

According to the science, no
single C-19 vaccine mandate can
be justified, on the contrary!

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*There is no greater impotence in all the world like knowing you are right and
that the wave of the world is wrong, yet the wave crashes upon you. – Norman Mailer*

Innate immunity: Nature's most precious gift to a child

- Innate immunity is present at birth and protects children from a multitude of different diseases, including viral diseases such as Coronavirus (incl. all SC-2 variants), Influenza virus and some other respiratory viruses
- Innate immunity is generally acknowledged to be our 'first line' of immune defense
- Innate immunity has an antibody (Ab) component ('innate' Abs) and a cellular component ('natural killer' cells) that can prevent or abrogate infection, respectively. In contrast to vaccine-induced immunity, innate immunity enables *sterilizing* immunity and is, therefore, a key pillar of *herd immunity*.
- As innate immunity is 'innate', it can operate immediately upon attack by a pathogen and does not need to 'mature' before full-fledged protection can be provided
- Because innate immunity broadly protects from a broad and diversified spectrum of respiratory viral diseases (e.g., CoVs, Flu, RSV), SARS CoV-2 (SC-2) is typically **NOT a childhood disease**.
- With aging, natural titers of innate Abs wane and may, therefore, result in enhanced susceptibility of older age groups to SC-2 ('The immune system of children: The key to understanding SARS-CoV-2 susceptibility' [https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642\(20\)30135-8/fulltext](https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(20)30135-8/fulltext))

So why does innate immunity not protect against all (viral) diseases?

- Some receptors on host target cells readily outcompete innate Abs for binding to the virus (e.g., viruses causing chronic diseases)
- Some viruses are highly infectious and easily break through the host's innate immune defense (e.g., measles). Such viruses (or bacteria) typically cause childhood 'diseases'

That's why we need vaccines to fight chronic diseases (unfortunately, we don't have these vaccines yet) **and childhood diseases!**

But why then do some of our children get C-19 disease?

- Children (and youngsters) who typically got asymptomatic infection at the beginning of the pandemic are now increasingly seeing their innate immune Abs suppressed by short-lived, nonfunctional spike (S)-specific Abs which they acquired as a result from previous asymptomatic exposure
- Repetitive exposure to highly infectious variants (e.g., Delta variant) leads to mild to moderate suppression of CoV recognition by their innate Abs (*I will explain this more in detail*)
- The dominance of highly infectious Delta variant cannot be explained by any phenomenon other than mass vaccination across multiple age groups
- Luckily enough, healthy children are endowed with high titers of functional innate Abs and hence, capable of competing with the low affinity, S-specific Abs they acquired as a result of previous asymptomatic infection
- It is true that because of high infection rates, children may now develop mild or sometimes even moderate disease. However, provided they were in good health and have no underlying disease, it's highly unlikely for them to develop severe disease
- Individuals who recover from C-19 disease develop life-long immunity towards SC-2 and contribute to herd immunity
- Children at risk must, of course, receive early multidrug treatment (P. McCullough et al.)

What happens with innate immunity when children grow up?

- There is now unambiguous evidence that innate immunity can be ‘trained’ upon re-exposure to the same or similar pathogens. Immune cells producing protective innate Abs can acquire memory such as to ‘remember’ the virus and bind to virus particles with higher affinity. Thanks to their higher affinity, ‘trained’ innate Abs will be more effective at neutralizing SC-2 while still able to recognize a multitude of different CoVs (including their variants)
- Thanks to innate immune training, unvaccinated healthy subjects (including children) will improve their protection from SC-2 (and other CoVs). Their trained innate Abs will better resist competition from low affinity, S-specific Abs acquired upon previous infection

Why is C-19 vaccination of children an unforgivable sin?

- Whereas S-specific Abs acquired upon asymptomatic infection exert a rather *weak* suppression of innate Abs, vaccinal Abs exert *strong* suppression of these Abs
- Due to high infection rates (Delta variant!), these vaccinal Abs are now continuously boosted and relevant innate Abs are, therefore, constantly suppressed
- Because of sustained suppression by vaccinal Abs, kids may no longer be naturally protected against a number of childhood infections that do not usually result in disease. As innate Abs are also protective of 'self', their prolonged suppression is highly likely to raise the incidence of autoimmune diseases
- Vaccinating children against SC-2 deprives them from their capacity to sterilize this virus as well as a number of other viruses that do not usually cause harm to children
- In the meantime, unvaccinated children may get mild or moderate disease. The resulting training of their innate immune system or acquisition of natural S-specific Abs (that outperform vaccinal Abs!) will provide them with sustained protective innate or acquired immunity, respectively

Vaccination does not improve your protection against severe disease or hospitalization

- Innate immunity in healthy unvaccinated individuals (i.e., w/o underlying disease) prevents or abrogates SC-2 infection and, therefore, protects against disease (and hence, hospitalization!):
As the vast majority of unvaccinated healthy individuals are protected against mild or moderate disease, they are much less likely to contract severe disease!
- However, some healthy unvaccinated individuals (including some youngsters and children) may develop moderate disease as a result of sustained anti-S Ab titers. As they recover, they develop broadly functional, naturally acquired Abs that protect them against a diversified spectrum of variants
- Given the small subset of hospitalized unvaccinated individuals and recent resumption of precautionary measures, fewer and fewer 'vulnerable' unvaccinated people will land in the hospital whereas the opposite will apply to vaccinees, due to the steadily increasing resistance of the virus to neutralizing Abs and continuing mass vaccination (boosters!)

Vaccination does not improve your protection against severe disease or hospitalization (cont'nd)

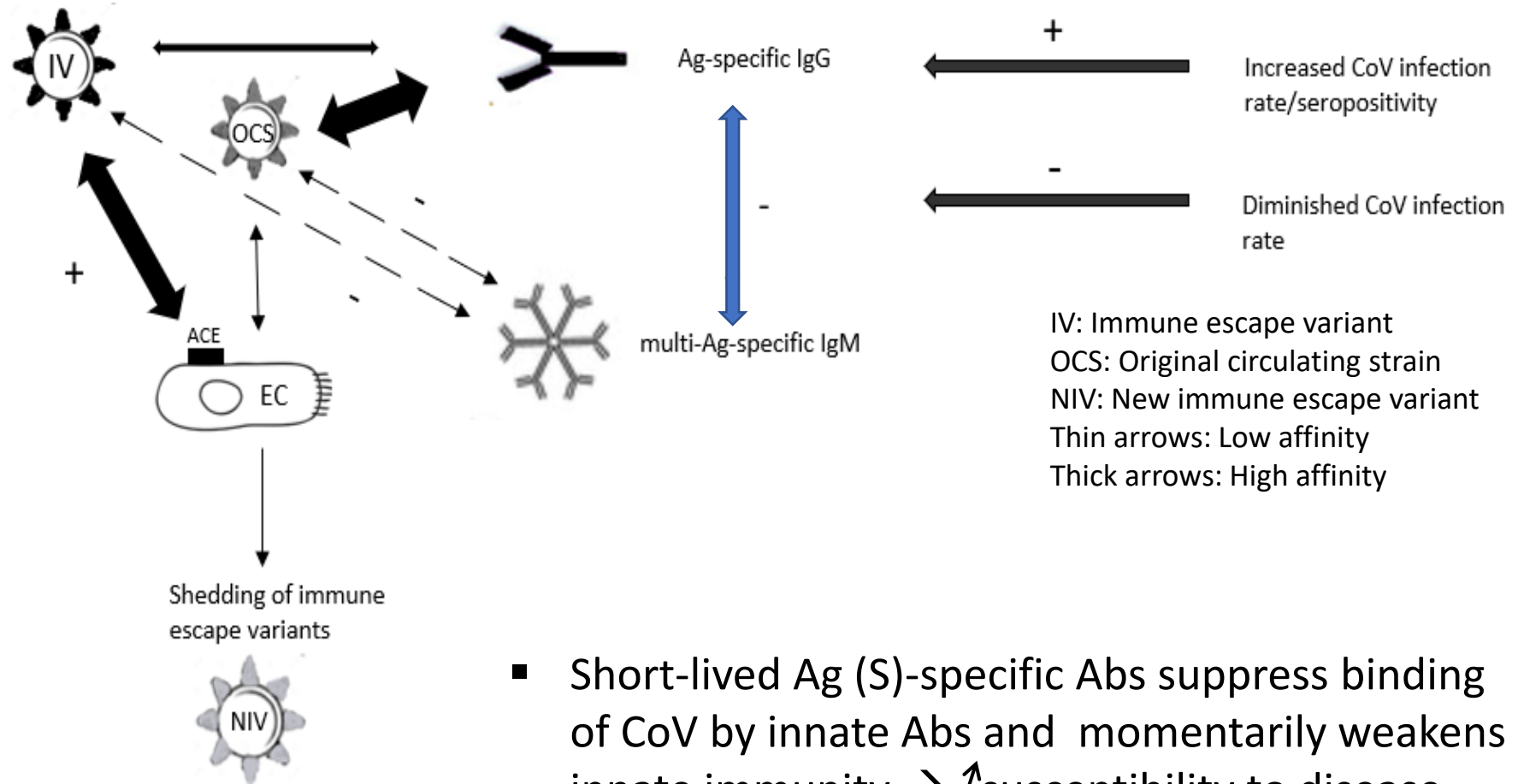
- The single best approach to protecting yourself and your children is to take excellent care of your health. Mild disease equals life-long protection (provided you don't get any C-19 vaccine and you stay in good health).
If nevertheless the virus breaks through your innate immunity, don't worry as you are beyond unlikely to contract severe disease. Once recovered, you should stay exposed to the virus (variants!) such as to ensure a regular update of your naturally acquired Abs.
- Unvaccinated people with underlying diseases should adhere to infection prevention measures (avoid contact with super spreaders) and should have access to early treatment. They should not get jabbed!
- There is no reason for fear! Stress and fear will only weaken your innate immunity. That's what modern Neuroscience is telling us
- Nor is there any reason for discrimination, besides discrimination against current insane measures that are anything but based on sound scientific grounds

Credibility? Time for DYOR

- All my predictions were/ are based on science and nothing but science
- The vast majority of these predictions materialized or on the verge of becoming reality
- No single expert or Public Health (PH) official dares to openly debate me or to engage in a scientific discussion about the single most ignored aspect of this pandemic, i.e., the critical role of innate immunity and how it gets corrupted by the current vaccines
- None of the scientists who are currently revealing the truth are having any conflict of interest

All of the above should be serious food for thought to those who still believe that what politicians and PH authorities tell them is in the best interest of people's individual health and that of society at large

Short-lived S-specific antibodies compete with polyreactive IgM for binding to SC-2



- Short-lived Ag (S)-specific Abs suppress binding of CoV by innate Abs and momentarily weakens innate immunity → ↑susceptibility to disease