

REGENERATE

UNLOCKING YOUR BODY'S RADICAL
RESILIENCE THROUGH THE NEW BIOLOGY

The International Best Selling Book by Sayer Ji



(<https://amzn.to/2QUEFKb>)



(<https://www.barnesandnoble.com/w/regenerate-sayer-ji/1134850216?ean=9781401956387#/>)



(<https://www.chapters.indigo.ca/en-ca/books/regenerate/9781401956387-article.html>)



(<https://www.indiebound.org/book/9781401956387>)

Miami School Asks Staff Not to Take COVID Jab; Global Media Assault Follows; Pfizer Trial May Support School's Concerns

Views 86151

Posted on: Thursday, April 29th 2021 at 10:00 am

Written By: Sayer Ji, Founder (/gmi-blogs/sayer%20ji)

This article is copyrighted by GreenMedInfo LLC, 2021

Visit our Re-post guidelines (/greenmedinfo.com-re-post-guidelines)



Centner Academy, a private school in Miami, has made international headlines for directing its employees who have not yet received the experimental COVID-19 vaccine, to wait until the end of the school year, as a precautionary step to protect the health of their school community, given both concerning new anecdotal reports that the vaccinated can adversely affect the health of the un-vaccinated, and that that clinical safety and efficacy data for the mRNA vaccines will not be completed until sometime in 2023.

Thus far, mainstream media reporting has focused and railed against the following statement made by Leila Centner, co-founder and CEO of Centner Academy, to her employees (in an internal email later leaked to the press) as being the most controversial and contestable:

"Tens of thousands of women all over the world have recently been reporting adverse reproductive issues simply from being in close proximity with those who have received any one of the COVID-19 injections, e.g., irregular menses, bleeding, miscarriages, post-menopausal hemorrhaging, and amenorrhea (complete loss of menstruation).

No one knows exactly what may be causing these irregularities, but it appears that those who have received the injections may be transmitting something from their bodies to those with whom they come in contact. Until more is known, we must err on the side of caution when it comes to the welfare of our students and the school team."

You can read Leila's entire letter and comment which she posted to Instagram **here** (<https://www.instagram.com/p/CONTDvSLTjI/>).



Leila Centner's private communication, now a matter of global public scrutiny, even reaching the White House press secretary for comment on April 27th,¹ came under fire by a number of conventional allopathic physicians, including Dr. Aileen Marty, a physician and infectious disease specialist with Florida International University's Wertheim College of Medicine, who commented as follows:

"But there's not one citation, there's not one physician or scientist whose name is spelled out in there. There's no references. There's nothing. There is no scientific evidence provided. Rumor is the only thing that's there, and if you look at the reality, there's zero, zero science behind those allegations." "If they believe it, and they then share this big lie, it has a horrific impact on our entire community," she said.

While these comments by Dr. Marty, and now hundreds of other mainstream media reports have attempted to dismiss Leila Centner's statements as a 'source of misinformation, without basis in science,' we believe they have significant merit, and are at the least worth exploring further.

Fact #1: Vaccines Make Some Sick; Sick People Are More Likely to Compromise the Health of Others

Whereas the mainstream media and government health authorities have been dogmatically pushing the unequivocal narrative that the **Covid-19 (/disease/coronavirus-disease)** (and all) vaccines are "safe and effective" *a priori*, it is undeniable that the Covid-19 **vaccines** (/anti-therapeutic-action/vaccination-all) are presently only approved for distribution to the public under an Emergency Use Authorization, in lieu of proper clinical safety and efficacy trial data being available, and which are not estimated to be completed until April 2023 for the Pfizer vaccine.²

This makes Covid-19 vaccines, by definition, experimental, as Leila Centner has repeatedly offered as an explanation for her precautionary stance as to their unintended, adverse effects they may have to the health and well-being of her school staff, faculty, children and larger community.

Human medical experimentation, as defined by the **Nuremberg code of medical ethics (1947)** (<https://www.bmj.com/content/313/7070/1448.1>), must not only be voluntary, but the participant needs to be fully informed of both the risks and benefits, in order to be able to give their full legal consent. Also, if the medical experimenter has reason to believe an intervention may cause harm, disability, or death he or she must suspend the experiment immediately.

In the case of the experimental mRNA Covid-19 vaccine rollouts, government data reveals the Covid-19 vaccines are having profound, adverse health effects on a subpopulation of recipients, as documented in the **Vaccine Adverse Events Reporting System (VAERS)** (<https://vaers.hhs.gov/>), which as of April 28th, 2021, lists a total of 85,926

reports of the vaccinated experiencing adverse effects, ranging from death to hundreds of other symptoms and life-threatening conditions.

Moreover, VAERS is known to be highly ineffective in capturing the true extent of the actual number of vaccine adverse events, due to its highly passive, post-marketing surveillance methodology. Peer-reviewed research indicates that the rate of report capture is as low as 1% for thrombocytopenic purpura (low blood platelet related bleeding disorder) following the MMR vaccine and hypotonic hyposensitive (bluish skin; reduced consciousness) episodes following the DTP vaccine.³

The implication is that the actual scale of adverse effects within the vaccinated, which include immune dysregulation and suppression, may be several orders of magnitude higher than the already alarming scale of events reported through the conservative numbers offered by VAERS -- which are almost universally ignored by the very same media attempting to discredit, defame, and make an example out of the Centner Academy.

Given that those who are experiencing immune dysfunction as a result of being vaccinated are more likely to express virus reactivation, such **as a cluster of cases recently reported** (<https://www.medpagetoday.com/infectiousdisease/covid19vaccine/92106>) for vaccine-induced Herpes Zoster, or may also experience a disrupted microbiome leading to the overgrowth of opportunistic bacteria, fungi, viruses, i.e. so-called "pathogens," the health risks to those around them may also increase significantly. It should be noted that this phenomenon of vaccine-induced adverse health effects is not solely associated with the Covid-19 or mRNA vaccines.

Greenmedinfo.com has a database of over **1300 studies indicating over 150 potential adverse health effects (/anti-therapeutic-action/vaccination-all)** from vaccines presently in the CDC vaccine schedule. Therefore any vaccine could, in theory, weaken or disrupt the immune system of a vaccine recipient, increasing the likelihood that they may transmit infection or disease-provoking aspects of either their microbiome or cell contents (mediated via extracellular vesicles) to those around them, which will be explained in greater detail in section #3.

Fact #2: The Pfizer mRNA Vaccine Clinical Trial Study Design Warns Against Proximity (Shared Air Inhalation or Skin Contact) Between Vaccine Participants and the Unvaccinated As A Possible Vectors of Harm

Titled, "**A Phase 1/2/3 Study to Evaluate the Safety, Tolerability, Immunogenicity, and Efficacy of RNA Vaccine Candidates Against COVID-19 in Healthy Individuals**" (https://media.tghn.org/medialibrary/2020/11/C4591001_Clinical_Protocol_Nov2020_Pfizer_BioNTech.pdf), the Pfizer Covid-19 mRNA vaccine study protocol document explicitly identifies in section 8.3.5. the need for monitoring what it calls "Exposure During Pregnancy or Breastfeeding, and Occupational Exposure." A concern they take seriously enough that they require any incident to be reported within 24 hours to the Pfizer Safety system.

According to the document an EDP [environmental exposure during pregnancy] occurs if, for example: **"a male vaccine recipient exposes a female partner prior to or around the time of conception."**

Exposure to the study intervention is defined as **"inhalation or skin contact," indicating that physical proximity between the vaccinated and unvaccinated is recognized by the Pfizer study protocol to be a cause for concern for transmission of potential side effects of the vaccine.**

The document also gives the following example of an EDP scenario: **"A male family member or healthcare provider who has been exposed to the study intervention by inhalation or skin contact then exposes his female partner prior to or around the time of conception."** Clearly, in this case Pfizer is acknowledging that something as simple as a healthcare provider or family member who has been exposed to an mRNA vaccine recipient through "inhalation or skin contact" (i.e. physical proximity) could generate an adverse event and/or affect the study outcomes.

Another example provided in section 8.3.5.2 titled, "Exposure During Breastfeeding," gives the following example of what constitutes such an exposure:

"An example of environmental exposure during breastfeeding is a female family member or healthcare provider who reports that she is breastfeeding after having been exposed to the study intervention by inhalation or skin contact."

Finally, in section 8.3.5.3., an "Occupational Exposure" occurs,

"when a person receives unplanned direct contact with the study intervention, which may or may not lead to the occurrence of an AE. Such persons may include healthcare providers, family members, and other roles that are involved in the trial participant's care."

Clearly, the Pfizer mRNA vaccine protocol design reveals that concerns for how the vaccinated may adversely affect the health, and even reproductive outcomes, of the unvaccinated simply by being within physical proximity, are being taken extremely seriously by the manufacturer of the vaccine itself. In light of this, Leila Centner's expressed concerns quoted at the beginning of this article are, in fact, backed by the most authoritative document we have on the experimental vaccine, and the nature of the human experiments being conducted on their behalf.

So far, there has been no acknowledgment or reporting on this fact by the global mainstream media, the vaccine manufacturers, nor government health authorities. It will be up to the reader to share this article, and get the word out.

Fact #3: There is a Plausible Epigenetic Molecular Mechanism in Biology Whereby the Vaccinated May Affect the Health Status of the Unvaccinated

The third major substantiating factor behind identifying the potential harm the vaccinated may have on the unvaccinated concerns the discovery of so-called horizontal information transfer within biological systems mediated by extracellular vesicles (EVs), which include a virus-like phenomenon known as microvesicle shedding and/or exosome-mediated transfer of nucleic acids. This falls within the category of epigenetics, which the apologists and shills for the mRNA vaccines' purported safety and efficacy conveniently ignore in order to make their claim that was debunked in 1970 with the discovery of the enzyme reverse transcriptase.

Reverse transcriptase is able to transcribe RNA to DNA, essentially destroying the fundamental dogma of molecular biology, namely, the unidirectional flow of information from the cell nucleus to mRNA to protein can not be reversed. This dogma is still being used half-a-century later to make the false claim that the only health risk a genetically modified vaccine has worth discussing is the possibility that it may affect the structure or function of nuclear, protein-coding genes.

We've even seen, through the discovery of exosomes, that the **Weismann barrier has been penetrated** ([/article/soma-germline-transmission-rna-mice-xenografted-human-tumour-cells-possible-tr](#)), and somatic cells can communicate heritable information to the germline cells in what amounts to real-time, essentially devalidating the risk models presently used by vaccine manufacturers and regulators which do not account for the power epigenetic processes have to amplify the unintended adverse effects of genetically modified technologies and interventions.

While mRNA vaccines are designed using genetically modified processes not dependent on live cell substrates, thereby precluding conventional problems with **shedding associated with first generation vaccines** ([/blog/vaccinated-spreading-measles-who-merck-cdc-documents-confirms](#)) like the MMR, it is possible that they do, in fact, contribute to microvesicle shedding,⁴ which represents an even greater, more persistent threat than live-cell vaccine shedding when it comes to the persistent biological impact the vaccinated can have on the un-vaccinated.

Microvesicles, which range in size between 0.1-1.0 µm are a type of extracellular vesicle (EVs), that are secreted by many different cell types within the body, both in times of health and disease, and are known to reflect the antigenic content of the cell of origin.⁵ They have stunningly similar characteristics to viruses.⁶ For instance, like SARS-COV-2, microvesicles have a lipid bilayer formed from the budding off from host cell membranes, and they can incorporate and reproduce aspects of a vaccinated or infected cells' immunogenicity, such as including functional mRNA, viral proteins, and other nucleic acids capable of profoundly altering the structure and function of the cells to which they are transmitted.

For instance, it is theoretically feasible that a vaccine recipient's cells expressing COVID-19 spike protein as a result of transfection with mRNA from a Covid-19 vaccine may secrete microvesicles containing components "originally alien to the cell, such as proteins and nucleic acids that are transiently or constitutively expressed via plasmid or viral vector."⁷ These microvesicles, like viruses, and other extracellular vesicles known as exosomes, can be transmitted to other individuals (inter-individual transmission) through both normal or diseased physiological processes.⁸

Extracellular exosomes have even been found to transfer nucleic acids cross kingdoms (plant > animal, fungal > bacterial), affecting the phenotypal expression of the target species. Therefore, it is plausible that microvesicles can transmit mRNA from a recently vaccinated individual to those within close proximity, and therefore could, in fact, "shed" mRNA and related biomolecules induced from the mRNA vaccination process to non-vaccinated individuals, inducing symptoms similar to those experienced by the vaccinated.

Indeed, microvessicles may have a profound affect on the immune status of those who both produce them, and are exposed to them. A recent study concluded that research "strongly suggests that MVs may function as strong regulator of both innate and adaptive immune systems."⁹ Microvessicles and exosomes have also been researched and developed as vaccine candidates, further indicating that they are already being looked at by the scientific community as potential vectors of immunogenicity and carriers of viral-like and disease-modulating if not also disease-promoting bio-information.

Given the plausible mechanism through which a COVID-19 vaccine recipient's body produces vaccine antigen (e.g. spike protein), and can package and transmit these antigens through viral-like microvessicles (and perhaps also exosomes) to others, Leila Centner's statement "it appears that those who have received the injections may be transmitting something from their bodies to those with whom they come in contact," has a plausible mechanism of action. Especially considering the aforementioned fact that Pfizer's study protocol itself acknowledges that an unknown factor or mechanism may cause the unvaccinated to be adversely affected by the vaccinated.

Either way, Leila Centner's decision was made in the spirit of the precautionary principle, and her call for further investigation and information on the vaccines before proceeding with what amounts to a reckless human medical experimentation should not be identified as "fringe," "irrational," nor "crazy." To the contrary, the medical establishment and would-be government regulators should themselves be raising the red flag over the tens of thousands of adverse effects that have already been reported to the government VAERS database.

We live in a time and age where protecting our children from coerced and increasingly mandatory medical interventions that carry the risk of death and disability, is perhaps the most important advocacy of our lives. It takes great courage, conviction, and love to stand up and make a decision that is in the best interest of your community, and not your bottom line or public relations image. The Centner Academy's prioritization of the precautionary principle, and Leila Center's call for more research into the exploding number of adverse events that the mainstream media either ignores or actively covers up, is extremely honorable and worth everyone who follows our work and advocacy getting behind in support.

Please support the Centner Academy through the following actions:

1. Share this article with friends and family, in order to support our health freedom advocate, Leila Center, who is undergoing unprecedented media attack.
2. Do you have an experience to report of an adverse effect from the Covid-19 vaccines, or being exposed to someone who had it? Email info@greenmedinfo.com (<mailto:info@greenmedinfo.com>? **subject=RE%3A%20Vaccine%20Event%20Report**) to share your story.
3. Support Instagram Leila Centner (send her some love). **Comment here at Leila's instagram account.** (<https://www.instagram.com/p/CONTDvSLTjI/>)
4. Learn more about the incredibly positive philosophy of the **Centner Academy** (<https://centneracademy.com/>), focusing on **happiness as the centerpiece of a child's success** (<https://www.youtube.com/watch?v=ceFio8fzZjg>), and cultivating leaders with HEART.

Also, please join us at www.StandforHealthFreedom.com (<https://www.standforhealthfreedom.com>), as we build a grassroots army of millions who believe in informed consent, parental rights, human and medical rights, for everyone.

References

- 1 <https://miami.cbslocal.com/2021/04/27/white-house-position-centner-academy-covid-vaccine/> (<https://miami.cbslocal.com/2021/04/27/white-house-position-centner-academy-covid-vaccine/>)
- 2 <https://fullfact.org/health/covid-19-vaccines/> (<https://fullfact.org/health/covid-19-vaccines/>)
- 3 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1615747/pdf/amjph00450-0108.pdf> (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1615747/pdf/amjph00450-0108.pdf>)
- 4 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5680703/> (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5680703/>)
- 5 <https://www.nature.com/articles/2404132> (<https://www.nature.com/articles/2404132>)
- 6 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3233125/> (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3233125/>)
- 7 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3764926/> (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3764926/>)

8 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5816030/>
(<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5816030/>)

9 <https://www.frontiersin.org/articles/10.3389/fimmu.2018.02723/full>
(<https://www.frontiersin.org/articles/10.3389/fimmu.2018.02723/full>)



(/gmi-blogs/Sayer Ji)

Sayer Ji is founder of **Greenmedinfo.com** (<http://www.greenmedinfo.health/>), a reviewer at the **International Journal of Human Nutrition and Functional Medicine** (<https://www.ichnfm.org/publications/index.html>), Co-founder and CEO of **Systome Biomed** (<https://www.systomebiomed.com>), Vice Chairman of the Board of the **National Health Federation** (<https://www.thenhf.com/>), Steering Committee Member of the **Global Non-GMO Foundation** (<https://www.gmofreeglobal.org/en/steering-committee>).

Disclaimer: This article is not intended to provide medical advice, diagnosis or treatment. Views expressed here do not necessarily reflect those of GreenMedInfo or its staff.

Recommended Related Articles



(/blog/13-evidence-based-medicinal-properties-coconut-oil)