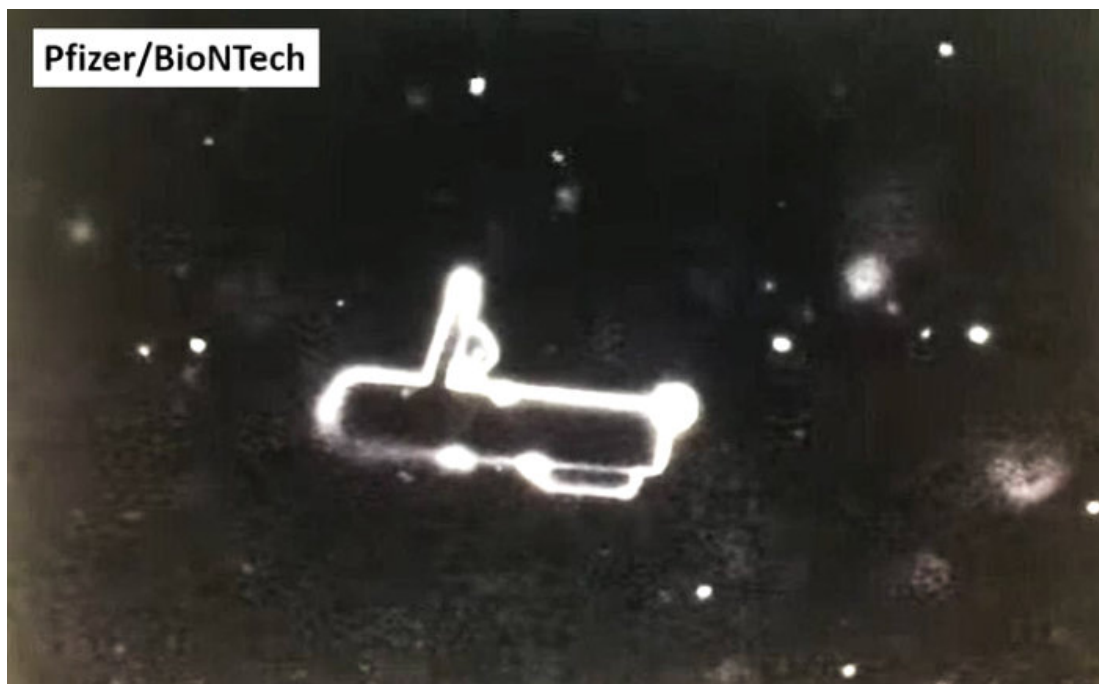
2nd Pathology Conference Berlin, Dec. 04, 2021 | Video

Are Deaths and Adverse health effects after vaccination against Covid-19 related in a pathologically detectable way?

[Odysee | Bitchute](#)

1ST PATHOLOGY CONFERENCE REUTLINGEN | PART II

Undeclared components of the COVID-19 vaccines



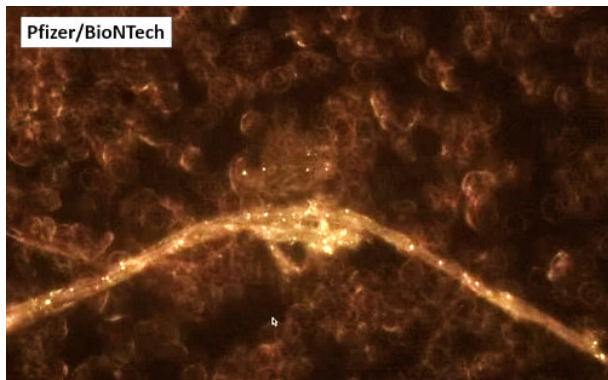
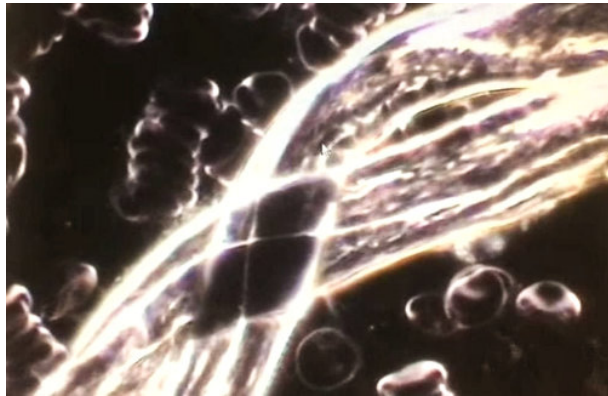
Moving Object found in Pfizer vaccine



The object above developed dried out the structure in the picture below.



Blood of vaccinated people



And more

EPILOGUE

WE FOR HUMANITY

We are an international association of lawyers, doctors, scientists, journalists as well as representatives of other professions.

We represent interests of all people in the world who aspire to live in freedom, self-determination, dignity and truthfulness.

We For Humanity, trust-in-humanity@pm.me

The International Criminal Court Office of the Prosecutor
Post Office Box 19519
2500CM The Hague
The Netherlands
E-mail: otp.informationdesk@icc-cpi.int

September 20, 2021

Letter in support of the joint 'Request for Investigation' to the ICC from the UK, Slovakia, France and the Czech Republic

Dear Prosecutor of the International Criminal Court, Mr Karim Khan,

We the undersigned, as Nazi Concentration Camp survivors of the atrocities committed against humanity during the Second World War, feel bound to follow our conscience and write this letter in support of the joint 'Request for Investigation' to the International Criminal Court submitted on behalf of the United Kingdom (143.21), Slovakia (133.21), France (271/21) and the Czech Republic (326/21) on the 12th of August 2021. The contents of the 'Request' include sworn affidavits from expert witnesses Dr. Richard Fleming, Professor Luc Montagnier and Dr. Kevin McCairn.

It is obvious to us that another horrific series of events, this time affecting all people around the world, is taking place before our eyes. However, the majority of the world's populace do not yet realise what is happening, for the magnitude of an organized crime such as this is beyond their scope of experience. We, however, know. We remember the name Josef Mengele. Some of us have personal memories. We experience a déjà vu that is so horrifying that we rise to shield our poor fellow humans. The threatened innocents now include children, and even infants.

In just four months, the COVID-19 'vaccines' have killed more people than all available vaccines combined from mid-1997 until the end of 2013 — a period of 15.5 years. And people between 18 and 64 years old who were barely at risk from COVID-19 and consequently barely showed up in mortality statistics on or with COVID-19, account for up to 80% of records as victims of 'vaccination'. The EudraVigilance database reports that through September 18, 2021 there are 14,863 deaths and 3,691,366 injuries reported following injections of four experimental COVID-19 so-called vaccines. As of the real numbers the famous Lazarus report from Harvard Pilgrim Health Care inc. in 2009 revealed that in general only 1% of adverse events from vaccines is ever being reported:

“Adverse events from drugs and vaccines are common, but underreported. Although 25% of ambulatory patients experience an adverse drug event, less than 0.3% of all adverse drug events and 1-13% of serious events are reported to the Food and Drug Administration (FDA). Likewise, fewer than 1% of vaccine adverse events are reported.”

We call upon you to help stop this ungodly and criminal medical experiment on humankind immediately.

What is called 'vaccination' against the SARS-Cov-2 virus is in truth a blasphemy encroachment into nature. Never before has immunization of the entire planet been accomplished by delivering a synthetic mRNA into the human body. It is a medical experiment to which the Nuremberg Code must be applied. The 10 ethical principles in this document represents a foundational code of medical ethics that was formulated during the Nuremberg Doctors' Trials to ensure that human beings would never again be subjected to involuntary medical experimentation and procedures, but yet this is exactly what is happening around the world now.

We remind you of the following. **Principle 1 of the Nuremberg Codex:**

(a) “The voluntary consent of the human subject is absolutely essential. This means that the person involved should have legal capacity to give consent; should be so situated as to be able to exercise free power of choice, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him to make an understanding and enlightened decision.

(b) This latter element requires that before the acceptance of an affirmative decision by the experimental subject there should be made known to him the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonably to be expected; and the effects upon his health or person which may possibly come from his participation in the experiment.

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

Re. (a): There is no question of a free decision. Governments and mass media spread fear and panic and use the rule of Goebbels' propaganda by repeating untruths until they are believed. For weeks now they have been calling for the ostracism of the unvaccinated. If 80 years ago it was the Jews who were demonised as spreaders of infectious diseases, today it is the unvaccinated who are being accused of spreading the virus. Physical integrity, freedom to travel, freedom to work, all coexistence has been taken away from people in order to force 'vaccination ' upon them. Children are being enticed to get vaccinated against their parents' judgement.

Re (b): The 22 terrible side effects already listed in the FDA emergency-use authorization were not disclosed to the subjects of the experimental trial. They are as follows :

1. Guillain-Barré syndrome
2. Acute disseminated encephalomyelitis
3. Transverse myelitis
4. Encephalitis/encephalomyelitis/meningoencephalitis/
meningitis/encepholopathy
5. Convulsions/seizures
6. Stroke
7. Narcolepsy and cataplexy
8. Anaphylaxis
9. Acute myocardial infraction
10. Myocarditis/pericarditis
11. Autoimmune disease
12. Deaths
13. Pregnancy and birth outcomes
14. Other acute demyelinating diseases
15. Non-anaphylactic allergic reactions
16. Thrombocytopenia
17. Disseminated intravascular coagulation
18. Venous thromboembolism
19. Arthritis and arthralgia/joint pain
20. Kawasaki disease
21. Multisystem inflammatory syndrome in CHILDREN
22. Vaccine enhanced disease.

By definition, there has never been informed consent. In the meantime, thousands of side-effects recorded in numerous databases are on record. While the so-called case numbers are being bleeped in 30-min-intervals by all mass media, there is neither any mentioning of the serious adverse side effects nor how and where the side-effects are to be reported. As far as we know, even recorded deaths and adverse events have been deleted on a large scale on some databases.

Principle 6 of the Nuremberg Code requires: *"The degree of risk to be taken should never exceed that determined by the humanitarian importance of the problem to be solved by the experiment."*

'Vaccination' against COVID-19 has proven to be more dangerous than the disease COVID-19 for approximately 99% of all humans. As documented by Johns Hopkins, in a study of 48,000 children, children are at zero risk from the virus. The data shows that children who are at no risk from the virus, have had heart attacks following 'vaccination'; pending update since August 2021, more than 15,000 have suffered adverse events – including more than 900 serious events. At least 16 adolescents have died following 'vaccination' in the USA. And the numbers are increasing rapidly as we write.

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

Allegedly around 52% of the world population has received at least one injection. Honest disclosure of the true number of 'vaccine' injured, terminally injured as well as deceased worldwide is long overdue. We fear that there are millions already.

We as survivors of the concentration camps, witnessed many atrocities being committed in the Second World War and we were told this would never happen again , but yet it is happening again.

What a damning realisation: How many elderly people were coerced by fear to take the 'vaccine' and have not survived? How many survived the Holocaust but didn't survive the COVID-19 injection? How many survived the medical experiments in Auschwitz and Birkenau but didn't survive this contemporary medical experiment?

We therefore implore you to accept the joint 'Request for Investigation' from the United Kingdom, Slovakia, France and the Czech Republic and immediately and without further delay, open an urgent investigation into the crimes against humanity, the genocide and the breaches of the Nuremberg Code by numerous Perpetrators, which has resulted in so many needless deaths and serious injuries and continues to do so on a daily basis. The International Criminal Court as the court of last resort, has a duty to investigate these, the most heinous of crimes and to bring the Perpetrators to justice.

It is in your power to save lives. We are aware that several criminal charges have been dismissed by you on formal grounds. Regardless of technicalities, you have read them. We know that you are aware because of these claims, that millions of people are being hurt and dying by the so-called vaccination . For example, the Israeli lawyers have provided casualty figures in Israel and access to the EMA database of side effects. That was more than three months ago. Since that time, more people have died, become terminally ill, or been injured (see above). And you have not intervened. You further condone the fact that children are now increasingly among the victims of 'vaccination'. It is up to you to punish the deliberate acts against life and limb, not to carry yourself with intent by an approving acceptance of attack on human life.

Every day that you waste idly, human lives are destroyed, children's lives. We demand an immediate end to the vaccination campaign and an immediate investigation of the evidence available to you. People will forgive a mistake. A deliberate murder of their children - not. Do the right thing.

History will not look kindly upon you if you fail in your duty to do this. Know that our eyes and those of the peoples of the world are upon you - the responsibility is yours. You know what is happening, you have the evidence and now you must act.

Yours sincerely,

The letter is signed by the Nazi Concentration Camp survivors

Moshe Brown, Hillel Handler, Vera Sharav

<https://we-for-humanity.org/en/>

The Nuremberg Code (1947)

1. The voluntary consent of the human subject is absolutely essential.

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

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

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

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

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

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

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

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

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

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

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

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Magazine VII - 03 | 2022

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