

How COVID-19 Is Changing the Future of Vaccines

Analysis by [Dr. Joseph Mercola](#) ✓ Fact Checked

STORY AT-A-GLANCE

- › By pushing for mandatory COVID-19 vaccination, or imposing social restrictions on those who refuse, the COVID-19 vaccine is paving the way for nonconsensual medical experimentation on the general public
- › Since the beginning of the pandemic, world leaders have warned that social distancing, mask wearing, travel restrictions and other measures will become part of our “new normal.” And, while the vaccine is sold as a way to end the pandemic and return us to normal, it cannot, since it has only been evaluated for its ability to lessen COVID-19 symptoms, not reduce the risk of infection, hospitalization or death
- › While some COVID-19 vaccines have been granted emergency use authorization, they still haven’t even completed Stage 3 clinical trials. Data for some end points won’t even be collected until 24 months after injection. As such, they are still entirely experimental
- › COVID-19 vaccines’ adverse side effects are still relatively unknown. It’s also unknown whether they might affect fertility – a real concern since the vaccine triggers your body to produce antibodies against the SARS-CoV-2 spike protein, and spike proteins in turn contain syncytin-homologous proteins that are essential for the formation of placenta. If a woman’s immune system starts reacting against syncytin-1, then there is a possibility she could become infertile
- › Pfizer’s mRNA vaccine contains polyethylene glycol (PEG), and studies have shown 70% of people develop antibodies against this substance. This suggests PEG may trigger fatal allergic reactions in many who receive the vaccine

In his December 24, 2020, video report,^{1,2} "The Future of Vaccines," investigative journalist James Corbett reviews how the novel COVID-19 vaccine is paving the way for nonconsensual medical experimentation on the general public.

As noted by Corbett, if the international medical establishment get their way, nothing will get back to "normal" until world health officials have definitively determined there is an effective COVID vaccine in place.

Even then, however, things may not go back to the normal we're accustomed to or expect. Since the beginning of the pandemic, world leaders have warned that **social distancing, mask wearing, travel restrictions** and other measures will become part of our "new normal."³

Be that as it may, the refrain we keep hearing from the likes of Bill Gates, Dr. Anthony Fauci and a long list of other world leaders is that any sense of normalcy will remain elusive until or unless the entire **global population gets vaccinated against SARS-CoV-2**.

Brave New World of Vaccines

"The public is being prepared for an unprecedented global vaccination campaign," Corbett says. However, one major problem with this is that the current COVID-19 vaccines are still in the experimental stage. While they've been granted emergency use authorization, they still haven't completed Stage 3 clinical trials. Data for some end points won't even be collected until 24 months after injection.

Another problem is that the COVID vaccines' adverse side effects are still relatively unknown due to the "fanatical" **warp speed** at which they were developed.

Even if there is only one serious event per 1,000 people, cumulatively that would equate to 100,000 people being harmed by the vaccine for every 100 million vaccinated — a steep price for an infection that has an overall noninstitutionalized infection fatality rate of just 0.26%.⁴ Among those under the age of 40, the infection fatality rate is a mere 0.01%, which is lower than that for seasonal influenza.⁵

A third issue that Corbett homes in on in his report is the fact that the COVID-19 vaccines are "unlike any vaccines that have ever been used on the human population before," and "as radically different as these vaccines appear, they represent only the very beginning of a complete transformation of vaccine technology that is currently taking place in research labs across the planet."⁶

“ The threat of forcing or compelling people to become unwilling guinea pigs in an ongoing medical experiment is immoral on its face. But even the prospect of enforcing such mandates would entail the erection of a surveillance and tracking system that further threatens basic rights and liberties. After all, in order to determine who has been vaccinated ... there will need to be a system for identifying and tracking each vaccine recipient. ~ James Corbett ”

Are COVID-19 Vaccines Really as Effective as Advertised?

On an important side note, while Pfizer's and Moderna's vaccines have reported very high success rates, their "success" is only measured by their ability to lessen moderate to severe COVID-19 symptoms such as cough and headache. Presumably, this would lower the risk of hospitalization and death for vaccinated individuals.

However, as explained in "[How COVID-19 Vaccine Trials Are Rigged](#)," the vaccines were not evaluated for their ability to actually prevent infection and transmission of the virus. So, since the vaccine cannot reduce infection, hospitalizations or deaths, it cannot create vaccine-acquired herd immunity and end the pandemic, even though this has been the vaccine's primary selling point. Furthermore, as noted by Corbett:⁷

"The studies are touted as involving tens of thousands of people, but in Pfizer's trial, only 170 of them were reported as being 'diagnosed with COVID-19' during

the trial. Of those, 162 were in the placebo group and eight were in the vaccine group.

From this, it is inferred that the vaccine prevented 154/162 people from developing the disease, or '95%.' But as even the British Medical Journal points out,⁸ 'a relative risk reduction is being reported, not absolute risk reduction, which appears to be less than 1%.'

COVID-19 Ushers in a Whole New Breed of Vaccines

Getting back to the main point of the Corbett report, the COVID-19 vaccines under development are unlike any other vaccine ever released. They're mRNA vaccines, and do not work like conventional vaccines. In summary, RNA are molecules that encode certain proteins. The RNA used in COVID-19 vaccines encode for the SARS-CoV-2 spike protein.

The idea is that by injecting this RNA, your own cells will start to produce and secrete the SARS-CoV-2 spike protein. Your immune system will then respond to the presence of that viral protein by producing antibodies. It's important to realize that this technology is entirely unproven, and there's no telling how this RNA programming might affect your health in years to come. As explained by Corbett:⁹

"The term 'vaccination' ... came to refer to the general process of introducing immunogens or attenuated infectious agents into the body in order to stimulate the immune system to fight infections. But this is not how mRNA vaccines function.

In contrast to vaccination, which involves introducing an immunogen into the body, mRNA vaccines seek to introduce messenger RNA into the body in order to 'trick' that body's cells into producing immunogens, which then stimulate an immune response ...

Despite the straw man argument that opposition to the vaccine comes solely from ignorant members of the public who are worried about being 'injected with

mircochips,' there are genuine concerns about the long-term safety of these vaccines coming from within the scientific community, and even from whistleblowers from within the ranks of the Big Pharma manufacturers themselves."

December 1, 2020, two such whistleblowers — Dr. Wolfgang Wodarg, former chair of the Parliamentary Assembly of the Council of Europe Health Committee, and Dr. Michael Yeadon, former vice-president and chief scientific officer at Pfizer Global R&D — filed a petition¹⁰ calling on the European Medicine Agency to halt Phase 3 clinical trials of the Pfizer mRNA vaccine until they've been restructured to address critical safety concerns.

Key Safety Concerns

The four key safety concerns specified in the petition¹¹ to the European Medicine Agency are:

1. The potential for formation of non-neutralizing antibodies that can trigger an exaggerated immune reaction (referred to as paradoxical immune enhancement or antibody-dependent immune amplification) when the individual is exposed to the real "wild" virus post-vaccination.

Antibody-dependent amplification has been repeatedly demonstrated in coronavirus vaccine trials on animals.¹² While the animals initially tolerated the vaccine well and had robust immune responses, they later became severely ill or died when infected with the wild virus. Put plainly, the vaccine increased their susceptibility to the virus and made them more likely to die from the infection.

2. Pfizer's mRNA vaccine contains polyethylene glycol (PEG), and studies have shown 70% of people develop antibodies against this substance. This suggests PEG may trigger fatal allergic reactions in many who receive the vaccine.

Indeed, within days of the vaccine's release, reports started coming in of people having life-threatening anaphylactic reactions,¹³ leading to warnings that people

with known allergies should not take the Pfizer vaccine.¹⁴ Since then, anaphylactic reactions have been reported by recipients of the Moderna mRNA vaccine as well.¹⁵

3. The mRNA vaccine triggers your body to produce antibodies against the SARS-CoV-2 spike protein, and spike proteins in turn contain syncytin-homologous proteins that are essential for the formation of placenta. If a woman's immune system starts reacting against syncytin-1, then there is the possibility she could become infertile.

This is an issue that none of the vaccine studies is looking at specifically. Mass vaccinating women of childbearing age against COVID-19 could potentially have the devastating consequence of causing mass infertility if the vaccine triggers an immune reaction against syncytin-1. The petition states that this possibility must be "absolutely ruled out" before mass vaccination takes place.

4. The studies are far too brief in duration to allow a realistic estimation of side effects. Depending on what those effects end up being, millions of people may be exposed to unacceptable risk in return for a very minor benefit.

In an interview — a snippet of which is featured in the Corbett Report — Del Bigtree asked Wodarg how we can ensure we don't end up making the greatest scientific error in history with this vaccine campaign. Wodarg answered:¹⁶

"Protect yourself and protect your neighbors and friends so that they don't get this vaccine ... And you have to show up. You have to tell the politicians that you will blame them for what they do with this. I think what's happening ... is a great betrayal. We are betrayed. And people who betray normally are punished, and we won't forget this if they go on doing this with us."

Health Freedom Undermined in the Name of 'Emergency'

As noted by Corbett, even more fundamental than any particular safety concern is the fact that a vaccination campaign of this magnitude, using an entirely novel technology, sets "the most dangerous public health precedent in the history of humanity." By

drumming up unnecessary panic, many are now willing to forgo all manner of freedom in the name of responding to a global health emergency.

"One of these core freedoms is the ability to refuse an experimental medical procedure, a freedom that was acknowledged in the Nuremberg Code of 1947¹⁷ and enshrined in the International Covenant on Civil and Political Rights, which states that 'no one shall be subjected without his free consent to medical or scientific experimentation,'" Corbett says.¹⁸

"Despite the fact that the clinical trials surrounding these experimental vaccines are ongoing and that the FDA itself admits¹⁹ that there is 'currently insufficient data to make conclusions about the safety of the vaccine in subpopulations such as children less than 16 years of age, pregnant and lactating individuals, and immunocompromised individuals' and 'risk of vaccine-enhanced disease over time, potentially associated with waning immunity, remains unknown,' governments around the world are contemplating making these vaccinations mandatory, or compelling people to take them against their will by restricting their access to public life until they subject themselves to this medical experimentation.

The threat of forcing or compelling people to become unwilling guinea pigs in an ongoing medical experiment is immoral on its face. But even the prospect of enforcing such mandates would entail the erection of a surveillance and tracking system that further threatens basic rights and liberties.

After all, in order to determine who has been vaccinated – and thus who is allowed to board an airplane or access a stadium or enter a store with a vaccine policy – there will need to be a system for identifying and tracking each vaccine recipient."

Indeed, I've written several articles detailing how the tracking of vaccination status will usher in a **surveillance apparatus greater than anything we've ever experienced before**. This initial vaccine surveillance system will ultimately be tied into other digital systems, such as all other medical records, biometric ID and an all-digital banking system.

The implementation of a **Google-based social credit system**, similar to that implemented in China in 2018, is highly likely as well. Under a social credit system, points are awarded or subtracted for certain types of behavior. When your score falls below a certain point, punishment is meted out in the form of travel restrictions or the inability to obtain a loan, for example.

"There are already apps like IBM's Digital Health Pass and CLEAR's Health Pass that envision a world where our biometric ID will be linked via our smartphones to our health data in order to grant or deny access from public spaces and public events," Corbett says.

"Once the COVID vaccines are widely distributed, it would simply be a question of linking one's vaccination record to the health pass app to prevent the unvaccinated from accessing any given space ...

The COVID vaccine presents governments, intelligence agencies and corporations that have a direct interest in suppressing dissent, monitoring dissidents and controlling their populations with the perfect opportunity to make such systems a permanent fixture of daily life.

After the immediate 'threat' of the declared public health crisis subsides, the public is already being warned that these apps will be transitioned seamlessly into general monitoring of the population."

The precedent being set up right now is one that, in the future, will grant health authorities the "right" to force any number of experimental drugs, vaccines and technologies upon us in the name of public health. If the right to refuse an experimental medical procedure is not upheld now, the entire population of the earth will be available for experimentation without recourse.

Novel Medical Technologies Under Development

While COVID-19 vaccines do not contain tracking-enabled microchips, we are indeed looking at a future where quantum dot tags and hydrogel biosensors will likely be used

in vaccine delivery, and they will allow far more than just identifying or tracking your vaccination status.

They'll be able to collect and transmit all sorts of information about what's going on in your body. The ramifications of handing all of this biological data over to some artificial intelligence-driven machine run by a technocratic elite hell-bent on owning all the world's resources is anyone's guess.

Already, there's a study underway to evaluate how an implantable biosensor, which continuously monitors your body chemistry, can be used as an early warning system for disease outbreaks, biological attacks and pandemics by sending a signal when it detects the onset of an infection. Other medical technologies under development include:

- Edible vaccines
- Remote-controlled vaccine delivery systems – For example, a hydrogel mesh sphere containing a vaccine can be injected under the skin, and when you swallow a particular substance that dissolves the hydrogel, the vaccine is released. Proof of concept for this was demonstrated in 2014
- Autonomous DNA nanorobots that can carry molecular payloads into your cells
- Shape-changing microdevices called "theragrippers" that, when placed into your gastrointestinal tract, extend drug delivery

As noted by Corbett:

"Nanobots. Shape-changing bioelectronic devices. Remote-controlled vaccines. This is not the stuff of science fiction but of science fact, and the precedent that is being set during the COVID era to rush experimental and unproven medical technologies into use on the back of a declared crisis is the same precedent that could be used to foist these injectable technologies on the public in the future ...

These injectables are part of an elaborate system of biological, economic, and political control that is being bankrolled into existence by powerful special

interests."

Indisputable Facts

While the **technocratic elite** behind the **Great Reset** insist there's nothing nefarious about any of these experimental technologies, mRNA vaccines included, the fact that they will lead us into a future that a vast majority of people would never choose, given the chance, seems inevitable. Corbett notes:²⁰

"Despite the protestations of those like Bill Gates who have a financial interest in these experimental vaccines, and the Big Pharma corporations that are selling these vaccines, and the governments that are being bribed²¹ by the international public health cartel to purchase these vaccines and pressure their public to accept them, and the corporate media who relies on these Big Pharma corporations for their advertising dollars, some facts about these novel coronavirus vaccines are indisputable:

- *They are the most rushed vaccines ever developed.*
- *The manufacturers have been given total immunity from liability if their experimental vaccines cause injury.²²*
- *The clinical trials testing the safety of these injections are not finished, meaning that every member of the public who takes one is now a human guinea pig in an ongoing medical experiment with the population of the planet.*
- *The Pfizer and Moderna mRNA vaccines are themselves part of an experimental class of injection that has never before been given to the public;*
- *These vaccines have not been tested for their ability to prevent infection or spread of SARS-CoV-2 and are not intended to do so.*
- *And there is absolutely no long-term data about these vaccines to determine what their effects may be on fertility, the potential for pathogenic priming,²³ or any other serious adverse reaction.*

That this represents the most reckless and brazen experiment in the history of the world is undeniable on its face. Never before have billions of people been pressured to submit to a completely experimental, invasive medical procedure on the basis of a disease with a greater than 99% survival rate ...

Surely those who wish to be the test subjects in this ongoing experiment should be free to make themselves into guinea pigs for the Big Pharma manufacturers.

But every mandate or compulsion to force the vaccine on an unwilling recipient sets a dangerous precedent, a precedent that will one day lead to a tracked and surveilled population unable to resist the next generation of injectable bioelectronics.

This is not a game, this is not a test. Billions of people are being asked to participate in a gigantic experiment, not just an experiment in medical technology, but an experiment in compliance and blind trust.

The pressure to say yes and to go along with the crowd in this experiment is enormous. But if we lose the freedom to say "no" to this, then we may lose control over our bodily autonomy – and, ultimately, our humanity – forever."