TRANSCRIPT

8:26

ready did everybody got their makeup on

8:31

looking good huh that's okay he'll have to join okay everyone we are going to 8:37

get started here um good afternoon everyone thank you for participating in 8:42

today's hearing on blood related injuries from covid-19 vaccination I 8:48

want to especially thank our Witnesses today Dr Peter mccauliff Dr Ryan Cole 8:54

and Dr Kirk milone for making their the time and their busy lives to be here 8:59

here with us today thank you very much gentlemen uh I would also like to thank Senator Johnson for joining me um again

9:06

once again uh in truly doing the people's work and trying to get to the bottom of the detrimental effects of the

9:14

covid vaccine that the government forced on so many Americans and I want to thank 9:20

all of the Americans uh watching this hearing today so thank you for being 9:25

engaged um including the countless Americans who have themselves been injured by one of these vaccines or have

9:33

lost a loved one to them that should have never happened uh the reason why I'm holding yet another hearing on

9:38

covid-19 vaccines despite being a member of the covid-19 select committee is 9:45

because our committee refuses to do anything about what Americans actually 9:51

care about we all know that Co came from a Chinese lab in Wuhan we don't need to 9:57

investigate the origins of Co anymore we need to look at the data of which there

is so much that shows the vaccines hurt or killed thousands of Americans and 10:08

then also what is covid going to continue doing to people the vaccine Adverse Events reporting system has seen

10:16

a massive spike in reports following the roll out of the covid vaccines so many

people have been affected yet politicians here in Washington are too afraid to do anything about it well our

10:28

job is to care about the issues our constituents care about for me it's the people of Northwest Georgia for Senator

10:35

Johnson it's the people of Wisconsin why is it that so many members of Congress are scared to talk about the issues

10:42

their constituents care about well I'll tell you many of them including doctors are afraid of generating vaccine

10:49

hesitancy but I am afraid of the prospects of thousands if not more 10:55

Americans getting injured or dying from these vaccines giving the overwhelming 11:00

data people should be hesitant about injecting unproven vaccines in their 11:05

bodies even though I'm not a doctor I know that it's unscientific to ignore 11:11

the data some members of Congress are afraid to upset their friends in big Pharma who sell the disease and then

11:19

sell the Cure and their friends in Congress in turn Force Americans to pay 11:24

for it this is how Washington Works in many cases special get help from 11:30

politicians and they both end up enriching themselves they don't care how many Americans get hurt they don't care

11:37

how many taxpayer dollars are spent they just exploit exploit exploit with this 11:42

hearing and the other ones I will continue to hold I hope to give a voice to the Americans who are sick and tired

11.49

of being exploited by their elected representatives the work of restoring the people's voice in Washington

11:56

continues right here and right now uh today I'd like to introduce our 12:01

Witnesses and gentlemen I would like to go one at a time and give you a chance to introduce yourself uh for our hearing

Dr Cole we can start with you thank you representative uh green and it's an honor to be here and I appreciate

12:15

everything you're doing for your constituents and for the American people uh I'm Dr Ryan Cole I'm a board

12:21

certified anatomic and clinical pathologist trained at the Mayo Clinic uh been in practice for uh over 20 years

12:28

and ran an dependent Medical Laboratory um for um two decades and ended up 12:34

having to sell that because I spoke out against this Co narrative and uh got 12:39

cancelled by insurance companies for quote unprofessional behavior for telling the truth so it's an honor to be

12:45

here today um do you want me to do an opening statement as well or just intro introduction of course an opening statement okay opening statement so you 12:52

know we're at an unprecedented time in American history and it used to be that 12:58

we were a nation of the people for the People by the people and now we're of the corporation for the corporation and

13:04

by the corporation uh countless Americans have been harmed because people have believed

13:12

uh biased media people have believed uh corrupt pharmaceutical narratives 13:18

countless people in this nation are hurting and being ignored now I'm a pathologist uh the

13:25

pathologist is the most important doctor that you never meet that you always hope is right so we see a part of people

13:32

every day we see your blood we see your microbiology we see your tissues under the microscope and the cells don't lie

13:39

and what we've found in this unfortunate four years is we've been

13:45

ignored we see the damage and later in the hearing I have some slides that I if we have time I'll share because the

picture is worth a thousand words but we see what's happening to the people and I'm tired of the American

13:57

people being gas lit and being told well it's anything and everything but it's not the quote vaccine this is a gene

14:04

transection product that billions of people have received and genetic products need to be monitored for a long

14:11

period of time we have countless people injured that are being ignored and we can't do this anymore and you know I'm

14:19

not here to judge people if you got one shot two shot three shots whatever I'm not here to judge I'm just saying don't

14:24

get another one this is an unproven unsafe product we need to acknowledge that there's injury happening around the

14:31

world and we need to stop these products immediately not just the co shots any 14:36

mRNA platform going forward is unproven and unsafe and this is about an oath 14:43

that all of us took we took an oath to First Do no harm primum no we take that 14:50

oath seriously most of us sitting here have given up almost everything so we're grateful to be here and I'm grateful for

14:56

the opportunity to ask questions or answer any questions you may ask going forward so thank you thank you Dr Cole

15:02

Dr Peter muli Mr M Madam chairwoman and uh

15·08

Senator Johnson Mr Davidson uh it's a great honor to be here uh as I've been 15:15

in Washington now several times I'm Dr Peter McCulla I'm a practicing internist and cardiologist in Dallas Texas I'm

15:22

trained in public health uh and have a master's degree in public health and epidemiology uh I'm very experienced in

15:30

academic medicine I have uh over 780 peer-reviewed Publications cited the 15:35

National Library of Medicine uh I have over 70 papers on the covid-19 pandemic 15:41

both on many aspects of the pandemic including early treatment and now uh 15:47

vaccine injuries disabilities and deaths um I have been on data safety monitoring 15:52

boards uh uh and interacted with the FDA and big Pharma and device companies I've 15:58

interacted with the European medicine agencies as well as the MH uh in the 16:04

past lectured at virtually every medical school in the United States I'm well known uh to all of them you know we're

16:10

four years into this and this is the first time that the US House of

16:16

Representatives has heard from doctors who are directly treating patients with both covid-19 and the vaccine injuries

16:23

that's four years too late I think that's a very important lesson learned I never supported these vaccines

16:30

I never told a single patient that it was safe to take a vaccine I didn't take a covid-19 vaccine myself because it

16:37

wasn't safe and I published an oped in the hill in August of 2020 before they

came out the title of that opet is the great gamble of the covid-19 vaccine 16:49

pandemic the reason why it was a gamble is because the vaccines and of Americans 16:54

who took the vaccine is roughly 75% of Americans took at least one shot according to the covid states program of

17:01

those 94% took a messenger RNA vaccines so we can restrict our comments to 17:06

messenger RNA vaccines provided by fiser and madna these vaccines are a brand new 17:12

technology that installs the genetic code for the lethal part of the virus 17:18

which is the spike protein the spine on the surface of the virus this was an extraordinary gamble because there was

17:25

no knowledge of what was going to turn this off once the genetic code gets in 17:30

the body there was no knowledge of does the body get rid of the genetic code what shuts it off will some people

produce too much genetic uh uh uh code and have it keep moving from cell to cell and too much Spike protein it was

17:44

known then that the spike protein was Lethal and to give a genetic code for a 17:51

potentially lethal protein that was devised in a Chinese biocurity lab to 17:57

Americans was the most dangerous proposition our government agencies 18:02

could have ever put forward to our country and what we've learned on this 18:09

is extraordinary castri UDA and colleagues has published the messenger RNA is physically circulating in the

18:15

blood for at least 28 days that's as long as theyve looked crosson and colleagues from Harvard has shown the

18:21

messenger RNA is stuck in the human heart 30 days after the vaccine when people die and there's inflammation

18:28

around it presumably due to the spike protein rolin and colleagues from Stanford have shown the messenger RNA is

18:34

stuck in human lift nodes for at least two months and that's as long as they've looked now the spike protein which is

18:41

produced by the messenger RNA is widely circulatory in Blood and shown by Harvard by oata and colleagues Swank and

18:49

recently brogna in Germany now brogna and Germany looked six months afterwards and at least half the people who took

18:55

the shots had vaccine Spike protein circulating in their bloodstream that's as long as they've

19:01

looked and they can identify it because fiser madna have an amino acid signature 19:06

on their Spike protein to let us identify we know that it's fir M it doesn't come from the natural virus it's

19:12

coming from the vaccine that's proven the spike protein now in 3400

peer-reviewed papers and growing is proven to cause heart damage in

myocarditis our Regulatory Agencies agree every regulatory agency in the world agrees there's actually guidelines

19:31

now in the UK and Australia about how to diagnose and manage vaccine myocarditis 19:36

that's how common this is it accelerates aosr cardiovascular disease causes 19:42

tremendous swings in blood pressure and heart rate called posterior elosta teoc cardia syndrome or pots causes

19:48

neurologic injury stroke both es schic and hemorragic paralyzing syndromes 19:54

including gomber syndrome small fiber neuropathy ear ringing it causes blood 20:00

clots the spike protein is physically found in blood clots the largest blood clots that we've ever seen in clinical

20:07

medicine typically a blood clot that someone would get after a hip surgery or on an airplane would be a centimeter or

20:12

so it's common in my practice yesterday I saw patients with 15 17 two feet blood 20:20

clots in their legs oh my God after the vaccine we see blood clots both on the 20:26

arterial side and on the Venus this is distinctly unusual the body is set up 20:31

after the vaccine to form blood clots and this is particularly harmful in people with a predilection to blood

20:37

clots or other provocators hip surgery uh smoking supplemental estrogens 20.43

prolonged immobility uh Etc the fourth major category where the vaccines 20:50

clearly cause injury and damage is autoimmunity the human body recognizes 20:55

the spike protein is non-human and so the body attacks its own cells in an 21.01

attempt to try to fight this and because of this the body then expresses markers 21:06

of autoimmunity that now I routinely test in my practice the antinuclear antibody the Ana test which is a test we

do for systemic lupus the anti- citrated peptide test for rheumatoid arthritis and then the Anka test the anti nutrilo

21:20

cytoplasmic antibody test these are now all proven in the peer viiew literature these blood tests turn positive in

21:27

response to the vaccine and people develop a variety of autoimmune syndromes this is what we're seeing

21:33

clinically so my observations are based in terms of what I'm seeing clinically what I'm reading in the peer-reviewed

21:38

literature and in the peer-reviewed literature large numbers of cases are being reported I want to cite one paper

21:45

from the perview literature Lane and colleagues uh that's assembled now a series of 18,0 204 patients with

21:53

myopericarditis 18,000 now I can tell you my whole career I saw two cases before covid-19

22:02

now I am seeing myocarditis on a daily basis the number of myocarditis cases in the United States before the pandemic

22:09

was roughly 200 to 400 cases in the whole country per year now we're seeing this in the 22:15

thousands and these are limited sets now of those 18,24 spontaneously reported cases the

22:22

death rate in these patients is 0.22 so fortunately majority of people surviv 22:27

but sadly some die in the published papers of people describing the cases

the death rate has ranged from 0.41 for myopericarditis to

22:39

45.9% 45.9% hire and colleagues of which I am a senior author on this paper is now has 22:47

a paper in the pre-print server now it's been fully accepted to the um European Society Cardiology Journal has proven

22:55

that myocarditis is fatal when autopsy are conf are are confirmed when the 23:00

doctors suspect myocarditis there's a 100% rate of confirmation that it's fatal myocarditis when there's General

death that's occurred in a vaccinated patient our data suggest that it's roughly 74% if an autopsy would be done

23:15

it would be confirmed that the the vaccine was the cause of death today a 23:20

rasm poll is out and the Rasmus poll has shown that 53% of Americans think the 23:28

covid-19 vaccines are causing serious injuries leading to large numbers of 23:35

quote unexplained deaths so the word is out I've made the call on the floor of 23:41

the uh with Senator Johnson and a panel on the US Senate multiple State senates the European Parliament are making the

23:48

call today the covid-19 vaccines should be removed from the market they're not safe for human use those are my comments

23:54

thank you thank you Dr muli thank you very much much Dr mhone yes um thank you 24:01

very much what an honor it is to be here uh my name is Kirk mhon uh I am board 24:07

certified in Pediatrics and pediatric cardiology uh before my medical degree I 24:12

got a PhD in cardiovascular physiology and pharmacology my thesis was on what causes inflammation in the

24:19

heart just so happens the pathway I was studying is exact pathway that covid the 24.25

spike protein causes inflam within our body I I wanted to share what 24:31

my heart is um that I bring to this hearing as a physician and a scientist 24:36

and it goes back to two basic historic ancient texts at Ryan Dr Ryan Cole 24:43

already alluded to the Hippocratic Oath um which says Do no harm so as 24:49

Physicians we are called we have taken an oath to do no harm the second and I 24:54

consider this as I share my thoughts and my my education and my experiences uh 25:00

comes from the Bible and it says the goal of my instruction Is Love from a pure heart a good conscience and a

sincere Faith um we have

25:12

um when I share what I'm seen in my patience and throughout the literature I 25:18

I share from a place of compassion not of judgment when we see these patients 25:24

regardless of how they've been injured um we need to bring the loving and Compassionate Care to bear on these

25:31

people who have been injured and we have to find a way to treat them um we can't 25:37

just let them there are too many of them as Dr mcco so clearly put out um and I wanted as he said at the end at what the

25:44

what Ras M was seeing I wanted to share because sometimes it's look it's 25:49

interesting to um when we're facing sometimes the nonscience we're when we're facing something the

25:54

non-scientists often show us and they look at data a little bit differently um 26:00

and a lot of times that comes from the financial the insurance company because the insurance company is basing their

26:06

entire livelihood on well people not getting sick and knowing what percentage 26:11

of well people should get sick so Ed da um is one of those financial guys and 26:17

he's been looking at the insurance data um and uh his research team recently 26:23

evaluated the the data out of UK and

26:28

uh and it was from the United Kingdom Death and disability trends for cardiovascular diseases in 15 to 44 year

26:36

olds what's important about that statement is you shouldn't have cardiovascular disease in 15 to 44 year

26:42

olds so if this is now a spike this is something we really have to look at so they found very concerning data and I

26:49

quote we show a large increase in the morbidity and mortality due to disease of the cardiovascular system from 2021

one the increase in disability claims is consistent with the increase in excess 27:03

deaths and both are highly significant the data show a 133% increase in excess 27:08

cardiovascular death in 2020 then a 30% increase in 2021 and a 44% increase in 27:16

2022 something significantly has increased excess cardiovasular deaths in 2021 and it 27:23

continues as humans Physicians and scientist we should be curious with what has 27:36

happened there's really only one major thing that happened in

27:41

2021 and that was the roll out of this untested vaccine so as we go

27.48

forward I'll happy to answer questions and go into deeper explanations of and try to bring truth

27:56

and transparency and and honesty to this discussion but thank you for making this 28:01

happen thank you powerful opening testimonies thank you each um I'll start 28:06

with question and then we're all going to take turns up here and and we really appreciate uh your your honest

28:12

and open answers I'd like to start out um one of the things that's talked about is vaccine hesitancy um so I just want

28:20

to ask you guys in the beginning what is the difference Dr McCall I'll start with you what is the difference between the

28:27

vaccines we've grown up with that we know and trust versus the MRNA vaccine 28:34

um that's now the covid vaccine but could be made into more vaccines could you explain that a little bit the

28:39

existing vaccines now they have grown in number and intensity over time and uh 28:44

the mothers know this on the childhood schedule it's called the asip schedule asip is a committee uh charged by the

28:50

CDC to recommend uh what American children should receive uh these conventional vaccines are either

28:57

proteins such as the tetanus toxoid or the pacal protein Hepatitis B protein

and they're simply proteins that the body responds to the proteins themselves can't cause disease you can't get

29:10

tetanus from a tetanus shop uh or they are uh killed viruses so for instance uh 29:18

influenza is a killed virus you get a flu shot you can't get flu from a flu 29.23

shot because the virus is killed but people get flu like syndrome and they they get confused with this uh but it's

29:29

a killed virus or it's a live attenuated virus that is the virus is alive but 29:34

it's crippled and it can't cause serious disease and an example there would be 29:40

the shingles vaccine or the chickenpox vaccine and people will know that because if they've ever had the shingles

29:46

vaccine of which I've I've had uh one will have a very serious reaction in the 29:51

arm because the virus is alive it just can't cause full-blown shingles but it can cause a serious reaction

29:58

all of these conventional vaccines limit the degree of which the vaccine itself 30:05

can directly cause disease now there are vaccine reactions and there can be 30:10

serious immune reactions to vaccines that are recognized and they're so serious that 1986 under the reg

30:18

Administration uh the the uh Congress and HHS wrote the vaccine injury 30:26

compensation legislation which said conventional vaccines have unavoidable 30:32

harms so even the conventional vaccines that we trust I've taken them all my 30:38

children have taken them all they do have unavoidable harms and what's grown 30:43

out of this is people have felt that if something has a harm there must be freedom of choice on all forms of

30:51

vaccines at every level so no vaccine should be mandated in my view at any 30:57

level none of them are uh sufficiently compelling none of them completely

present prevent the disease uh the conventional vaccines actually have little data to support they block

31:09

transmission our CDC on the website says the polio vaccine doesn't stop transmission they said right on their

31:14

website so we don't have all the major outbreaks of pertusus and deia uh 31:21

uh they all occur mths they all occur and people are vaccinated so so they're these vaccines are not perfect but they

31:28

do pro provide a basis of which we try to ensure some health of our pediatric 31:33

population mesing RNA is drastically different mess RNA is the genetic code 31:39

for part of a virus and when it installs in the human body it hijacks the body's 31:47

Machinery to read the genetic called called ribosomes and then they produce an uncontrolled amount of a protein in

31:54

this case the spike protein for an uncontrolled of time so this is very different than a tetanus shot tetanus

32:00

shot is a specific amount of tetanus toxoid period the body digests and goes away this is genetic code that produces

32:08

the spike protein it looks like potentially indefinitely the human body to our 32:13

knowledge has no way of breaking down the messenger RNA and has no way of breaking down the spike protein there

32:20

are no described enzymatic Pathways for the human body to dispose of this in my 32:26

view the covid-19 vaccine program has complicated this because people have taken unprecedented numbers of shots if

32:33

one was to follow the US government program right now taking a shot every six months with the primary series

32:39

they'd be approaching 10 shots this is unprecedented to give 10 sets of of 32:46

inoculations so let me just clarify if if they are if the body can't break down 32:51

the spike protein and they're continuing to you know and they're forced and I totally agree with you Dr milone it's

32:58

we're not holding uh people responsible for this that were forced to take the vaccine people that believe they were

33:04

doing the right thing they were told over and over again on the television you're doing the right thing this is how

33:09

you care for others um but if these people are taking these vaccines and getting boosters and so forth what what

33:17

does the spike protein do inside the body if you C if our bodies can't break 33.23

it down what what is a spike protein doing it's found circulating in blood 33:29

recent paper by former NIH researcher David shim uh suggests based on all the 33:35

data that 40% of it is actually linked to red blood cells so it's actually causing clumping of red blood cells and

33:41

we see micro clumps of red blood cells now in multiple studies uh it's inside 33:46

white blood cells Bruce Patterson and incel DX has shown that it's inside CDC 16 monocytes and Dr Cole will share with

33:54

us later on the spike protein is penetrating all all the tissues in the body so it's actually in tissue layers

34:01

in the body and uh and it appears to be accumulating and it doesn't go 34:07

away it's unknown it's unknown in the uh in the brogna paper of Interest people 34:14

who took fizer and madna 50% of people who take the shots have detectable 34:20

circulating Spike protein 50% don't H and in a paper by schmelling and 34:26

colleagues from Denmark of Interest 30% of people who took the shots have no 34:31

side effects whatsoever none not even a sore arm it looks like they don't develop side effects another just under

34:38

two-thirds uh have some modest side effects and then in the smelling study it was 4.2% of people who really get

severe side effects in our CDC vsafe data which over 10 million Americans volunteer in the data set 7.7% of people

34:55

really get sick and have to go to the emergency room or be hospitalized so what we've learned is the vaccines have

35:01

been broadly applied thank goodness most people are okay but there is a small but significant number of people who really

35:08

get in trouble with the vaccines multiply that times a big number of people who took the shots that's the reason why we got a Health crisis that

35:14

is a reason Dr Cole I I want to ask you and and go further on what Dr McCulla is talking about um uh there's been reports

35:22

with imalers talking about blood clots um and and this has been labeled a 35:28

conspiracy theory uh is this a conspiracy theory what are you seeing as a PA pathologist when you're looking at

35:34

tissue and you're looking at blood in your experience what have you seen well it's a scientific fact it's not a

35:40

conspiracy theory and again I have some images I can show later but we saw 35:45

during covid increase clotting markers in patients that were sick with covid as 35:51

Dr Mulla mentioned the lethal toxic part of this virus the spike protein has a 35:57

propensity to cause blood to Clump these embalmers I have many of 36:02

these samples in in my laboratory that we've looked at these are unusual clots 36:08

and Dr pretorius out of South Africa Dr Kell out of the UK Dr Jordan vaugh and 36:13

Alabama have researched this and the the blood is forming a unique folding 36:19

protein called amalo and these clots are almost like a a rubber band or a rubber ball and in

36:26

pathology you know we use food descriptors for different things a normal clot is kind of jelly like in in

terms of consistency these are very firm another important thing to 36:37

piggyback on what Dr MCA said is compared to traditional

36:42

vaccines those you get in the arm obviously there can be side effects from 36:48

some of the chemical adant the these shots the gene is

36:53

wrapped in a little fat bubble a lipid nanop particle now if you look at the manufacturer list

36:59

of ingredients all of these are not approved for human nor Veterinary use and yet went into billions of

37:05

arms this fat bubble can go anywhere and everywhere in the body instead of staying in the arm so

37:12

this Gene wrapped in a fat bubble can land anywhere or everywhere and that's why we're seeing the side effects in the

37:19

vaccine injured that we don't traditionally see with typical vaccines lipid nanoparticles were

37:25

designed to chemotherapeutic agents to the brain so these were designed to go 37:32

everywhere and so the first place they go is circulation and then they will that 37:39

little like a magnet a positive negative charge that fat bubble will attach to a cell the gene will go in human cells are

37:47

meant to make human proteins human cells are not meant to make foreign proteins 37:53

and when our cells start making foreign proteins our immune system goes on high alert and

37:59

says attack attack and so our own immune system our killer cells or natural 38:05

killer cells will go in and say this is an enemy start destroying those cells so 38:11

we see liver damage we see adrenal gland damage we see brain damage we see heart 38:16

damage we see damage of the blood vessels so these clots are because an 38:22

inflammatory response is happening in the lining of the blood vessels first and foremost and then as the immune system

38:29

reacts it there's this little waterfall Cascade of this protein and this protein and this protein I

38:35

won't get into all the clotting factors but because of this response these clots form and as Dr Mulla

38:42

mentioned clinically he's seeing in patients clots that we have not seen

38:47

historically and and these are large clots and these are firm clots and these are hard to dissolve clots because that

38:54

protein I mentioned amalo is not easily broken down by the human body and there was a study that came out

39:01

just last week or so um showing in some vaccine injured patients that there's

amalo even depositing in the muscles and that's because the muscle fibers are breaking down so these

39:15

patients with chronic fatigue they're it's like the perfect poison

39:20

protein the spike protein does it cause clotting yes does it cause neurologic harm absolutely an Italian study showed

39:29

19,000 patient study showed that 30% almost a third had neurologic harms

whether it was ringing in the ears whether it was burning whether it was whatnot onethird so as much as we hear

39:41

about you know the blood harms the clotting harms the heart harms neurological harms are way up there and

39:47

the autoimmune harms too and that's because we shouldn't and this is why I'm against this whole technology platform

39:53

you know use it on the research level for rare genetics conditions or for targeting certain things but when you

40:00

put something in the body that goes everywhere and as Dr MC mentioned doesn't have an off switch this Gene

doesn't have an off switch and it is an mRNA it is synthetic mRNA researchers out of Cambridge and

40:15

Oxford recently published and showed that it's not just making Spike protein it's this little message and

40:22

code is slipping and if you shift the frame when you're trying to make a protein you may make other proteins and

40:30

that's another harm of this technology that we found out four years after rolling it out onto billions of people

40:37

you're not just making the spike protein alone you may may be making fragmented proteins that can cause all sorts of

40:43

other harms and clotting and and whatnot and the problem and the problem with 40:49

when they start making a synthetic mRNA once again your body will will break 40:54

down regular true RNA right away but this what they're putting in the

platform doesn't isn't broken down quickly and so if it incorporates and

this is I think what we're seeing in some people is they are now become a spike protein factory that doesn't stop

41:14

and we're not sure we have a way to stop it and gratefully like Dr McCulla pointed out it's not everybody but it's

41:19

enough people that they should not be ignored so is it fair to say then that these vaccine 41:24

manufacturers uh created this these vaccines with CTIC the synthetic um mRNA 41:31

that has created diseases heart disease Strokes uh neurological problems everything that you've talked about do

41.38

these same Manu vaccine manufacturers sell the cures for the diseases that they're creating is that is that a fair

41.46

thing to say do they sell other drugs that say treat uh Strokes or cardiovascular disease and so forth is

41:52

that true I find it ironic that fizer just bought a spent \$40 billion on a 41:57

cancer treatment company so I I don't know I I'm not in their I'm not accusing them 42:04

ofous it's a fair comment that I can tell you in my clinical practice as an internist and cardiologist I've never

42:11

prescribed so many blood thinners in my career never I mean this is

42:16

extraordinary all day long I'm confronted with blood clots of different scenarios a paper to site by woo and

42:22

colleagues from the FDA sing Silver Springs a scientist at the FDA published this 42:28

paper now it's with the Jansen vaccine the Jansen vaccine which is now off the market but to give you an

42:35

idea they published on thousands of blood clots that the FDA knew about they

were describing blood clots going from the ankle to the hip ankle to the hip we've never seen this in clinical

42:47

medicine before 11% of the cases in the woo paper are fatal so none of this is 42:52

conjecture we can actually stay within the bounds of the perioded literature and understand what's going on but

42:58

there's a couple historical points I think American public should be aware of caro and wisman just received the Nobel

43:05

Prize for their modification of this messenger RNA called pseudo urination 43:11

replacing one of the natural base pairs urasil with pseudo urine fiser and madna 43.18

both decided strategically to instead of replacing every so many euros cells to actually 43:25

replace them all and they took a messenger RNA that would have been broken down pretty quickly and made it

43:31

essentially indestructible and so that's what creates the messenger RNA is read 43:36

by a ribosome passed to another one passed from cell to cell and again the disturbing thing is

43:43

the companies have not told us when does this ever get out of the body in order 43:49

for a drug to be approved it has to go through standard what's called pharmacokinetic and phn pharmacodynamic

43:55

testing all of this was skipped they never told us when does the body get rid of this when does the spike protein shut

44:02

off it's a genetic code now the FDA prior to the pandemic has rules on

genetic therapies the window of safety concern on a genetic therapy is five

years now if we give a pill for diabetes and we're testing this in a clinical trial and I've done this I've chaired

44:20

dat safety monitoring boards made the FDA presentations after 30 days we say listen it's over with pillows out of the

44:26

body it's over with with the conventional vaccines which I've described for the committee the the window of concern from a regulatory

44:33

perspective is two years anything happens within two years we have to cons consider the vaccine could have costed

44:39

it but a genetic vaccine is five years so my patients are asking me Dr McCulla when is it over with I took these shots

44:45

in 2021 I realized they weren't safe I said I don't know but a a regulatory

44.52

perspective would say five years of concern oh my goodness thank you so much Gent we will definitely do another round uh

44:58

this time I'd like to hand it over to Senator Johnson well first of all thank you congresswoman this is uh I know not

45:05

a real popular hearing for you to hold um it's not a real popular thing that these two that these three doctors have

45:11

have been doing over the last three years um I I've actually got the full list of of all the torment you've gone

45:18

through but but you've all been investigated you've all been malign you've been vilified uh attempts to be

45:24

desertified licenses restricted it hasn't been easy uh and what what I 45:30

do want to Quick point out is we have three doctors in front of us that all had the courage and

45:35

compassion to actually treat covid patients you know think back in the in 45:40

in the early days of Co we had no idea how how deadly it was and so it took 45:46

real courage to be a nurse or a doctor on the front lines and and do that so we have three doctors who did that Dr

45:53

Mall do you remember Dr Jah uh he he was the Democrat witness in our 45:58

November 19th 20 2020 hearing on early treatment um who when I asked the

question have you ever treated a covid patient he said no kind of a mic TR 46:11

moment we found out later he never left his apartment until a couple months after 46:18

the vaccine came out that that's how afraid he was he is or was the co Zar 46:25

for the Bing Administration so I know I've veered off course first of all let let me say the first 45 minutes of this

46:31

has just been a fabulous primer and if if no if people watching

46:36

the video if you if you've not watched anything else watch that first 45 minutes we've laid the groundwork the

46:42

question that's going through my mind I've got all kinds of medical questions as well but I want to ask the basic

46:48

question with all the pre peer-reviewed studies with all the clinical analysis 46:54

that that all of you have seen um it's obvious to you it's been obvious to me 47:01

for years you know there there's a Reason by the way let's quick put up this chart if we could you have it in

47:08

front of it this this is a chart that I first started developing in June of

47:13

2021 uh I I was already watching the veers as of April March and April okay I 47:18

remember April when there are a couple thousand deaths showing on the Veer system I had Francis Collins in front of

me I said you know what what what you know are you looking at this he admitted the 47:29

six deaths from the Johnson and Johnson but he said very callously well Senator 47:35

people die when it was asking about the other thousands by the way back then it was 46% of those deaths were Ur

47:41

occurring on day zero one or two so I've just put this chart together because you know obviously our hearings were about

47:47

early treatment and how supposedly dangerous hydroxy chloric was or icon a horse medicine

47:53

right I put this as a comparison and you can see the difference the these by the way the top lines here are the the fairs

48:01

the FDA adverse event Reporting System it just shows total deaths reported over 48:07

27 years for Icon 37 years for hydroxy chloric flu vaccines dexone Tylenol you 48:13

see that the average desk per year again everything could potentially be dangerous but you compare that to the

48:21

covid vaccine off ofers we're up to almost 37,000 deaths worldwide

48:26

24.4% of those deaths are occurring on day zero one or two following

48:32

vaccination again I'm not a doctor I'm not a medical researcher but I I know vs doesn't prove causation but man that's a

48:38

correlation the ought to be looking at okay by the way I I also just because

one of the push backs in this where we gave billions of doses so I finally did the calculation in terms of deaths per

48.40

million dose so for the covid vaccine in the US the deaths per million doses for 48.54

covid vaccine is 25.1 on average it's hard to get this

48:59

for flu so we assume 70% of a flu vaccine administered was actually injected the deaths per million dose for

49:06

the flu vaccine assuming 70% are injected is 04646 versus 21 that's a 55

fold higher death per million rate for the covid vaccine so my question I actually have a 49:23

question why isn't the rest the medical community acknowledging

49:29

this I mean you obviously we've got eminently qualified doctors I know how

49:34

you've been vilified how they tried to marginalize you but anybody who's listening to this panel realized these

49:40

are highly qualified compassionate doctors what is

49:45

happening throughout our medical establishment I um I I guess the honest um The Honest

49:55

thing to say is I have no idea we have we have jumped the rails

50:03

um we were you we're used to a I sort of as a pediatrician when I would give I I 50:09

I was comfortable with treatments if I thought they were effective with about a one in a million for vaccines a one in a

50:17

million chance of getting it what you were trying to prevent a one in a million of death I I felt comfortable

50:23

with that so when you have something and we knew very early the signal was early it wasn't it wasn't late for the covid

50:30

vaccines they were very early probably within a month we met we met we met criteria that previous vaccines had been

50:38

taken off the market whether it was Rose Shield or whether it was uh swine flu and many others there are a whole bunch

50:44

of times we make mistakes in medicine what the country counted on is that not 50:50

only the doctors would speak up but then the regulatory

50:56

bodies would say okay you're right that meant signal we gotta pull it off um I 51:02

don't know what's going on because when I look at the Cleveland Clinic data when there are 51,000 employees that are looked at and they study and they say 51:09

what's your risk of getting covid and it looks at how many vaccines you had the lowest risk for getting covid is if

51:16

you've had zero vaccines as you add vaccines your risk to get covid goes up I've never seen a vaccine like this

51:23

that's not the basis of vaccines they shouldn't have what we would call negative efficacy that is a peer

51:29

reviewed beautiful study from Cleveland Clinic completely ignored um I think that a lot of times

51:37

some of our colleagues um what I hear from most of my colleagues Kirk you're right but I'm not going to stick my head

51:43

out I'm gonna work one or two more years and then I'm retiring I I want to piggy back on Dr

51:49

milon's excellent comment fear the simple answer is fear the body of the

51:56

profession of medicine is almost all employed now the number of people that have spoken out have mostly been

52:03

independent and those who weren't independent did pay that price lost their jobs for speaking

52:09

truth and are our colleagues awake are people getting these boosters no they're 52:15

not because the people are awake they're still pretty quiet as well there's obviously a vocal 30% of Americans that

52:21

are are speaking out we have a booster for something that's

52.26

extinct and it's still being pushed by our government agencies xbb 1.5 is now 52:32

0.0% prevalent we're at jn1 which is 62%

52:37

prevalent we have a a booster vaccine from fiser for something that doesn't exist and we still have a government

52:42

pushing it but we have Physicians and we have Health Care Systems that are 52:47

dependent on the government te and they're nursing that te for every dollar they get and anybody that speaks against

that cash flow gets the hatchet so why are people not

53:00

speaking up I don't know why they forgot the oath that we all took yes we took 53:05

that oath and we've paid the price would I pay the price over again would all you 53:11

bet we would because this is about humanity and it's about the long-term health of humanity and so I just I encourage my

53:19

fellow Physicians around the world speak up Don't Be Afraid even if you're in the 53:25

truth of one be that voice of truth and that's what we're we're up against fear 53:30

and how do you overcome fear with courage I want to add to that I I think 53:36

the body of practicing Physicians and nurses and medical technologist and all 53:41

the Allied health professionals the vast majority took the vaccines and were 53:47

under mandates under Biden's mandates to take the vaccine they all have a deep conscious

53:56

or subconscious fear themselves of what's in their bodies they likely had their families 54:04

vaccinated they likely promoted these vaccines with their patients think about how deep this

54:12

is this goes back to doctors smoking cigarettes advertising cigarettes 54:17

smoking in the operating room saying that smoking cigarettes is good for them 54:22

it took 40 years before doctors diverse course and capitulated and said oh we were wrong on this and and in this

54:30

horror as they woke up uh to to to recognize this and the Emperor of all 54:35

maladies written by muckery at the Dana Farber Institute he describes the lead lung cancer surgeon for John's Hopkins

54:42

he was smoking as he was removing lung Cancers and and vehemently denied 54:47

that smoking caused lung Cancers and he himself died of lung cancer you know the these are historical types of

observations that uh I think we we'll go down in history it was an early Texas A&M survey done to show only 4% of

55:00

doctors didn't take the vaccines these doctors are at a premium right now because patients want some Fair

55:07

evaluation as a doctor I can fairly give somebody an opinion regarding an aortic 55:15

valve problem because I don't have the problem myself I can actually be objective once people doctors have taken

55:21

the vaccine they simply can't be objective and what we're hearing from patients is that they're being ignored

55:27

and what's going on is called gaslighting that they're told that this is in their head because the doctors

55:34

themselves and the nurses do not want to come to their own personal recognition 55:40

that they themselves have taken a vaccine this is a unique problem that is going to Bear out over time and I hope

55:47

that these individuals in a sense become aware uh now clearly I have doctor after doctor nurse after nurse coming to me

55:54

saying I've developed myocarditis I've developed a blood clot now I'm regretful but I'm hoping that they

56:01

themselves don't have to develop a personal medical problem to become aware and be activated because they have a

56:07

duty to warn others I'll definitely have another round but I'll yield thank you 56:14

Congressman Davidson um thank you uh for organizing this hearing thank you uh for those of

56:21

you who've really risked your livelihoods and and who knows what else uh to to speak the truth and it's an

56:28

honor to be able to uh join you today and and try to do something about it uh a will make it more public so people in

the future will find primary source documents that speak the truth and a lot of times I'm left going well that might

56:42

be the only thing Congress can accomplish it's been hard to pass laws 56:47

uh but one that I'm working on look I was a veteran uh in the military you get shot with all kinds of things it's an

56:53

assembly line process uh predeployment checklists you're always getting new things probably some of them are

57:00

experimental uh so I I like that you've pointed out the distinction between mRNA 57:05

vaccines and other vaccines and I think people intentionally blur those lines to try to confuse people on that um and

57:13

when you think about the military traditionally it's a risk assessment and you're essentially saying hey the risk

57:19

is great enough uh that you know the tradeoffs Merit whatever course of 57:26

action you're deciding so fundamentally the military is in the risk assessment business and right away we knew uh and

57:34

we were brief from the get-go that this was a a virus the covid-19 uh virus was 57:42

something that affected young fit healthy people in much less risky ways 57:48

than people that were older less healthy anyone with comorbidities and the Very 57:53

definition of of young fit healthy people should be the active duty military force so nevertheless uh the

58:01

Biden Administration mandated that everyone shall take the vaccine we thin 58:06

down our military uh critical critical uh people that you know take years and 58:14

hundreds of thousands of dollars to train uh that even if you wanted to find somebody not everyone can be uh an Army

58:20

Ranger a Navy SEAL a fighter pilot uh and nevertheless they were expelled now 58:26

the administration is saying oh no come on back because they' kind of said wow we really do have some Readiness

consequences but the people are dealing with the health consequences so I like that all of you have touched on the

58:40

consequences of myocarditis perhaps that's the most well documented uh 58:45

Health case and we've seen that in the active duty Force One of the Amendments 58:50

that we were able to get in the National Defense authorization Act was a required study to say what are the incidences of

58:58

vaccine injury in the act of Duty Force now I I'll admit I'm a little concerned 59:04

that we're going to get an honest set of data because of some of the things that you guys have shared today uh and

59:10

frankly the way the Administration has politicized everything about covid um 59:17

but here's one of the things we Exempted the vaccine makers from liability all 59:23

right we didn't exempt uh people who mandate the vaccine from 59:29

liability so in the private sector I don't know which trial lawyers are working on lawsuits against all the uh

59:36

private employers that mandated vaccines of their own will uh but in the federal 59:43

government uh the Department of Defense mandated these things and when you have injured veterans because they were

59:50

directed to do things the Veterans Administration provides disability

compensation and claims and so I'm working on legislation that would be presumptive if you are an

1:00:02

active duty service member who was or a service member who was directed to take the vaccine and within one year of

1:00:10

taking the vaccine you developed myocarditis and then other things that they'll go through the rul making

1:00:16

process to determine but specifically myocarditis because the data has been so well established on it the cause and

1:00:23

effect and it that you would be presumptive just like we did in the burn pit legislation for 1:00:29

example so I just wonder if you could talk about uh you know the the 1:00:35

responsible uh party there if the government has mandated that with the 1:00:41

knowledge uh of the risks and the consequences for uh the veteran and then 1:00:47

how do we take care of um not just myocarditis but building the data set to show the level of injury uh to the

1:00:55

service members thank you Congressman um as someone who proudly wore the uniform

1:01:01

back in the 1980s in the Air Force and my colleague Dr mhone was also former Air Force so we appreciate the the line

1:01:07

of questioning because it's near and dear to our hearts having proudly serve this country and I I think it's tragic that

1:01:15

we rolled it out on that young healthy cohort this experimental investigational um product early on

1:01:23

and Senator Johnson brought up early um the Department of Defense has a database 1:01:29

their epidemiology medical epidemiology database is the best in the world and 1:01:34

after the hearing we had uh December or January year year or so ago they froze that we had the data at that point we

1:01:41

know who was being injured and we saw marked rises in all sorts of conditions 1:01:46

and when he tried to request the information from them they said oh we've got to update our database and then they

1:01:52

basically a glitch and erased it so yes I mean in there should be I I 1:01:59

mean 231 um Uniform service members present or previous just filed for um 1:02:05

Court Marshal against Secretary of Defense and others and I think that's a 1:02:10

reasonable action based on forcing our troops into something investigational that hampered the Readiness of our

1:02:17

nation I get calls from military Physicians around the country every week reporting to me the clotting they're

1:02:23

seeing the lost another pilot today um got another one sidelined myocarditis 1:02:29

another you know 40-year-old had a heart attack another 27y old had a heart attack another 22-year-old has an

1:02:34

18-inch clot I get calls every week from medical Physicians around the country reporting to me what's happening I

1:02:41

appreciate and you know not only you know I love what you did with the defense authorization but we should

1:02:48

restore their back pay in addition and restore them to full honor and duty if they even want to come back

1:02:54

to a government that harmed our own soldiers that were defending our own country so this is obviously I'm

1:02:59

passionate on this one obviously so I will call my uh comments and defer to Dr 1:03:05

milone my other fellow Air Force friend as a person who got my second small pox vaccine one before I deployed and got my

1:03:12

entire Anthrax series before I deployed twice to Iraq and was in both of my deployments in Iraq by a burm pit thank

1:03:21

you for all that you're doing um I think that you know I I really as I approach

these situations because I think sometimes my wife talks about this as she writes about these things she says I

1:03:32

think one of the problems is is no one can imagine this amount of evil is going on that people can

1:03:39

hear what the data are showing and it's still being pushed

1:03:44

forward I think a lot of us liked hanlin's razor when never attribute to malice what can be easily explained with

1:03:53

ignorance okay there's no more any there's no more ignorance so I shared with you the Cleveland Clinic data it it

1:03:59

doesn't work so now we have it doesn't work it doesn't work to decrease risk of 1:04:05

infection so what are we using it for because it does it has no benefits so 1:04:11

now all we're left with is risk and when I showed Ed Dow's data that's 14 to 15 1:04:16

to 44 year olds that's the military member these are the people we expect the most out of right and so we have

1:04:24

this blip on this new new treatment is causing this and we've seen the blip I 1:04:31

guess Mike I appreciate all you're doing um this is no longer ignorance they know 1:04:37

and so now what it seems like we have transitioned from ignorance to malice is that they know this is wrong

1:04:43

and they know this is hurting people without any benefit it must stop absolutely an amen thank you for saying

1:04:49

that and I think in our system historically you know we've had things like that happen but when there when it

1:04:57

happens then there's massive liability massive liability and um you 1:05:03

know can anyone speak about that I mean I don't know that we'll be be able to get large uh liability out of the

1:05:09

government but we can at least take care of our veterans um you know as we have in numerous other cases but what I hope

1:05:16

to do is establish the data set so that there can be someone held accountable in the private sector because as you said

1:05:22

so well Dr milhon uh it's not ignorance anymore Mr davidon I want to point out that uh we need a

1:05:30

pathway I am caring for numerous people who are service members military 1:05:38

contractors and it is a complete disorganized mess right now of who 1:05:43

orders what test how are they going to get the care who's going to cover the net sets of tests how do they get access

1:05:50

to Specialists uh this is a giant problem the costs are skyrocketing right

1:05:56

now I've never ordered so many cardiac MRIs and Echo cardiograms and EKGs and 1:06:03

and recurrent visits to the emergency room or the the clinic for the service members we need an organized approach to

1:06:10

take care of them we have to recognize the vaccines have injured our servicemen and we need a

1:06:15

program right now they are desperate and there's they're going everywhere for 1:06:21

care right now because they don't feel like they can get it through through the standard medical Provisions in the military many of them are not service

1:06:28

connected veterans so they're not going to vas some of them are in and out of service so we really need the whole

1:06:33

bundle not only what's happened who's responsible but how to take care of them thank you that is the exact purpose of

1:06:39

the legislation we're drafting now and uh just appreciate your work and uh look forward to the collaboration to

1:06:44

hopefully get this across the finish line now you'll back thank you i' I'd like to yield time to Congressman

1:06:53

BS that was it great thank you thanks representative

1:06:58

green and thank you for organizing this and Senator Johnson thank you for your your leadership and work on this as

1:07:04

well and thank you to each of you for your your long longtime efforts in this 1:07:10

area I wanted to get to go back and just kind of give a retrospective and then 1:07:17

and then bring it up and and ask you to to update us so in March of 202 two um 1:07:25

you actually had the first trunch of documents come out um through Foy requests about 1:07:34

fizer's uh their tests and and what they had discovered about their unique 1:07:40

vaccine right at that at that time they found that there

1:07:47

were more than 1,000 unique adverse um uh side effects to the Mr mRNA uh

1:07:53

objections and I wanted to share with you some of the ones that that that were listed in that in those

1:08:00

documentation and then I want to talk and you've been you've kind of you you've L us there and I want to get to

1:08:06

down to um try to resolve this because III

1:08:12

really don't understand why we and then you've tried to explain it it's malice perhaps it's evil it's it can no longer

1:08:19

be considered unintentional but this is what the list includes acute kidney injury acute flaccid myelitis anti-perm

1:08:27

antibody positive uh brain stem embolism brain stem thrombosis Cardiac Arrest 1:08:32

cardiac failure cardiac ventricular thrombosis cardiogenic shock central nervous system V vasculitis death uh

1:08:40

death neonatal deep vein thrombosis en sephtis brain stem entis hemorrhagic 1:08:46

frontal lobe epilepsy foaming at mouth epil epileptic psychosis facial 1:08:51

paralysis fetal distress syndrome gastrointestinal amloid amloid dois 1:08:57

generalized tonic clonic uh seizure this is really tough for a non-doctor to read 1:09:03

here great hashimotos inph incopy he

1:09:09

hepatic vascular thrombosis herpes zosters reactivation immune medicated hepatitis interstitial lung disease

1:09:16

jugular vein embolism juvenile myoclonic epilepsy liver injury low birth weight 1:09:22

multi-stem inflammatory syndrome children myocarditis neonatal seizure pancreatitis pneumonia still birth

1:09:29

tachicardia temporal lobe epilepsy testicular Amun AMU autoimmunity 1:09:34

thrombosis cerebral infarction type 1 diabetes mellitis Venus thrombosis 1:09:39

neonatal and vertebral arteriosis are among 1246 unique medical conditions arising 1:09:48

because of this vaccine they had attempted to actually

1:09:53

close this down so these side effects would not be uh public for 75

1:10:02

years what what DW what drove it I

1:10:07

mean because it gets to the the culpability really what drove um this

1:10:13

establishment just to basically say we don't care we we just simply don't

1:10:20

care and is is it the drive for money and and what I would just ask is is

1:10:27

the cause of this that that that we we were so scared it was so unique they

1:10:33

thought the covid-19 was so unique that we were going to put anybody at risk we didn't care as long as we got this

1:10:39

vaccine and I and and Dr Cole you mentioned something I wanted you to expand on this as we discuss why this

1:10:45

developed and and how we prevent this from happening again is is and and I wonder if is it the consolidation within

1:10:52

the medical care profession where you have Independence versus everybody's now coming in as employees of these U

1:10:59

Medical Care organizations the role of government the fact that that there 1:11:07

are Kickbacks available to um um government officials explain to to those 1:11:15

who are just you know bumpkins like myself how we got to this point and how 1:11:21

we how we extract our El so we don't ever get there again can you well I I 1:11:27

always like to joke what is an elephant an elephant is a mouse built to government standards so if we go back

1:11:33

historically and look a unfortunately at a lot of laws that have been passed over time it builds up this machine that's

1:11:40

almost Unstoppable so we look at the prep act the prep act has some horrific parts of it look at the what was it the

1:11:46

B do act that uh allowed you know universities to make a billions of dollars off their patents so we go back

1:11:53

and and does the government work for the people or does the government work for industry and so that that's the big

1:12:00

question and you know there's so much Lobby money yes the FDA is captured by 1:12:06

pharmaceutical companies in terms of how much money how what percentage of their budget they get from Pharma for drug

1:12:13

approval and FASTT tracking if you look at the CDC Foundation they make billions of dollars off vaccine patents they hold

1:12:20

the patents to what 56 58 vaccines now if you look at the NIH NIH officials if 1:12:28

they have a patent on a drug that goes to Market they can make \$150,000 a year for the rest of their life if they like

1:12:34

several of the uh individuals at NIH that are on the madna patent under Tony fouchy so there are intertwining

1:12:43

corruptive uh corrupted interests Financial interests certainly and when we as a nation value money over our

1:12:51

freedom and when we value our own self-interest over having a constitution

That Matters to each and every one of us and a Bill of Rights that we actually believe in and stand

1:13:03

for again you know then we're on the wrong track so I

1:13:08

think it started with bad legislation over time that we can roll back

1:13:13

hopefully I also think the to Dr mohan's point you know greed plays a role in our 1:13:21

society unfortunately and I think certain individuals and I know Dr mola can address the revolving door of the uh

1:13:29

Regulators that go onto the pharmaceutical Industries um that that's my overview 1:13:35

and the ACA you know the Obamacare started consolidating systems and once you have a master over

1:13:43

you your willingness and ability to speak independently and freely falls under that curtain of fear and it

1:13:50

shouldn't where we we used to be the freest Nation on on Earth we used to not

have medical commissions attack people for free speech we used to actually stand for 1:14:02

individual rights and individual principles but it's been rolled up into these large corporations machines

1:14:08

captured agencies and in my opinion that's why we're we are where we are now and that's my opinion thank

1:14:15

you in a book I've published with John leak my co-author here today uh it's 1:14:21

called Uh Cur to face covid-19 preventing hospitalizations and deaths 1:14:26

while battling the biopharmaceutical complex we actually describe a complex a Syndicate that's formed a

1:14:31

biopharmaceutical complex which is powerful it's been years in

1:14:37

formation uh but everything we've talked about today the most interesting thing to me is that it's Global we could be

1:14:44

having the same discussion in Germany in France and South Africa and England none 1:14:49

of this is uniquely American a global Syndicate appears to be running the table on this now it

1:14:57

includes a lot of powerful non-governmental agencies that are not

elected uh the uh United Nations the wh The Gates Foundation the welcome trust 1:15:09

the rockfile foundation gavy sepy the Coalition for epidemic preparedness inovation formed by Gates and

1:15:15

WF uh uh unitate all the regulatory agencies are involved Dr fouchi was just 1:15:23

here testifying he is very prominent and active in the wh he is in no way 1:15:29

retired um the uh uh Jeremy Ferrar who was at the welcome trust who is in on 1:15:37

these conversations with fouchi and Collins to try to cover up the lab origins of the virus he's been rewarded

1:15:43

for his work he's now the chief scientist at the wh you know we have about 90% of our FDA

1:15:49

Commissioners take wonderful lucrative jobs in Industry after they finished 1:15:55

regulating those individuals you saw Scott gotley for their former FDA commissioner uh you now on the board of

1:16:02

fiser on CNBC every day guess what promoting the fiser vaccine now it's in 1:16:08

the open now we have uh FDA commissioner caleff in one of the division directors 1:16:14

marks openly promoting the covid-19 vaccines off label they're promoting the 1:16:20

vaccines for things they actually don't do uh they're promoting the vaccines to reduce hospitalization and death not a

1:16:27

single prospective double blind randomized bable control trial ever showed the vaccines reduced hospitalization and death there's no

1:16:33

valid observational study that shows this they're promoting the vaccines uh to prevent long covid in fact they do

1:16:41

just the opposite a paper by De exner and colleague shows that actually the vaccines make long Co way worse it don't

1:16:47

make it better so they're out there instead of being objective and being our 1:16:53

watchdogs on drug safety they're out there now part of this complex promoting 1:16:58

these products listen when you said 75 years the attorney for the FDA didn't 1:17:04

want to release it for 75 years the FDA is driving this conspiracy to cover up this 1:17:13

drug safety problem that we have in the United States it says drug safety catastrophe and the reason why we're

1:17:18

here today is because our F FDA has gone Rogue they are simply Rogue they are now 1:17:25

an extension of this biopharmaceutical industry they are not protecting 1:17:30

Americans from the safety concerns of biologic agents today and I think that's our greatest concern and and uh I'll get

1:17:37

you in a sec Dr M I know I know I'm probably out of time but IID just say the calization that you've described is

1:17:43

reminiscent of previous um calization through history I mean if you look into 1.17.48

Japan 1912 to 1926 you're going to see that kind of same calization that takes 1:17:54

place and what does that lead to it leads to loss of of Liberty freedom for the Nations that are calized and and you

1:18:01

you described a global cartel basically cabal Dr milh yeah I'd like to take it 1:18:07

um as I it's a really good question and I think it's so multifaceted but I wanted to take it from the Physicians

1:18:13

sort of this new corporatization of America um and there was there's a carrot and a 1:18:19

stick the carrot is is if you get enough of your panel

1:18:24

vaccinated you get a bonus if you don't you don't get the

1:18:31

bonus that's all throughout when that came out I'd never heard about that as a pediatrician before I I told people that

1:18:38

doesn't occur there's no way that happens pediatricians don't do this then

I heard that if they had enough they got a \$40,000 bonus

1:18:49

what what and then if you speak out and you don't do it and you don't now because of the El electronic medical

1:18:56

record they know everything that's going on and you have the green light or the red light and all these kinds of things

1:19:01

everyone knows the the practice the practice Governors know what's going on 1:19:07

and so if there are incentives that are even beyond the doctor to doctor but into corporate

1:19:14

medicine that's a pretty big carrot but there's also a

1:19:21

stick is that if you speak out about this if you venture to say I don't I you 1:19:27

know this I mean whenever whenever in medicine was I told what I could say 1:19:33

what should be Exempted you can only exempt this vaccine for this no I've ex 1:19:39

Exempted so many kids for vaccine oh you had a bad reaction that okay I'm never going to give that to you this is basic

1:19:45

never in our history were doctors limited on what we could exempt if we said this is bad for our patient you

1:19:50

can't say that and if you say it you're gone so that's that the other part is is 1.19.57

what you were speaking to Congressman Davidson is the issue of when the 1:20:02

doctors wake up and they realize the data were

1:20:08

there and they caused harm to their patient there's concern am I liable now 1:20:16

because I ignored the data and if now I insisted and I told them and maybe I 1:20:22

didn't give them informed consent may maybe I didn't tell them of the specific 1:20:27

numbers of myocarditis we know occur maybe I forced a person who was 1:20:33

completely healthy who had no risk to get something that had a true known 1:20:39

risk maybe some of this is just like I don't I can't say this vaccine is 1:20:47

wrong now because now I have to own all the ones when I said it was right when the data were there and I ignored

1:20:53

it yeah trust is simple it's truth plus transparency and then you earn trust and 1:21:01

we have agencies that aren't transparent and aren't truthful and it's simple as that if you want to trust your

1:21:07

government the government needs to be truthful and transparent and that's what we're lacking from the agencies that's

1:21:13

why it took 70 the judge uh you know overturned the fda's desire to hide data from us for 75

1:21:20

years trust truth plus transparency that simple I will tell you what's happening Patient to Patient to Patient

1:21:26

that the the catastrophic loss of trust in Physicians and medicine and

1:21:32

pharmaceutical companies is at a place I've never seen it it's a crisis because now I can't even get them to do things

1:21:40

that are not risk at all and have great benefits because they go well I don't

1:21:45

trust what any doctor says now and I don't trust what any drug right all that's gone and that's not an easy thing

1:21:52

to get back once we've lost it yeah we're in Congress tell us about

1:21:59

that I'll you to representative green thank you that that boy we could talk

1:22:05

about that on all kinds of levels um Senator Johnson you had a question pertaining to something Dr Cole was

1:22:10

talking about yes thank you this than thanks for yielding because that question Le leads right into where I was

1:22:16

going to go with my next line um you know throughout the pandemic again to me 1:22:21

this has been vious because I've been connected to you guys for you know three four years now and I I kept racking my

1:22:28

brain how can this keep going it it can't be greed I mean we're literally 1:22:33

we're really literally costing economies trillions and trillions of dollars we were destroying people's lives this this

1:22:40

can't be about the greed of 10 or 50 or hundred billion dollars in pharmaceutical profits I just I I

1:22:48

couldn't you just couldn't square that Circle right um the root cause i' I've 1:22:55

come to understand is really just the the liability protection for vaccines if you go back to October

1:23:01

2019 when you had Rick brigh who is the the fellow who issued the emergency use authorization which sabotaged hydroxy

1:23:08

chorin he's on the stage at The milin Institute with Dr fouchi and they're bemoaning the fact I mean look at this

1:23:15

video it's it's very instructive and it's key they're bemoaning the fact that we don't have a universal vaccine

1:23:21

program the flu just hasn't done it we haven't been able to convince enough people and then they comment it's going

1:23:26

to take a probably going to take a pandemic this is a couple weeks before event 1:23:31

2011 it was largely focused on how to censor misinformation in other words the 1:23:39

truth okay I mean they they planned they planned the reaction to the 1:23:45

response to a pandemic very well my

1:23:51

question because you had the MRNA patented from madna what within a day of 1:23:56

learning the genome there's something unique about the MRNA platform within the whole

1:24:04

vaccine world that's just way more profitable right I mean orinary vaccines you have to grow them in cultures and it

1:24:11

just takes you know you identify a flu vaccine it's like six months to nine months to later on it's already that

1:24:19

fire is gone mRNA you can have that mRNA the new mRNA vaccine

overnight so I guess I'm wondering how what is it about the what these people 1:24:33

want to do with this mRNA platform and then I want to go in extension because I need my house colleagues to to really

1:24:40

pay attention to this over the next couple months what is happening now with the who amendments that are going to take away

1:24:47

our sovereignty take away a lot of our health Freedom have the the gaves and the World Health Organization the

1:24:53

fouches and the Bill Gates and all those folks pretty well call the shots during the next 1:24:58

pandemic to force mRNA vaccines in everybody's arm if you're gonna have a

1:25:04

vaccine passport so again sorry I've kind of dragged on here but I mean this is as I've been dealing with this now

1:25:11

for three or four years and I'm trying to get my header on the evil you just you don't want to believe

1:25:18

that something this evil could be pushed globally

1:25:23

why Senator let me pick up on the messenger RNA there's some important citations a paper in British medical

1:25:29

journal by Lani first author points out that United States and other major 1:25:36

Western countries have had a love affair with messenger RNA since 1985 we have poured tens of billions of

1:25:44

dollars into messenger RNA before the pandemic before the pandemic there are 1:25:50

over 9,000 messenger RNA patents 9,000 multiple most of the prominent 1:25:57

people who have a claim to invent messenger RNA are in Europe and they work for these big

1:26:03

companies but let me tell you the big patent holders are sanify curac 1:26:10

madna number four the US government the US government is kneep in 1:26:16

messenger RNA in 2012 DARPA our Research Unit of the

1:26:22

military declared a program it's called the Adept P3 program it said we will end 1:26:30

pandemics that could affect our military within 60 days using messenger RNA 1:26:36

that's in 2012 messeng RNA didn't come out of operation warp speed this has been in 1:26:43

the background now the companies you're right because you literally on a computer screen can redesign the code

1:26:49

and then come up with a novel protein and wouldn't it be wonderful ful if we could replace a missing protein like

1:26:54

insulin in a type 1 diabetic or eag lactosides in a patient with fabra 1:26:59

disease the companies tried this over time the messenger RNA technology failed 1:27:04

for replacement of normal proteins because the human body figures this out and it it has ways of basically just not

1:27:11

having this take now when Caro and wisman won the Noel prize for this 1:27:17

really creation Now of synthetic messenger RNA it was historic that 1:27:23

across all Scandinavia there were Candlelite protest vigils about how evil 1:27:30

and terrible this technology is this has never happened before where a Nobel Prize was awarded and immediately people

1:27:36

said no this is a global mistake for Humanity this is playing out right in 1:27:42

front of us you know the Nobel Prize is not always a mark of human beneficience 1:27:47

it's not in fact there are multiple nobels that have led to Great disaster 1:27:53

including Nobel himself and and dynamite uh Dr habber and poison gas that was 1:27:59

used to G gas people to death in Nazi Germany uh uh uh uh the invention of um 1:28:07

the temporal labotomy which was done for about a decade and a half in the United States it turned patients with

1:28:13

schizophrenia into vegetables it was a total disaster that was manetz so listen 1:28:19

the the Nobel Prize can be something that's horri horrible for Humanity messeng RNA was recognized as something

1:28:25

horrible for Humanity and it's being protested real time mad's announced 40 1:28:31

different vac messenger RNA vaccines they've already tested a influenza vaccine they have uh an Epstein bar

1:28:40

virus vaccine that they halted because of myocarditis and when I pointed out the 1:28:45

The Crossing paper which finds the messeng RNA in the human heart to me 1:28:51

that was semental paper this is Harvard Department of pathology because if covid-19 messeng RNA gets stuck in the

1:28:57

human heart and causes inflammation and damage there by producing protein all messenger RNA vaccines will do that all

1:29:04

of them and I agree with Dr Cole as well as Dr milone uh one of the things that 1:29:09

should come out of this is a strong call to suspend all messenger RNA development 1:29:16

because of this concern on human safety this is to to have you know a a poised 1:29:22

influenza vaccines and childhood vaccines using this genetic technology in my view is going to be a disaster for

1:29:29

the American population again my summation here is I'm asking my house colleagues because the Democrats and

1:29:35

Senate won't touch as the 10- foot pole I I offered an amendment to deem any agreement with the whoa treaty you know

1:29:42

every Republican voted for it except for one every Democrat voted against it so we need the house to step up the plate

1:29:49

understand what is happening right now in terms of the by Administration negotiating you know with all these

1:29:54

other countries in the world amendments to the who uh agreement that could take 1:29:59

away our sovereignty and we need to stop it and we need to expose it so that we can stop it 100% And and the who we need

1:30:07

to withdraw from The Who and and the wh is primarily private funded by all those 1:30:13

organizations Dr Mulla mentioned yeah I can assure you you're looking at lawmakers up here that definitely want

1:30:20

to defund the W o and the UN I don't think we should be participating you

guys agree with that I I think I think we're onard Senator Johnson I sure you were we are totally on board in

1:30:31

agreement with you can I just make a me mention of this uh I I think that our 1:30:37

body is fearfully and wonderfully made and when you decide to Tinker with 1:30:44

this beautifully designed body for instance what Dr Mulla brought up the

1:30:49

heart cell is really meant to do one thing and that is to beat and so it has all the proteins it needs to beat when

1:30:57

you ask that heart cell to do something else than just beat you're going to have 1:31:03

problems this platform goes everywhere so the way the beautiful body was 1:31:08

designed we're now tinkering with this beautifully balanced

1:31:14

creation and and I really believe this that mRNA technology is really playing 1:31:20

God and that usually ends up in a very bad situation I I fully agree with you 1:31:27

speaking of playing God I I got to listen to Dr fouchy earlier this week and uh yeah well he well said um I want

1:31:38

to bring up uh before the the hearing today uh just some of what he talked 1:31:43

about in the in the um deposition we had with him he wrote a paper back in 2012 1:31:50

where he described a scenario um and he was talking about gain of function uh changing and I'm not a doctor so if I

1:31:57

screw this up um but we're changing viruses uh and he wanted to get ahead of nature that's what he was talking about

1:32:04

getting ahead of nature because he was saying that nature creates viruses and we have to get ahead of Nature and we

1:32:10

have to create vaccines to fight the viruses that nature creates speaking of 1:32:16

playing God and gain of function he was talking about gain of function research allows these scientists to be able to do

1:32:23

that um therefore it's so necessary and important with the gain of function to 1:32:28

create these viruses in a lab and then work on vaccines to combat the viruses 1:32:35

but then in this paper he described a scenario where worst case scenario the 1:32:41

virus escapes the lab and our worst nightmares come true he also States in 1:32:48

this paper that the benefits outweigh the risk those are Dr fouche's words the

1:32:53

benefits outweigh the risk and this was back in 2012 and we saw the exact 1:33:00

description of what he was talking about literally come true happened to all of us and happened to the entire world and

1:33:06

in in the uh uh questioning um earlier this week with Dr fouchy he was asked if 1:33:13

there's anything that you could um do or change or or what would you like to um 1:33:20

anything to make all of this better he said the one thing he would like to do would he wanted to see a stronger

1:33:28

wh or or stronger un stronger World governing body over these labs to make 1:33:36

sure that they're all compliant and make sure that they're all operating under the same Rule and and then Dr McCulla

1:33:43

you just mentioned that Dr fouchy is uh working and serving with the who well no 1:33:48

wonder this is a man I want you all to really think about this this is a man who for years and years

1:33:54

with his government position and government funded paycheck was allowed to play God basically unchecked and now

1:34:02

it's no wonder that he wants to see a stronger who and a world governing body 1:34:09

that would force medical compliance on all of Americans so Senator Johnson I 1:34:14

totally agree with what you said this is something that we have to get ahead of we we have to get ahead of it and we as

1:34:20

lawmakers owe the American people that um I I want to I want to Pivot to a 1:34:25

question uh and it's something that I've seen on the internet and you know all conspiracy theories are all over the Internet so I don't know if this is a 1:34:32

conspiracy theory or not but I want to ask this question uh some serving on the committee we've talked a lot about

1:34:39

Origins for covid-19 that's been primarily the focus of our covid

committee so far now I'm just asking this question because this is something

1:34:50

I've heard could covid-19 it was created in a lab could it have been created to 1:34:55

Target ra like races uh say for example if China wanted to send uh put a 1:35:01

bioweapon on India and they wanted to defeat India with with a virus can they 1:35:07

make we make bioweapons make viruses to Target human beings based on something 1:35:14

in our DNA something in energetics say like our race or or you know being one 1:35:20

group of people is is that possible or is that strictly te technically it's possible and if you look at the Affinity

1:35:26

of The Binding of the spike protein to the A2 receptors there's a mutation called the k2r mutation and if you have

1:35:33

that k2r mutation Spike doesn't bind and that happens to be a couple of ethnic groups and then if you go through you

1:35:40

know the Scandinavians it binds more strongly and then um you know blacks and it binds less uh less Affinity in

1:35:47

certain Asian populations so the spike protein does Target a binding of more 1:35:53

strength with different genetic profiles however the spike protein also binds to 1:35:59

a lot of cell surface proteins and can enter the cell through a lot of other Pathways is that biologically feasible

1:36:06

to do that we'll ask metabiota and other Laboratories that were in the Ukraine what were they tinkering with you know

1:36:12

this is the problem with bioweapons programs and we you know you go back to you know Lyme disease uh research and

1:36:19

development back in yep anyway long history of bioweapons

1:36:24

research is that possible genetically to do yes it is um is it probable in this 1:36:30

scenario only if you ignore all the other receptors that the spike protein binds to so I think it's partially

1:36:36

scientifically back but conspiratorial in the sense that this is a multifaceted

1:36:42

protein that attacks our cells in multiple ways there's a paper published by farcus and colleagues in the journal

1:36:48

military medicine and it analy SARS K2 according

1:36:53

to the criteria of a bioweapon and there are dozens of

1:36:59

criteria and they check the box on does the virus have these capabilities the answer from the farcus analysis SARS K2

1:37:07

is a bioweapon now there are two papers uh in the pre-print literature by Dr uh Shing 1:37:14

Ling who uh also a Chinese investigator now in the United States who's also 1:37:20

concluded it's a weapon we don't hear about military defense systems and uh uh 1:37:27

and weaponry anymore we hear about biological threats and countermeasures 1:37:33

so the biological threats are the viruses the bacteria and fungi that are being developed in these biological

1:37:39

Laboratories and the countermeasures are vaccines monoclonal

1:37:45

antibodies and other Therapeutics what we've learned is this is big business this is big government business

1:37:52

companies get very rich contracts they get pre-purchased uh products huge amount of 1:37:59

we've seen this with SARS kov 2 we've seen it with monkey pox we are now 1:38:05

seeing this now this is big big business and what's happened is that companies 1:38:11

have rushed in there's so much money there that no one can step back and say 1:38:18

wait a minute what are we doing gain of function is to is to modify an organism to become more infectious and more

1:38:25

lethal in the paper papers published by men Cherry as first author Ralph baret 1:38:31

senior author nature medicine in 2015 proceedings of the National academ Academy of Sciences in 2016 these are

1:38:37

widely read and cited papers they describe the creation of a Wuhan

1:38:43

Institute of hology one SARS likee virus

1:38:48

in the papers they thank the National Institutes of Health and Nia Dr fouchy for supporting the research they thank

1:38:56

Dr Peter gasic for taking these plans and shuttling them over to China they 1:39:02

thank Dr shingling Lee in China for doing the work they say in the papers it's gain of function research but

1:39:10

because it started before the ban on federal funding for gain of function research they say it's exempt and now

1:39:16

it's being done in China they describe the creation of a virus that looks like it's prototypical SARS K2 in the lab

1:39:24

this is published 2015 2016 means the work was done back in 2012

1:39:30

2013 they never released the genetic code for what they uh produced to

1:39:35

clinten the the bank for genetic code which they're supposed to and baric says publicly well we discussed it with the

1:39:41

NIH and we thought it's better that we not to do this this is the question the 1:39:47

co select committee should be all over these baric papers and and say where's the code for this odds are it may match

1:39:55

very closely if not perfectly the original strain that came out of the lab this would be proof positive that this

1:40:02

was a US joint program of gain of function research it's all chronicled 1:40:07

because when fouchi is going over the emails with Collins and Jeremy Ferrar 1:40:14

and Christian Anderson from scripts and Eddie Holmes from uh University of 1:40:20

Sydney they sayoh boy how are we going to deal with these

1:40:25

papers and the decision by fouchi was to commission Christian Anderson to write 1:40:31

the first deceptive paper on the natural origins of SARS K2 in January they all 1:40:37

thought it came out of the lab and it was Barrack's virus that came out of the lab but by April Christian Anderson publishes the nature of medicine it must

1:40:44

have come out of a of of a Chinese fish market a wet market and 12 more papers 1:40:50

were published by Anderson Holmes and others this was the great academic deception that was the storyline they

1:40:57

created this is what I would expect as a US citizen the house select committee to be on laser focused on this not asking

1:41:05

fouchy about six- foot distancing that's wasting Americans time quite honestly we 1:41:11

want to see some hard questions Ralph baric who's been publishing on Corona viruses at un of North Carolina Chapel

1:41:18

Hill since the 199 90s should be on Capitol Hill every week being questioned 1:41:25

Peter Gess at ethoca Health Alliance which is a richly funded NGO with dozens and dozens of employees has publicly

1:41:32

said that he wants to create a a library of these Corona viruses and a library of 1:41:38

vaccines he wants to hold the power it's his public aspiration it's on his website we ought to be checking out

1:41:44

Peter Dass pretty hard you know he just got another round of funding now he's not going directly to Wuhan he's taking

1:41:51

his federal dollars to Duke University in Singapore to guess what to work on more Corona viruses now fouchy tedos at

1:42:00

the wh uh Peter uh hotz a vaccine front man

1:42:05

down in in Houston Bill Gates they all say there's going to be another pandemic 1:42:11

they all say this with great enthusiasm they say it's going to be way worse than covid these are their public

1:42:17

statements I think we should take them seriously there are way too many gain of 1:42:23

function pathogens being created in these Labs right now and all we need is 1.42.28

a breakdown uh whether it's intentional or unintentional another release and the

1:42:33

whole world could get sick again well I will tell you uh uh to the credit for 1:42:39

the covid select committee they are they have been focused on just what you're talking about so I I can't I can't let

1:42:45

that go by and give I have to give them credit for that um but I hear from so many Americans that want to talk about

1:42:52

the vaccines uh that has been forced on them I want to I want to bring up one more issue and then I'll I'll yield to

1:42:59

um Congressman Davidson let's talk about something that people have a lot of fear about and that's cancer and we are uh l

1:43:07

think it was just reported in the Wall Street Journal uh just a few days ago talking about young people are now

1:43:14

having high rates of cancer um higher rates than normal uh and then we know in 1:43:20

March of 2023 fizer bought a company called Sean for 43 billion Sean's a 1:43:26

biotech company that discovers develops and commercializes transformative cancer 1:43:31

medicines um again this is something that I I can't say it's related or not related but the timing is interesting um

1:43:38

I just want to ask the three of you have the covid vaccines resulted in an increase in cancers and are turbo

1:43:46

cancers real is this something that that's made up in people's minds or is it are you actually seeing it I will

1:43:52

take the heat for this one because I was the first pathologist in the world to bring up this point after these shots rolled out I started seeing an increase

1.43.59

in the laboratory of certain types of cancer you know I I at that point misstated the percentage and then it

1:44:05

normalized but it was still two to three fold above what I was seeing in certain types of cancer endometrial cancers

1:44:11

melanomas in young patients very aggressive melanomas in young patients confirmed by my colleague colleague Dr 1:44:16

anglish dlish one of the leading cancer researchers in the UK confirmed by oncologists all around the world there's

1:44:23

a paper that came out from uh Singapore from a far pharmaceutical uh individual every cancer drug off patent look at

1:44:31

this the the dose sales percentage increase in Singapore where you can get the base level data all of them are up

1:44:38

anywhere from 20 to 30% and this is purchase per dose and they were one of 1:44:44

the high most highly boosted nations in the world if you look at Ed Dow's data if 1:44:49

you go to finance Technologies with a ph.com he has data set from the UK again 1:44:55

that healthy age 15 to 44 age group 10 years of data and then in 2021 huge 1:45:01

spike in 2022 even a bigger Spike the data don't

1:45:07

Li if you look at even the CDC Wonder data and again getting the actual base 1:45:14

level data out of our government is difficult I want to you know congratulate the informed consent Action Network and Judicial Watch and others

1:45:21

that continue to foyer our government for information and I know Senator Johnson has done Yen's work trying to get information out of these

1:45:28

agencies but even in CDC Wonder data if you look at every Age Death a 15 to 25 1:45:34

25 to 35 Etc there is a hockey stick inflection upward right now in all those 1:45:40

data sets now do I want to panic everyone no do we know mechanisms why the shot would do that sure the spike

1:45:46

protein binds to the guardian of our genome the p53 gene the spike protein binds to the breast cancer and ovarian

1:45:52

cancer broag Gene and one thing we didn't bring up today that I know Dr Malone brought up every vial that's been

1:45:58

examined of this mRNA product is contaminated with DNA from ecoli 1:46:05

bacteria these are all contaminated products this isn't synthetic mRNA this

1:46:11

is mRNA plus contaminated DNA because they grew these in bacterial cultures of 1:46:17

eoli now what other lengths of segment are going to show up in these vials and 1:46:22

shots that could bind upstream or Downstream of a cancer regulating Gene in any cell in your body we don't know

1:46:29

are there things we can do in the laboratory to look for that yeah there are some tests that could be developed at the NIH care to do

1:46:35

that but the the problem is is this contamination could be leading to these 1:46:40

problems are the turbo cancers real well go try to get an appointment in an oncologist office right now you're three

1:46:48

to four months out and most cancer offices to try to get in for an appointment and do I mean to panic

1:46:54

everyone no but did we not only and and then if you look at fiser and cerity and 1:47:00

and madna they clearly State well mRNA isn't expected to have any genotoxicity 1:47:06

so we're not going to do any mutation or cancer studies on these products because it's mRNA no it's not every single one

1:47:14

from every laboratory around the world that's done this so far looking at these files have had contaminating DNA Integra

1:47:20

DNA as a much higher cancer risk than synthetic mRNA itself so I mean I I have 1:47:27

a whole slide on all the mechanisms of injury that these can cause in terms of promoting cancer every country I've been

1:47:34

to and I was in three parliaments before the end of the year in in Europe Croatia Romania UK I've been testifying all

1:47:42

around the world everywhere I go oncologists Physicians family members 1:47:49

they all know of someone that after that second or third shot boom skyrocketing and there are some data sets ask our

1:47:55

government why they're hiding theirs but there are some data sets where it's pretty clear and especially in the

1:48:01

German um Insurance data sets you can see the 36% increase in cancer pediatrically after the roll out of the

1:48:08

shots if you look at the UK disability data sets from Ed Dow um in 2020 there's 1:48:15

about a 1% increase by 21 about 6 7% by 2022 there was a 35% increase in 1:48:22

disability claims for cancer in the UK and about a 90 plus per 95% uh shot 1.48.27

uptake in the UK so correlation is not causation I understand that but the 1:48:33

signals are there thank you our CDC should immediately be ordered to match the 1:48:40

vaccine Administration data to our cancer registry data 100% listen these 1:48:45

are publicly owned data they're they're CDC is not a private agency they can't hide Americans data from it this is a

1:48:52

potential emerging National Emergency to summarize our agencies and the data are 1:48:58

clear that the vaccines cause cardiovascular side effects neurologic thrombotic blood clots and immunologic

1:49:06

there's safety warnings on that that that's unambiguous all worldwide agencies agree the fifth area of concern

1:49:11

that we've moved into is cancer is cancer and I anticipate Dr fouchy didn't cite a single paper and all you've heard

1:49:19

me today is pinpoint site papers 1984 southernland and Baylor published a 1.49.25

critical paper it's called the multi-hit hypothesis of cancer meaning if something causes cancer chances are it

1:49:33

works by different mechanisms if a drug for instance or an exposure a can cancer 1:49:38

it works by multiple mechanisms now a paper's been published fully peer-reviewed anguis and bastillo are

1:49:44

the two authors is called the multi-hit you know hypothesis of covid-19 vaccination how does it work the Chinese

1:49:52

have published that messeng RNA itself does somewhat impair our ability to repair our own DNA if we actually have a

1:49:58

bagage in our DNA as Dr Cole has pointed out the spike protein produced in unlimited quantities

1:50:06

in a paper from University of Pittsburgh by sing and singing shows that it impairs our cancer surveillance systems

1:50:13

p53 the other one's called Brea or brca that governs female breast and reproductive cancers the third mechanism

1:50:21

is what Dr Cole points out is that all the labs that have actually examined the vials show these process related DNA

1:50:28

impurities now when the genetic code for the messeng RNA is installed in an eoli 1:50:34

which fiser and madna are using by the way the genetic code has to ramp up the 1:50:40

production of a piece of circular DNA called a plasmine they use a complex called sv40 1:50:48

semi EnV virus 40 complex there's a promoter an enhancer and what's called an origin of insertion these fragments

1:50:55

make it crank up and they actually have to produce an additional fragment called an antibotic resistant fragment because

1:51:01

they're going to kill off the eoli that don't have uh the coats that's how it survives so they harvest this so far all

1:51:09

the labs have found either the quantity of these DNA fragments including sv40 is 1:51:15

too high or the length of the fragments are too high this has become a concern 1:51:21

that Florida Surgeon General Joel Lao has said listen this is the final straw 1:51:26

that you can't the FDA has not done its own inspection of the vials for this 1:51:33

reason the FDA in 2022 recently some documents came forward where there were 1:51:39

some inspections of the vials but it was only for Visible impurities kind of crud 1:51:44

in the vials not actually for these DNA contaminants I told you the regulatory 1:51:51

wind of concern for a genetic product is 5 years that happens to be the the wind of concern for a cancer my hunch as a

1:51:58

clinician is that if there's a cancer risk with these vaccines it's cumulative people one or two doses probably little

1:52:05

risk four five six doses 10 doses more that's kind of how cancer works the 1:52:11

first paper published of someone who took a vaccine and developed a fatal cancer where we think the vaccine caused

1:52:17

it was published by Cara gaas and colleag from Greece I know I'm a senior author it's a man a little younger than

1:52:23

me takes the cancer and develops a lesion and his on a side of his head and it's a it's 1:52:30

considered what's called a basiloid cancer it rapidly invades and causes Bell paly knocks out the facial nerve

1:52:36

then it knocks out the trinal nerves and it invades the brain and kills them and the conclusion is pathologically that

1:52:43

this is the first reported case I mentioned 3,400 papers on vaccine

1:52:48

injuries disabilities and DES in the pview of literature let me tell you what that is a gross underestimate and I'll

1:52:54

tell you the reason why to publish an academic manuscript doctors are typically at 1:53:00

universities the vast majority of doctors at universities took the vaccines the vast majority of

1:53:05

universities worldwide mandated the vaccines the publication policies at these universities we require University

1:53:13

approval of the manuscript before it goes out do you think that doctors at an 1:53:18

oncology department at har or or uh MD Anderson declaring that the

1:53:24

vaccines cause cancer would ever get out the door when the doctors took the shots the institutions mandated the vaccines

1.53.32

these manuscripts are Dead on Arrival we have seen since covid a record number of 1:53:37

retractions of vaccines so even if they make it in the peer viiew literature and this has happened to me twice ballad

1:53:43

papers that are published contracted copyrighted and everything the public

1:53:49

Publishers and the editors pull these back after they're actually already published there's guidelines for when a

1:53:56

paper has to be retracted they're called the cope guidelines they are VI they're these aren't within the cope guidelines

1:54:02

to pull back a paper so we see bias an intentional bias to understate the 1:54:08

problem with the vaccines and I think it's particularly um important as we 1:54:14

interpret the cancer data because the cancer data we are largely reliant on the big university is here the

1:54:20

independent doctors can't carry this and if there's a cancer risk emerging we're not going to see it unfortunately until

1:54:25

it's way too late and and this is a real quick point I want to piggy back on every attorney Attorney General and

1:54:31

every state their job is to protect consumer product safety these are contaminated products

1:54:39

if a baby formula or a baby bottle of vegetables had glass shards in it or

metal shavings in it or a chemical from agriculture those would be pulled immediately and yet we still have vials

1:54:52

sitting on the shelves of pharmacies all around the nation in the world that are contaminated not listed as one of the

1:54:59

and here's the problem you know the FDA allows for 10 nanograms of DNA and other products these are wrapped in that

1:55:06

little protective fat they're like oh you know 10 nanograms whatever these are 1:55:11

protected they can go everywhere just like the MRNA can and so every attorney 1:55:17

general in this nation if they have one ounce of honesty one iota of 1:55:23

responsibility to their citizens should impound whatever is on the Shelf of a 1:55:29

pharmacy send it to Independent Laboratories have it tested and they should be removed from the market post

1:55:34

haste um yes people are pretty good when something changes in their life they 1:55:41

don't have to be a scientist they don't have to go to medical school um when you hear something happening more this year

1:55:47

than it did last year you understand something

1:55:53

changed what you bring up is people have noticed something changed because they 1:55:58

know I've never heard of so many people who were in complete remission and now 1:56:03

they suddenly appear back at their doctor in stage four wait a minute you've been in remission for 10 years

1:56:09

and suddenly you're in stage four this is a repeating story that all the

1:56:14

non-clinicians here I'm a Pediatric Cardiologist I don't do the cancers but I'm here hearing these things and this

1:56:20

is what I'll hear from the doctors I can't believe how many of these cancers I'm seeing but it couldn't be from the

1:56:27

vaccine that's the only thing that's changed so some of what we're fighting

with in some of this is you hear us we're asking for the data we're not just trying to make things without claims we

1:56:39

have enough of a signal we want the whole data set because these questions can be answered they could be answered

1:56:46

right now but we have to have the data set we're not afraid to look at the data if we're wrong we'll say wow we thought

1:56:52

this we were wrong we're scientists we really don't we just seeking truth but what we need are the data and that's

1:56:59

what we're asking for and that's what what you I know you guys are fighting for this but this is what we need because this answer this question could

1:57:05

be answered basically in a week and we would know but then there would be once again no excuse for taking this off the

1:57:13

market I I you just got me going as a mom when you said Pediatric Cardiologist 1:57:19

Dr mhone are you seeing myocarditis and children babies like is this something 1:57:24

that's actually happening uh with children receiving the covid-19 vaccines 1:57:29

yeah so I'll tell you sort of the first case I saw I was called down to the ER to see this kid because um he had a slow

1:57:35

heart rate and he was this incredibly muscular studly Texas player or Texas 1.57.40

football player and I walk in there and often what happens when a Pediatric Cardiologist walks into the ER is

1:57:46

everybody leaves the room um oh good Cardiology is here they just all leave right but I walk in and this kid's got a

1:57:53

a heart rate of 25 I'm thinking I wouldn't have left the room yeah um story was second vaccine

1:58:02

next day at sports he's not feeling so good they take him in they hook him up 1:58:08

he's got a heart rate of 20 um he had really no risk from Co at all most of these kids most of these

1:58:15

healthy kids most of them never even knew they had Co when we were rolling 1:58:20

this out the CDC believed that 85% of children had already had Co we know 1:58:25

natural immunity is very profound U if preventing covid but also keeping the 1:58:31

symptoms very low if you get a new variant um um but we see it I will tell 1:58:36

you some of the good news is is um even though the regulatory bodies have not told the parents the parents know and so

1.58.43

the parents who are willing to go down this road are decreasing the mandates has come off so as that has happened

1:58:50

I've watched the acute cases of myocarditis drop off now what we're left 1:58:57

with are those kids that and it's hard to tell because it's hard for us to get the data the data is out there we'd love

1:59:03

to be able to see it um but the the study that came out of Thailand that was really concerning to

1:59:10

us is when they perspectively looked at this which is what the drug company should do before they even release a

1:59:16

product and they should continue be surveilling what has happened which they promised to do which was required under

1:59:22

eua but they did not and if they did they never would lap that data out but they showed that they had a 2% 2% two

1:59:32

out of a 100 kids these healthy kids had myocardial damage when you look at those 1:59:37

kids who've had myocardial damage and you look at them 90 days with a cardiac MRI 50% of them don't return to normal

1:59:44

when your your EKG your EOC cardiogram your stress test your deponents everything is normal everything we would

1:59:50

do in an office a lot of times the only way we do this is a very expensive test 1:59:56

called a cardiac emori with Lake Gat linium enhancement insurance companies don't want to pay for it people

2:00:01

cardiologists are afraid to order these tests because if they give it as a rationale this might be a vaccine injury

2:00:07

that might get them in trouble yeah Ju Just to pick up on this so the manugian paper from Thailand and then another

2:00:14

paper by Beren from Basel Switzerland showed when they do the Baseline blood 2:00:20

tests and are ready to do EKGs ultrasounds and MRIs at Baseline and 2:00:26

then follow up at least once or twice in followup so that's prospective Court 2:00:31

that's what the FDA in the biological licensing letters to fisa Mna said you must do this to get fully FDA approved

2:00:40

fisa madna never did this but when these independent studies were done on shot

2:00:45

number two which was the Thailand study in children age 13 to 18 the rate was 2:00:51

exactly what Dr milh said it was 2.3% in the Buran study which was shot 2:00:57

number three largely in nurses and healthcare workers the answer was 2.8% so average those out it's about

2:01:04

2.5% heart damage risk per shot now only half of them feel it the

2:01:11

other half don't feel it so what I'm telling you is in a large you know when you apply this to billions of people the

2:01:18

data as we it here today is probably about 1.5% of people have suffered heart 2:01:23

damage and they don't know it I can tell you as a cardiologist is that normal like the media is going to say oh but

2:01:31

this has always been the case myocarditis has been normal no myocarditis in a paper from Finland in

2:01:38

2018 published in circulation uh by uh aolo and colleagues

2:01:43

established this that we're talking about in the United States there are you 2:01:50

know numbers of cases uh per million we are talking about a couple hundred cases in the United States per year giant cell

2:01:56

myocarditis coxi adav virus I'm telling you peer viiew literature now we have tens of thousands of cases this is not

2:02:03

uh this is not like oh and covid itself does not cause myocarditis this has been 2:02:09

one of the biggest false narratives that have exist so let let me just be clear 2:02:15

2.5% risk per shot half of the have no symptoms that's now in the peer viwed 2:02:22

medical literature the concern is if there's a little bit of scarring that occurs it can be the site of an abnormal

2:02:29

heart rhythm that can suddenly land a young person in cardiac arrest on the plain field or at sleep in a paper by K

2:02:37

Giani and colleagues from Brazil hypothesized that it's the surge of adrenaline that occurs during sports or

2:02:44

during the waking hours of sleep 3:00 a.m. 6: am. that triggers these cardiac arrests and and that's exactly what

2:02:50

we've seen paper by Gill and colleagues from uh Connecticut two boys age 16 and 2:02:55

17 take fiser on days of three and four after the vaccine the parents find them in dead in bed no chance for

2:03:03

CPR the parents are outraged they call in the corner they do an autopsy they bring in URC Michigan URC Minnesota they

2.03.09

conclude it's fiser vaccine myocarditis that's fatal you know one case of this the FDA should

2:03:16

have pulled this off the market you can imagine parents now having their children die in bed we've actually had a

2:03:22

member of US Congress where this has happened okay this is very very sad 2:03:28

people not coming to the realization and helping to warn others this is what we know about Co the infection in 2020

2:03:37

there was a giant search for covid SARS CO2 infection and myocarditis why 2:03:43

because Ralph barck published in 1990s that if we flooded a animal heart with 2:03:48

enough human beta coron virus we could cause myocarditis it was published in the journal that was edited in my office

2:03:55

the American Journal of Cardiology of which I held a very senior position so I'm very familiar with this so because

2:04:01

of this the uh the uh Israeli military the US military the college sports team 2:04:08

so the NCA Big 10 had the most formal evaluation they studied all the athletes 2:04:13

who got covid and in 2020 30% of the athletes got covid okay they did 2:04:19

everything cardiac troponin blood test EKGs echograms MRIs they came up with 2:04:25

about 36 cases putative cases of M credit where something was a little off

2:04:30

in tens of thousands of athletes not a single serious case no hospitalizations 2:04:36

no deaths so they weren't dropping dead before the vaccine at a high or a higher 2:04:42

rate right okay so then Tali from Israel studies this and said listen before the 2:04:47

vaccine there's no higher rate of ioc carditis compared to the background rate singer and colleagues tries to

2:04:53

characterize these cases no hospitalizations in death so we have three papers what happens patients sick

2:04:59

with covid in the hospital we routinely get cardiac troponin Laboratories as we 2:05:05

did with Euros sepsis Pacos sepsis what have you and sure enough about 20 to 30% 2:05:10

are ambiently positive in the critically sick ICU patients none of these are adjudicated for myocarditis none have

2:05:16

MRIs and so these sloppy papers come out and say covid causes high rates of 2:05:22

myocarditis the CDC takes off on this and says oh there's a much higher risk 2:05:27

of myocarditis with covid than the vaccine so therefore we should take the vaccine and cause more myocarditis and

2:05:33

the FDA chairman says this he's a cardiologist Rob kff this is the type of uh uh absolutely ridiculous thinking

2:05:40

that goes on right now I can tell you as a cardiologist I've looked at the literature I contributed to the literature covid-19 illness does not

2:05:47

cause significant m carditis there are troponin elevations in the hospital and sick patients which are not myocarditis

2.05.53

they're not adjudicated myocarditis covid-19 vaccine is the major cause of mise we're seeing today

2:06:02

so beautiful study out of the Nordic countries in jamama cardiology um celik and he what he what

2:06:09

he showed was is they looked at all the cases they had 23 million cases to look 2:06:15

at in terms of people who' had been vaccinated or not and then they looked at all their risk of mic carditis you

2:06:22

know what they used as the control group The unvaccinated because they had the lowest amount of any myocarditis as you

2:06:30

increased doses of vaccine you increase your risk of getting myocarditis that 2:06:36

that is that should settle this whole thing that I'm going to get the vaccine so I don't get myocarditis the paper

2:06:43

that the the one we have problems with is it's from the CDC data set that look 2:06:48

at those who had been diagnosed with vaccine myocarditis at 90 days and they 2:06:53

did all the studies EKG echo cardiogram all those by 90 days you were usually down to normal

2:07:01

that's what I can do in my office very easily but the one that Dr mcco was 2:07:06

bringing up is that 50% had abnormal cardiac MRIs I cannot assess your 2:07:13

child's risk for sports participation if they've had symptoms of myocarditis 2:07:19

following the vaccine without a cardiac MRI I just can't do it because all the other tests I would normally use to

2:07:25

reassure myself including stress test are shown to be normal so that's 2:07:30

this potential silent killer that's out there but no one really wants to look into it because because it's about it's

2:07:36

thousands of dollars to get a cardiac MRI one important paper has to be cited here there are cardiac arrests with

2:07:42

normal cardiac MRIs now this is very important a paper publish by nakahara 2:07:49

and colleagues Ura Texas at Houston jaget nula is one of prominent authors very prominent cardiologist United

2:07:56

States hundreds of patients who took the vaccine versus hundreds of patients who didn't take the vaccine they all get

2:08:03

cardiac pet scanning not MRI pet scanning this is very important a pet scan looks at the metabolic activity of

2:08:10

the heart and they capture people early after the vaccine to 6 months after the 2:08:15

vaccine the findings were 100 % of people took the vaccine the cardiac pet 2:08:21

scans turned abnormal that instead of the heart using free fatty acids as this 2:08:27

energetic fuel it shifted to a preference in using glucose and this was a distinctly 2:08:33

abnormal pattern as a cardiologist I use cardiac pet to see if there's a a lack of blood flow to an area what called

2:08:39

esema and that typically shows the heart muscle changes and actually prefers glucose that's called uh a a a a pet

2:08:47

abnormality an es schic abnormality what I'm telling you is people who take the 2:08:52

vaccine to varying degrees the hearts are not normal and we can't completely 2:08:58

characterize it now importantly in this nakahara paper those who had a sore arm 2:09:04

had much more profound abnormalities in the heart and there's a paper from uh 2:09:10

Germany by Schwab and colleagues pathologically that found arm inflammation and heart inflammation so

2:09:16

what I'm telling you is it's important to understand were there any initial side effects in the arm two papers

2:09:22

relate it but as a cardiologist I'm very worried the next Cardiac Arrest that 2:09:27

occurs right now in a previously healthy person particularly an athlete who's been heavily screened for all the congen

2:09:35

abnormalities it's my conclusion based on the data that it's due to the 2:09:40

vaccine if they've taken a vaccine unless proven otherwise wow thank you for that Congressman Davidson yeah thank

2:09:47

you all I appreciate you uh in your work and you know I just pick up on you know some of the comments Dr MC I think you

2:09:53

mentioned about the FDA and the problems with it and I always think about U 2:09:59

really one one of the to me great Americans great president was uh Dwight Eisenhower is fair well addressed he

2:10:05

cautioned against two things the one that is widely remembered is the military industrial complex but the

2:10:10

other one is the scientific technical Elite and perhaps no one illustrates

2:10:16

that more than fouchy the ni the CDC and the FDA and when you talk about the 2:10:21

global nature of this uh I guess phenomenon uh people were surprised by 2:10:28

how quickly the mindset shifted and how globally it shifted um and I go back to the kind of

2:10:36

root of that the the the the institutions that were built particularly in the post World War II

2:10:43

era were designed to be those kinds of Institutions and uh you know everyone's 2:10:50

familiar with FDA um but let me say what those letters represent the Food and 2:10:57

Drug Administration uh you mentioned the desire to have a universal delivery 2:11:03

mechanism with a vaccine well the one thing for sure is Everybody Eats something um and in particular meat uh

2:11:12

so there's this fascination with some of these folks about trying to create synthetic meat all kinds of other things

2:11:17

but the things that people give to livestock have caused some concern and I 2:11:22

guess I wonder as a delivery vehicle for good or bad uh you

2.11.29

know what is the Food and Drug Administration doing uh that we should be paying attention to I think this is

2:11:37

where a ban on all mRNA technology needs to happen now not only for humans but for Animals this is a synthetic mRNA

2:11:45

with the pseudo pseudo urination that Dr mcole mentioned it's hard to break 2:11:51

down did the MRNA show up in breast milk in a jamama pediatric study 48 hours 2:11:57

later you bet it did does the MRNA show up in every organ in the body you bet it 2:12:04

does what about undercooked meat and a and a very difficult to break down 2:12:10

synthetic mRNA in the meat you may be eating they've been doing this in pigs for several years now under kind of a

2:12:15

pseudo under the radar um program the FDA has I guess

2:12:21

sighted so for certain bacteria and pigs um it's already

2:12:26

happening and you know I don't know China owns 80 90% of the bork industry in the world so you might want to ask

2:12:32

them about that not me but yeah showing up in the food again there are know knowns there are known unknowns blah

2:12:38

blah blah you know the quote you can't find what you don't look for plain and simple and so the easiest

2:12:45

way and the huous of much of Science and the lack of humility in Sciences saying 2:12:51

ex Cathedral pronouncements we declare this is safe and effective without doing the studies so going to your question

2:12:58

about future vaccination and you know getting through the food supply and whatnot sure safe and effective if you

2:13:04

never look but if you start looking and that's why they cut a bunch of us off that are trying to look and research you

2:13:10

have to look for it is it in the meat is it in the products are your Regulatory Agencies actually looking for what they

2:13:16

should be looking for or they just telling you through their their huous and lack of humility that because we say

2:13:23

so and you know certain of these individuals make mangala look like an 2:13:29

amateur I think we need to look before we push anything out on the market if we 2:13:35

value life if we value the Next Generation if we value our children if we value Freedom then we need to do the

2:13:42

proper science to make sure we're doing the proper things for the citizens of this great nation and the world you know

2:13:47

we're not good creators uh the best scientists the the

2:13:53

whatever we're trying to make right the best pharmaceutical whatever artificial hip artificial

2:13:59

heart can't make an artificial kidney you know it's a big box that has to go on right we're not good at this and as

2:14:06

we try we make an enormous amount of mistakes and this is with great computer 2:14:11

modeling with theoretical we're going to have the perfect uh DNA sequence we're going to have the perfect Mr

2:14:18

mRNA sequence what I would remind us is that all these things that we're talking about the answer is

2:14:24

usually possibly unknown because we haven't evaluated it but let's remember 2:14:31

that in science there are an enormous amount of unintended consequences so we haven't even

2:14:37

perceived because we're tinkering in this way changing the cells of animals 2:14:42

that we eat what are the unattended consequences of our manipulation 2:14:48

of what we previously didn't manipulate this conversation reminds me of the movie A lot of people just

2:14:54

watched Oppenheimer about the The Angst that oper Han about he knew what a dangerous

2:15:01

technology nuclear weaponry would be what you're hearing from us today is we 2:15:07

acknowledge this brand new era of genetic technology how potentially 2:15:12

dangerous it is and we've uncovered a a a critical flaw in our government 2:15:19

oversight over this the FDA has insufficient oversight the FDA reports

2:15:26

the HHS okay there is from the house side you have the High House Science and 2:15:32

Technology committee and its subcommittee you got House Government operations house agriculture House

2:15:37

Appropriations house committee and energy commerce loose connections through their subcommittees to the

2:15:44

FDA HHS is you've got a sec Secretary of HHS cabinet we have almost no control 2:15:53

over the FDA the same is true for the USDA now if you go on the USDA website 2:15:59

you'll see genetic project after genetic project and as Dr Cole pointed out DNA 2:16:06

and RNA vaccines have been in P now since 2017 self-replicating RNA and DNA 2:16:12

vaccines now the animals don't live long enough potentially for us to see these complications blood clots myocarditis uh

2:16:20

Etc we can only hope and pray that during the cooking and curing process that the genetic material is

2:16:27

destroyed but beef and fish uh and in

2:16:33

vegetables now there's a whole array of cooking techniques and we can't possibly 2:16:39

understand if this is going to actually get in humans now a small a small Chinese company published in December of

2:16:45

2022 Zang is the first author that they were able to make a small piece of Ming RNA actually that's

2:16:52

related to the SARS K2 virus and get it in a milk bubble and administer milk to 2:16:58

animals uh and get the the M RNA across the mamalian GI tract and there's been 2:17:05

several examples where they're able to get genetic material through watermelon juice and other types of things uh into

2:17:11

the human system so we need an immediate

2:17:18

an immediate Food Safety Supply task force here to assess the USDA is letting 2:17:25

us down again these companies are running the table on this uh you know 2:17:31

they they had there are naturopathic veterinarians that that tell me that with modern farming techniques and the

2:17:37

clothing this we don't need any vaccines now they've been using traditional for Boi and they have uh their standard pack

2:17:44

what's called a clustal pack and a reproductive pack so they they've got these series of of vaccines they give

2:17:50

the cattle but but you know I can tell you right now we need experts on Capitol 2:17:55

Hill to raise the issue about safety in our our food supply many in the room here Dr stillwagon I'd like to uh

2:18:02

recognize has put an important scholarship on this personally I'm concerned I I think it's almost like

2:18:08

Oppenheimer we are recognizing the dangers of genetic technology around us 2:18:13

right now the food supply could be next thank you all for that and you know you kind of anticipate my next question one

2:18:20

of the problems with a lot of these things is the structure of Congress and it I think people are mindblown to know

2:18:27

that there's not a dedicated healthc care Committee in Congress I mean there's this select committee on covid

2:18:33

but all of the jurisdiction is broken up amongst multiple committees and you could say well they'll eventually cover

2:18:40

it and isn't that great I don't think so and one of the biggest problems is all of the Committees of jurisdiction have a

2.18.46

subcommittee focused on oversight and when you look at oversight uh on Healthcare in America the Energy and

2:18:53

Commerce Committee which deals with all kinds of things uh is competing for time on this and frankly uh the hospital

2:19:00

Association pharmaceutical Association uh you know health insurance lobbyists 2:19:06

all spend a fortune making sure that we don't create a dedicated healthc care committee it's 25% of the GDP I it's a

2:19:14

huge part of the economy it is one of the most broken parts of the economy for every household that I know and while we

2:19:20

do as parties have differences of views on what the solutions are I think we share some frustration about the

2:19:27

problems and I just ask you guys with the careers in healthc care uh do you 2:19:32

think we could actually do more good for solving some of these problems if we had a structural change in Congress where

2:19:39

there was a dedicated healthc care committee I I think that's a two-edged sword because it depends on who hits on

2:19:46

that committee uh I like to joke that no one of us no one of us is as dumb as all 2:19:51

of us and so um I I think it's a great idea because you do have to have structure and organization to keep

2:19:57

things uh flowing forward but it again it depends on how you man and woman that 2:20:04

committee and uh appropriately um have a vision for what health care should be health and

2:20:10

wellness and you we live in an era of wealth and Hess instead of health and wellness and I think we need to flip the

2:20:15

tables on that just one quick comment another agency that's causing great concern now is the Federal Trade

2:20:22

Commission early on in the pandemic the Federal Trade Commission launched an all 2:20:27

out attack on companies that offered natural products various natural 2:20:33

products to have them try to develop their products to uh help people through the pandemic uh particularly the the

2:20:40

viricidal nasal sprays and washes or virostatic washes it turns out been uh 2:20:45

you know 17 Prospect of randomized clinical trials showing as simple nasal sprays and gargles reduce the risk of

2:20:52

covid-19 reduce the intensity and severity of covid-19 reduce the risk of hospitalization and death you know

2:20:59

Congresswoman Nancy mace when she found out about this in 2021 she went nuts there is a news piece saying listen why

2:21:04

is our government not telling us about simple nasal sprays and gargles well in our audience today is Nate Jones who's

2:21:12

the CEO of one of these companies he's been tied up in court with the FTC and the FDA not allowing his company to do

2:21:18

research and develop products to help people through this now there is a move 2:21:24

not just in the United States but worldwide to restrict natural products 2:21:30

from commercial use this is a curring all over another manifestation of this 2:21:36

biopharmaceutical complex you know they want all the money spent on high dollar Pharmaceuticals not natural solutions

2:21:42

that people can do themselves uh uh you know we have the FTC now as another 2:21:48

agency I'd say the USDA the FDA and the FTC remember HHS is

2:21:55

administering the programs right CMS medicare what have you uh they're 2:22:01

basically this is a very authoritarian structure there's no committees to say listen does this make sense is this

2:22:07

reasonable and now we have these agencies that have been captured by this these biopharmaceutical companies

2:22:13

they're running the table thank you all right thank you all I really appreciate my y back oh thank you um Dr Cole you

2:22:21

have some slides that we'd like to look at and if you could present those and 2:22:26

and I would enjoy of course and I'm sure everyone would conversation on these and I am I'm GNA fly through them real fast

2:22:32

because I know time is limited so this is a picture is worth a thousand words so uh whoever's got the computer over

2:22:40

there and I say next have your hot finger ready okay here we go uh next uh 2:22:46

no conflicts next uh obviously it's dangerous to be right and matters about which the 2:22:52

established authorities are wrong next um all scientists agree when you censor the ones who don't next uh okay I'm G to

2:23:00

get right to the Pathology so Skip Skip Skip Skip there's the Cleveland Clinic 2:23:06

study more injections equals more infections plain and simple next next 2:23:12

next next next next maybe I should come over there

2.23.18

okay the cells don't lie that's what I'm going to show you here are the cells okay that's a needle going into the arm that's a blood vessel next to that

2:23:24

needle next this is from the late great Dr burkart that's a ruptured vessel now those lipid nanop particles can go

2:23:29

everywhere next that Spike protein in the muscles of the arm being expressed all those little brown dots wait can you

2:23:37

describe a little bit more yeah I'm not a doctor so we make a special uh 2:23:42

antibody in the lab that will bind to the spike protein and then we put a little tail on it that makes it Glow and

2:23:48

then anywhere it binds to it glows and in this case we use a little D that makes it show Brown so we know every one

2:23:54

of those cells is expressing Spike protein so it was injected the gene turned on made Spike protein attached to

2:24:00

the surface of those cells so that part was doing what it was supposed to do 2:24:05

however we will see as we go on here um next next the lipid nanop particles we 2:24:12

talked about there harms next um this is the lipid nanop particle accumulating this is a Japanese study

2:24:19

accumulating in the blood plasma whole blood bone marrow and see where that curve is going up that's the lipid

2:24:25

nanoparticles accumulating the ovaries notice they cut that study off after two days it was still accumulating it was

2:24:31

still going up you'd never stop a study when it's still going up same in the bone marrow there

2:24:38

next these are all the chemicals that are in the lipid nanop particles not for human or Veterinary use went into

2:24:43

billions of people next this is the study that Dr MCA mentioned this is the Rolen study out of Stanford showing that

2:24:50

the synthetic mRNA was still persistent 60 days later and still making Spike protein next wait wait go back can you

2:24:56

go back so how are we seeing it still there can you describe yeah so on the 2:25:02

left um um you can see the the pinkish color

2:25:07

in each of those slides magnified 400 times and you can see day s 16 3742 and 2:25:13

60 now this wasn't every patient in the study that was still making a a significant percentage of patients were still making um was still had the

2:25:21

persistent synthetic RNA 60 days later and on the right you can see the little brown dots um that's the that's the

2:25:28

spike being made 60 days later in these patients after these synthetic injections okay next this is a study

2:25:35

from Dr brogna that Dr McCulla mentioned where we know that the vaccinal spike is circulating six months later and 50% of

2:25:41

patients next next next next okay so

2:25:47

that Spike protein lining a small blood vessel in the body every Brown dot this is after injection and like I said it

2:25:53

goes through circulation first that you know that initiates these clotting 2:25:59

processes next so how how is that directly after a vaccine that's within a 2:26:04

few days after well this patient was a autopsy serious patient from Dr burkart and this patient died a couple months

2:26:11

later and still was Express expressing Spike protein in these tissues months after their last injection one of the

2:26:17

patients up to 123 days after death was still making Spike protein and multiple organs in the

2:26:24

body next and here you can see a normal blood vessel on the left here you can see the immune system just collapsing

2:26:31

and attacking that vessel on the right wait no I can't see anything but dots so help me okay all the red or red blood

2:26:37

cells all all the blue are your white blood cells your lymphocytes your neutrophils your eosinophils etc etc so

2:26:45

okay so that's that's the tube okay thank you going through it this is what 2:26:50

was the tube and it's all filled with inflammation and destroyed all the purple dots are inflammatory cells all

2:26:56

the purple dots are inflammation there the nucleus of cells and and what is what kind of symptoms is this this

2:27:03

person having I mean that looks like a mess yeah that one's what do you feel 2:27:09

yeah death unfortunately in that page that patient died most of the people in the burkards they died of myocarditis

2:27:15

thrombotic complications these medical disasters few days weeks or few months after the after being vaccinated so when

2:27:22

it causes a vasculitis that means that all your blood vessels are inflamed so 2:27:29

it's not just in the arm when people feel this horrible sensation like they

say they feel like they're going to die after being vaccinated I've never felt so horrible in all my life that is a

2:27:41

sense of they have a whole body inflammation and um because 2:27:47

it goes wherever the blood vessels are and it affects the blood V the the 2:27:52

interior cells called endothelial cells of the blood vessels it goes everywhere

2:27:58

and this is the problem of injecting a gene with no off switch and in some people you know they may have gotten

2:28:03

that almost Placebo like batch and other people got a lot of the Gene and DNA contamination and

2:28:08

whatnot there is no regulatory mechanism we don't know who's make who's a spike Factory and who's not who's making a lot

2:28:15

of these atypical form proteins who's not this is why it didn't happen to everybody thankfully but there's still

2:28:21

so many millions of people around the world that have been harmed and these are just some of the mechanisms now now there's three dozen autopsy studies

2:28:29

people have taken the shot the doctors think the shot caused the death autopsies were ordered the autopsies

2:28:35

were performed the results were collated uh we did a performed a systematic review uh and reviewed 600 papers where

2:28:44

we thought there were autopsies got down to these three dozen papers took all the individual data dissected it all out and

2:28:52

had independent doctors review them the answer is 74% of the time we think what 2:28:59

we're seeing here actually is the cause of death now it's possible someone took the shot and they died of something else

2:29:05

and in the in 26% of the cases it was something else you know Nursing Home 2:29:10

Patient took the shot but they aspirated and died we looked at everything and said they died of the aspiration even

2:29:15

though there was but there are other ones it was so clear it was a blood clot it was heart damage an aortic dissection

2:29:22

a a a thrombotic or ES schic stroke so as we sit here today the next person who 2:29:27

dies where there's no antecedent illness it's just they just died if the vaccine 2:29:33

is in their background we would conclude that on a more probable than not basis 2:29:39

they've died of the vaccine talk about how reluctant medical s has been to do autopsy very and that was F early on U

2:29:48

you know through kind of dictates to the agency oh don't do autopsies and everybody was afraid early on everybody

2:29:53

was afraid oh gosh you know I'm gonna everybody treated Co like it was Ebola it wasn't and so you know Pathologists

2:30:01

you know had the fear putting into them as well and so it was any Unexpected death in a young

2:30:08

Health previously healthy patient coroners medical examiners always do an autopsy and an unexplained sudden death

2:30:14

and we didn't do it and we didn't well there obliged to now during covid I was at a major medical center and I you know

2:30:20

was every week in the Pathology Lab we actually suspended autopsies because of 2:30:25

the fear of Contracting covid from the autopsy it was the Italians at first published the very valuable studies

2:30:31

where they finally had the courage to do an autopsy and they found people who died of covid they actually died of

2:30:37

blood clots in the lungs these micro blood clots that was the very very important finding now these deaths are

2:30:43

coming in after the vaccine now prior to the pandemic pull a typical obituary or 2:30:50

pull a t typical press release on a death of a prominent person it'll say 2:30:55

they died of a long battle with cancer or they died in complications after heart surgery that's before the pandemic

2:31:02

early on in the vaccine program there were deaths that occurred there was a CNN correspondent legal correspondent

2:31:07

who died it said she took the vaccines and she died of an allergic reaction to the vaccine that was in

2:31:14

2021 then there was a change and now all the reports are someone died it's a 2:31:21

mystery uh there's no explanation of the death the cause of death is not known 2:31:26

let me tell you before the pandemic the cause of death was always known in the United States of adults 40%

2:31:34

die of known heart disease a known heart attack a known long history of heart 2:31:39

failure 40% die of known cancer it's known they have cancer long history 2:31:45

cancer and 20% other known causes drug overdose suicide car accident trauma 2:31:53

it's known people just don't die for unknown

2:31:58

reasons since the mass vaccination campaign has come on we are inundated 2:32:03

with report after report of just deaths with no cause our data 2:32:09

suggest that in fact the vaccine is the cause of death and I can show that real quick uh it just pictures worth thousand

2:32:17

words so I'm going to I'm going to fly this is this is that atypical amalo 2:32:22

protein in a heart blood vessel that little blob in the middle yeah the body doesn't break that down cardiac death

2:32:29

yes next large vessel destruction next this is the aorta the biggest vessel in 2:32:35

your body coming off your heart on the right that's the gross picture of the aorta that big brown line in the middle

2:32:43

that's where the the wall of it has been blown AP apart and that's because all these all these fibers up at the purple

2:32:50

on the left are being pushed apart by inflammation if we go to the next picture please every Brown dot in the

2:32:57

wall of this aorta that's cells that have Spike protein in them and then 2:33:03

that's a foreign protein being made by these cells and then the immune cells your killer tea cells come in and then

2:33:09

your maccrage they start destroying the tissue and then that aorta blows apart and you die instantly so so if this

2:33:15

person had not been vaccinated we would see none of these Spike protein cells 2:33:21

correct you so obvious yeah being so ignored it's blatantly obvious to the 2:33:27

most casual Observer so and you don't have to be a pathologist to look at this and go gosh one of these things is not

2:33:33

like the other one of these things doesn't belong you know this is a Sesame Street this brown dots that are death in

2:33:38

a basic situation we know this is a horrible protein we know this virus is not that 2:33:45

serious and we're asking our body our Public Health strategy right now is asking our 2:33:51

body to make a toxic chemical a cardiac toxin that goes

2:33:58

all throughout our body that's our that's our strategy right now and we're going guys it it's not

2:34:06

working but again we were told oh it's working there's no going to stay right 2:34:11

there right even though they knew through studies was going to BU distribute all place they knew the lipid

2:34:17

Nano particle goes everywhere they knew so that's that's part of the problem 2:34:22

here yeah is we had Federal healthy officials lie boldfaced to the American 2:34:28

public correct and they still are they are it's still on their web pages you know recommending boosters and they're

2:34:33

preventing us at every opportunity to try to get this information out they're not letting um uh Publications be

2:34:38

printed uh we're being silenced at every step we're being ridiculed we have ad homin and attacks well you you have

2:34:46

pharmaceutical companies sponsoring all the uh Legacy Media Big T TV shows you 2:34:52

know there's two nations in the world that allow Pharma to advertise on TV New Zealand and the US the rest of the world

2:34:58

doesn't allow it the BBC announced on December 10th 2020 The Trusted news 2:35:04

initiative and it said on December 10th this is before the vaccines are released to the public they said we are going to

2:35:12

have a very carefully coordinated news content mediation program across all 2:35:17

major media in order to Stamp Out dangerous vaccine

2:35:24

misinformation how did they know the vaccines weren't released yet how did they know there was going to be

2:35:29

dangerous vaccine misinformation Senator mentioned event 201 they knew it back 2:35:35

then where they knew then they have to Dam so there was a presumption that the 2:35:40

vaccines were going to be safe and effective and that the bad guy there was vaccine hesitant

2:35:46

so they were going to stamp out any vaccine hes well you look at the slide you become very hesitant to take one of

2:35:53

these shots I don't want this stuff in my aorta and have my aorta rip and have a catastrophe so there is a coordinated

2:36:01

program to suppress any information on safety recently uh a paper that's um uh 2:36:08

been reviewed it's on my subst uh analyzed YouTube and they analyzed YouTube's use 2:36:16

of hashtags and YouTube had a coordinat any hashtag that would say vaccine side 2:36:21

effect they were suppressing that and it also was done on Twitter this analysis I believe was in

2:36:28

Twitter at the time so people worldwide were blindsided by this safety

2:36:35

information it didn't have a chance to get out to them they didn't have a chance to learn this fairly and it

2:36:40

wasn't and to this day is not being presented to them there are TV commercials that's put forward by fiser

2:36:47

madna HHS and the CDC all saying take a vaccine without giving the the standard 2:36:55

disclaimers that could cause a fatal side effect every other drug has to dis have a disclaimer that should be a red

2:37:02

flag but that all gets back to the liability protection for the vaccines

2:37:07

versus treatments that's right they they suppressed all the information on treatment so you talked about gargling

2:37:13

there was a study on the CCS why site I'm doing a telephone toon Hall I mentioned to you know my constituents is

2:37:21

omicron's coming up and people are less concerned about said no be concerned about the things you can do vitamin D vitamin C gargle y I was ridiculed and V 2:37:29

vilified for two weeks saying that I told my constituents that lisine would 2:37:35

replace the vaccine oh my go so I'm gonna have to hit the road just a couple 2:37:41

closing comments here we talked about how the federal health agencies have just lied to us a complete lack of trans

2:37:48

transparency they've been dishonest they didn't talk about the biodistribution they completely you know Dr molon you're

2:37:54

talking about what a Marvel the body is our natural immunity they deny natural 2:38:00

immunity again is all because they they denied the

2:38:05

effectiveness of Therapeutics all because they wanted the vaccine because 2:38:12

they have no liability protection they can crank out billions of doses they can suppress the the safety signals and they

2:38:20

can make billions and billions of dollars and I think what is most telling is again we just have these wonderful

2:38:27

people okay great doctors that have the courage compassion to treat patients the 2:38:32

events I've had I don't know if you invited anybody but I would always invite the heads of the FDA the CDC or

2:38:39

their representatives you know Peter marks you know come on you you're saying these folks are spreading disinformation

2:38:45

come and discuss it with them challenge what they're saying same with the the heads or representatives of big Pharma

2:38:52

they won't do it I think the more famous One right now is Peter hotz what's what is it up to \$2.6

2:38:58

million we give you \$2.6 million to your favorite charity all you have to do is come and as a doctor debate a

2:39:05

lawyer about vaccines and he won't do it wow to me that is so telling so again I 2:39:12

just want to some thank you for holding this this is has been just an absolutely 2:39:18

excellent uh hearing you have done a marvelous job laying this this

2:39:24

information out in layman's terms I encourage everybody who's watched this spread the 2:39:29

information more more people have to see this and I am just begging other doctors 2:39:36

open your eyes open your hearts your patients depend on you to be honest you 2:39:43

have to have this information so again you know Congressman green thank you so much for doing this and thank you doctors thank you Senator thank you 2:39:49

Senator we appreciate you being able to attend yeah is there any more scary slides to look at I have plenty you got

2:39:56

the concept let's just say this shows up in the heart shows up in the brain shows up in the adrenal shows up in the liver

2:40:01

shows up in the spleen shows up in any large and small vessel in the body this 2:40:07

is ubiquitous in the body I won't be labor the point you have the construct I'm not going to turn you to into a

2:40:13

pathologist in five minutes but this is the kind of science that has to be out there and published to Dr or to Senator

2:40:20

Johnson's Point people need to know absolutely and I mean smithm act needs 2:40:26

to be overturned 2012 when we were allowed to use propaganda on the American people it used to be overseas now under Obama 2012 Smith month act 2:40:34

allowing to propagandize the American people we need to overturn that that's another thing Congress can do the people

2:40:39

need trust in their doctor in the government trust in society and I will

2:40:45

conclude just by saying that's very easy truth plus transparency and thank you for the opportunity yes thank you so I

2:40:52

heard one good action item here today and that is to ban the MRNA technology 2:40:59

is that correct gentlemen well I think for research purposes it's okay but widespread use in a population it is not

2:41:06

safe not safe absolutely not thank you so much for being here and again I hope 2:41:12

everyone shares this video I I appreciate the information and again a 2:41:17

picture that you showed us say is worth a thousand words bad stuff glad I didn't take the vaccine but I'm also concerned

2:41:25

for those that did so thank you everyone thank you thank you thank

2:41:31

[Applause]

2:41:44

you

English (auto-generated)