

**Everything you wanted to know about COVID that your doctor will never tell you.**

**The take away information from tonights presentation focuses on:**

- 1. COVID-19 is NOT the seasonal flu.**
- 2. COVID-19 was Patented in 2015 therefore it is man made.**
- 3. COVID-19 is not a vaccine but gene therapy designed to thin the population.**
- 4. COVID-19 was conveniently implemented by the Deep State as a narrative to mask their ultimate agenda of instituting worldwide socialism, launching the 5G Network, and driving the world's attention away from the coming financial monetary reset.**
- 5. COVID-19 is really a vitamin B-1 deficiency.**
- 6. Stanford Study reveals Facemasks are Ineffective to Block Transmission of COVID-19 and Actually Can Cause Health Deterioration and Premature Death**
- 7. COVID-19 can easily be treated with natural food based remedies.**

**#1. After questioning hundreds of medical experts, a German attorney, Dr. Reiner Fuellmich, categorically states that COVID was used by the Deep State as a cover for ushering in socialism, population control, and reset of the monetary system. If anyone mentioned these concepts to me a year ago, I would have thought they were crazy. I recommend you view the YouTube interview with Patrick Bet-David: <https://www.youtube.com/watch?v=HhviYfRnK-U>**

**False Narrative: Flu season is due to a natural cycle of viruses.**

**Truth: False.** Every election year starting with 2004 through to 2020 had a virus that had a patent.

### Election year diseases

SARS	—	2004
AVIAN	—	2008
SWINE	—	2010
MERS	—	2012
EBOLA	—	2014
ZIKA	—	2016
EBOLA	—	2018
CORONA	—	2020
Coincidences?		

George W. Bush vs Al Gore

Barack Obama vs John McCain

Congressional elections

Barack Obama vs Mitt Romney

Congressional elections

Donald Trump vs Hillary Clinton

Congressional elections

Donald Trump vs ????????

Are there Patents for these viruses?

a. **SARS** - Patent: US2006257852.

b. **AVIAN** - Patent: US20080119545A1

c. **SWINE FLU** - Patent: US8124101B2 - Genetically engineered swine influenza virus

d. **MERS** - European patent application: 13801769.4

e. **EBOLA** - Canadian Patent: 2741523 - Human EBOLA virus species

f. **ZIKA** - Austria WO2017109227A1

## g. **Coronavirus** - US Patent No. 10,130,701

**The Grim Reaper Uses a Stealth Vitamin B1 Deficiency (Beriberi), Hidden Behind the Covid-19 Coronavirus Pandemic  
Stanford Study Results: Facemasks are Ineffective to Block Transmission of COVID-19 and Actually Can Cause Health Deterioration and Premature Death**

**Read the full article at [LewRockwell.com](https://www.lewrockwell.com)**

[https://www.lewrockwell.com/2021/04/no\\_author/the-grim-reaper-uses-a-stealth-vitamin-b1-deficiency-beriberi-hidden-behind-the-covid-19-coronavirus-pandemic-as-breathless-loved-ones-silently-slip-into-their-graves/](https://www.lewrockwell.com/2021/04/no_author/the-grim-reaper-uses-a-stealth-vitamin-b1-deficiency-beriberi-hidden-behind-the-covid-19-coronavirus-pandemic-as-breathless-loved-ones-silently-slip-into-their-graves/)

**By Joe Hoft**

**Published April 19, 2021 at 10:00am**

An obscure letter published in the British Medical Journal penned by a retired Australian physician stated:

“Reported prolonged symptoms among COVID ‘long-haulers’ are the same as the known symptoms of thiamine (vitamin B1) deficiency disease, called beriberi,” and that “the pandemic we are witnessing is actually the result of a combination of a somewhat more severe virus than we have hitherto experienced, and a generally poor state of nutrition in the community as a whole.”

**The experimental concoction being passed off as a “vaccine” in reality is altering your DNA. There are No safety studies either short term or long term documenting its safety. Institutions can NOT force you to take the experimental chemical because it violates the Nuremberg Codes.**

**The relatively new 5 G Networks create the same symptoms as COVID-19. The frequencies of the 5G system prevent oxygen from attaching to the RBCs.**

**A meeting in Ireland in 2019 witnessed the head of the Bank of International Settlements making the statement that it will take \$1.44 cents to equal one SDR. This means that the US dollar will be devalued by 44% in the next few years.**

**A recent Stanford study released by the NCBI (National Center for Biotechnology Information), which is under the National Institutes of Health, showed that masks do absolutely nothing to help prevent the spread of COVID-19 and their use is even harmful.**

**This study was published in November of 2020. Since then, they've promoted wearing 2 or more masks.**

**NOQ (News, Opinions, and Quotes) Report uncovered the study:**

Did you hear about the peer-reviewed study done by Stanford University that demonstrates beyond a reasonable doubt that face masks have absolutely zero chance of preventing the spread of Covid-19? No? It was posted on the the National Center for Biotechnological Information government website. The NCBI is a branch of the National Institute for Health, so one would think such a study would be widely reported by mainstream media and embraced by the “science-loving” folks in Big Tech.

Instead, a DuckDuckGo search reveals it was picked up by ZERO mainstream media outlets and Big Tech tyrants will suspend people who post it, as political strategist Steve Cortes learned the hard way when he posted a Tweet that went against the face mask narrative. The Tweet itself featured a quote and a link that prompted Twitter to suspend his account, potentially indefinitely.

The NCBI study begins with the following abstract:

Many countries across the globe utilized medical and non-medical face masks as non-pharmaceutical intervention for reducing the transmission

and infectivity of coronavirus disease-2019 (COVID-19). Although, scientific evidence supporting face masks' efficacy is lacking, adverse physiological, psychological and health effects are established. It has been hypothesized that face masks have compromised safety and efficacy profile and should be avoided from use. The current article comprehensively summarizes scientific evidences with respect to wearing face masks in the COVID-19 era, providing proper information for public health and decisions making.

The study concludes (emphasis added):The existing scientific evidences challenge the safety and efficacy of wearing a face mask as preventive intervention for COVID-19. The data suggest that both medical and non-medical face masks are ineffective to block human-to-human transmission of viral and infectious disease such SARS-CoV-2 and COVID-19, supporting against the usage of face masks. Wearing face masks has been demonstrated to have substantial adverse physiological and psychological effects. These include hypoxia, hypercapnia, shortness of breath, increased acidity and toxicity, activation of fear and stress response, rise in stress hormones, immunosuppression, fatigue, headaches, decline in cognitive performance, predisposition for viral and infectious illnesses, chronic stress, anxiety and depression. Long-term consequences of wearing face mask can cause health deterioration, developing and progression of chronic diseases and premature death. Governments, policy makers and health organizations should utilize proper and scientific evidence-based approach with respect to wearing face masks, when the latter is considered as preventive intervention for public health.

## **COVID-19 'Vaccines' Are Gene Therapy STORY AT-A-GLANCE**

- mRNA “vaccines” created by Moderna and Pfizer are gene therapies. They fulfill all the definitions of gene therapy and none of the definitions for a vaccine. This matters, as you cannot mandate a gene therapy against COVID-19 any more than you can force entire populations to undergo gene therapy for a cancer they do not have and may never be at risk for COVID-19.
- mRNA contain genetic instructions for making various proteins. mRNA “vaccines” deliver a synthetic version of mRNA into your cells that carry

the instruction to produce the SARS-CoV-2 spike protein, the antigen, that then activates your immune system to produce antibodies.

- The only one benefiting from an mRNA “vaccine” is the vaccinated individual, since all they are designed to do is lessen clinical symptoms associated with the S-1 spike protein. Since you’re the only one who will reap a benefit, it makes no sense to demand you accept the risks of the therapy “for the greater good” of your community.
- Since mRNA “vaccines” do not meet the medical and/or legal definition of a vaccine, marketing them as such is a deceptive practice that violates the law that governs advertising of medical practices.
- SARS-CoV-2 has not even been proven to be the cause of COVID-19. So, a gene therapy that instructs your body to produce a SARS-CoV-2 antigen — the viral spike protein — cannot be said to be preventive against COVID-19, as the two have not been shown to be causally linked.

**Marketing mRNA Therapy as Vaccine Violates Federal Law:** Since mRNA “vaccines” do not meet the medical and/or legal definition of a vaccine, referring to them as vaccines, and marketing them as such, is a deceptive practice that violates 15 U.S. Code Section 41 of the Federal Trade Commission Act,<sup>10</sup> the law that governs advertising of medical practices.

**False Narrative: COVID-19 is a deadly virus.**

**Truth: The CDC admits that the COVID-19 virus has never been isolated. In fact when I did a search on their website for a picture of the virus nothing showed up.**

**False Narrative: COVID-19 was a natural phenomenon.**

**Truth: The COVID-19 virus was patented 2015. Bill Gates is one of the owners of the patent. US Patent No. 10,130,701 for Coronavirus.**

**False Narrative: There were many more deaths when compared to the regular flu.**

**Truth: The death statistics were cooked. One of my best friend's sister works directly under the mayor of a small town in NJ. She told her brother that every death registered in their town was listed as COVID-19. One of my acquaintances told me his father past away from a heart attack but his death certificate stated COVID as the cause of death and they would not change it. The numbers were inflated to increase the fear factor.**

**False Narrative: Hydroxychloroquine is not effective.**

**Truth: Hydroxychloroquine is very effective against COVID-19. CDC, FDA and Big Pharma character assassinated this product because it was too cheap and too effective. Interestingly three factories that made Hydroxychloroquine mysteriously burned down: one in Mexico, one in the Thailand, and one in the US.**

**False Narrative: Must get the vaccine in order to obtain immunity.**

**Truth: False. One can boost their immune system with antioxidant nutrients, clean up their diet and should have no problems. The people who are dying have compromised immune systems: heart, diabetes, cancer, toxic intestines, hypothyroidism, liver dysfunction, etc.**

**False Narrative: Flu season is due to a natural cycle of viruses.**

**Truth: False. Every election year starting with 2004 through to 2020 had a virus that had a patent.**

**False Narrative: The vaccines are safe.**

**Truth: False. There are NO safety studies that prove these vaccines are safe.**

**False Narrative: Vaccines are safe and have FDA approval.**

**Truth: This statement is totally false. None of the COVID-19 vaccines currently on the market are actually licensed. They only have **emergency use authorization** — which, incidentally, also forbids them from being mandated, although this is being widely and conveniently ignored. Violation of the Nuremberg Code of Medical Ethics. **You cannot force any experiments drug on anyone without their consent.****

**False Narrative: Vaccine makers are looking out for public safety.**

**Truth: False. Vaccine Makers Destroy COVID Vaccine Safety Studies.**

- Makers of COVID-19 vaccines are now destroying long-term safety studies by unblinding their trials and giving the control groups the active vaccine, claiming it is “unethical” to withhold an effective vaccine.
- In so doing, they make it virtually impossible to assess any long-term safety and effectiveness, and the true benefit versus cost.
- It’s ironic, because vaccine mandates are being justified on the premise that the benefit to the community is more important than an individual’s risk of harm. Yet vaccine manufacturers are saying that participants in the control groups are harmed by not getting the vaccine, and saving the individual is more important than securing the data needed to make public health decisions.
- Getting the active vaccine comes with risk, not merely benefit. This is particularly true for the novel mRNA technology used in COVID-19 vaccines.
- As of April 1, 2021, VAERS (Vaccine Adverse Event Reporting System) had received 56,869 adverse events following COVID-19 vaccination, including 7,971 serious injuries and 2,342 deaths. Of those deaths, 28% occurred within 48 hours of vaccination. The youngest person to die was 18 years old. There were also 110 reports of miscarriage or premature birth among pregnant women.



- As reported in "COVID-19 Vaccine To Be Tested on 6-Year-Olds," between January 2020 and January 2021, COVID-19 vaccines accounted for 70% of the annual vaccine deaths, even though these vaccines had only been available for less than two months!

**False Narrative: The CDC is transparent regarding the COVID-19 vaccine program.**

**Truth: Just the opposite. “The Defender inquired about whether healthcare providers are reporting all injuries and deaths that might be connected to the COVID vaccine, and what education initiatives are in place to encourage and facilitate proper and accurate reporting.**

**Twenty-two days later a representative from the CDC's Vaccine Task Force responded by saying the agency had never received our questions — even though the employees we talked to several times said their press officers were working through the questions we sent. We provided the questions again and requested a response by April 7. To date, the CDC has not responded despite our repeated follow-up attempts.”**

**Twenty-two days later a representative from the CDC's Vaccine Task Force responded by saying the agency had never received our questions — even though the employees we talked to several times said their press officers were working through the questions we sent. We provided the questions again and requested a response by April 7. To date, the CDC has not responded despite our repeated follow-up attempts.”**

**False Narrative: Vitamins are not effective against COVID-19.**

**Truth: False.** There are several prevention strategies and treatments readily available that have been shown to be highly effective, which means the need for a vaccine in the first place is nearly moot. Nebulized Peroxide Helps Against Respiratory Infections.

**Vitamin D and COVID-19 - Higher Vitamin D Lowers Risk of Positive SARS-CoV-2 Test.**

## STORY AT-A-GLANCE

- Based on data from 191,779 American patients, people with a vitamin D level of at least 55 ng/mL (138 nmol/L) had a 47% lower SARS-CoV-2 positivity rate compared to those with a level below 20 ng/mL (50 nmol/L)
- Based on data from 7,807 Israelis, those with a vitamin D level above 30 ng/mL (75 nmol/L) had a 58% to 59% lower risk of testing positive for SARS-CoV-2 compared to those with a vitamin D level below 29 ng/mL (74 nmol/L)
- Having a vitamin D level below 30 ng/mL also approximately doubles your risk of being hospitalized with COVID-19, Israeli researchers found
- Spanish researchers found giving hospitalized COVID-19 patients supplemental calcifediol (a vitamin D3 analog) in addition to standard of care lowered ICU admissions from 50% to 2% and eliminated deaths
- An August 2020 study found patients who had a vitamin D level below 12 ng/mL (30 nmol/L) had a 6.12 times higher risk of severe disease requiring invasive mechanical ventilation, and a 14.7 times higher risk of death compared to those with a vitamin D level above 12 ng/mL

## What to Do if You Got the Vaccine and Are Having Problems

In closing, if you got the vaccine and now regret it, you may be able to address your symptoms using the same strategies you'd use to treat actual SARS-CoV-2 infection.

Simple strategies to improve your immune system, and with a healthy immune system, you'll get through COVID-19 without incident. Below, are some of the strategies you can use both to prevent COVID-19 and address any side effects you may encounter from the vaccine.

- Eat a "clean," ideally organic diet. Avoid processed foods of all kinds, especially vegetable oils, as they are loaded with damaging omega-6 linoleic acid that wrecks your mitochondrial function. Linoleic acid has been shown to increase mortality from COVID-19.

- **Consider nutritional ketosis and a time-restricted eating window of six to eight hours** with no food at least three hours before bed. These strategies will help you optimize your metabolic machinery and mitochondrial function.
- **Implement a detoxification program to get rid of heavy metals and glyphosate.** This is important as these toxins contribute to inflammation. To improve detoxification, I recommend activating your natural glutathione production with molecular hydrogen tablets.

A simple way to block glyphosate uptake is to take glycine. Approximately 3 grams, about half a teaspoon, a few times a day should be sufficient, along with an organic diet, so that you're not adding more glyphosate with each meal.

**Note:** Humic acid chelates glyphosate in the intestines and Fulvic chelates it in the blood. Also the homeopathic remedy **Iso Pathic Phenolic Rings will get rid of glyphosate.**

- **Maintain a neutral pH** to improve the resiliency of your immune system. You want your pH to be right around 7, which you can measure with an inexpensive urine strip. The lower your pH, the more acidic you are. A simple way to raise your pH if it's too acidic (and most people are) is to take one-fourth teaspoon of sodium bicarbonate (baking soda) or potassium bicarbonate in water a few times a day.
- Ivermectin is very effective against COVID-19 or any other virus.
- Lysine an amino acid is also effective: 1500mg per day.

**Nutritional supplementation can also be helpful. Among the most important are:**

**Vitamin D<sub>3</sub>** — Vitamin D supplements are readily available and one of the least expensive supplements on the market. All things considered, vitamin D optimization is likely the easiest and most beneficial strategy that anyone can do to minimize their risk of COVID-19 and other infections, and can strengthen your immune system in a matter of a few weeks.

**N-acetylcysteine (NAC)** — NAC is a precursor to reduced glutathione, which appears to play a crucial role in COVID-19. According to one literature analysis,<sup>20</sup> glutathione deficiency may actually be associated with COVID-19 severity, leading the author to conclude that NAC may be useful both for its prevention and treatment.

**Zinc** — Zinc plays a very important role in your immune system's ability to ward off viral infections. Like vitamin D, zinc helps regulate your immune function<sup>21</sup> — and a combination of zinc with a zinc ionophore, like hydroxychloroquine or quercetin, was in 2010 shown to inhibit SARS coronavirus in vitro. In cell culture, it also blocked viral replication within minutes.<sup>22</sup> Importantly, zinc deficiency has been shown to impair immune function.<sup>23</sup>

**Melatonin** — This boosts immune function in a variety of ways and helps quell inflammation. Melatonin may also prevent SARS-CoV-2 infection by recharging glutathione<sup>24</sup> and enhancing vitamin D synthesis, among other things.

**Vitamin C** — A number of studies have shown vitamin C can be very helpful in the treatment of viral illnesses, sepsis and ARDS,<sup>25</sup> all of which are applicable to COVID-19. Its basic properties include anti-inflammatory, immunomodulatory, antioxidant, antithrombotic and antiviral activities. At high doses, it actually acts as an antiviral drug, actively inactivating viruses. Vitamin C also works synergistically with quercetin.<sup>26</sup>

**Quercetin** — A powerful immune booster and broad-spectrum antiviral, quercetin was initially found to provide broad-spectrum protection against SARS coronavirus in the aftermath of the 2003 SARS epidemic,<sup>27,28,29</sup> and evidence suggests it may be useful for the prevention and treatment of SARS-CoV-2 as well.

**Resveratrol:** is a very effective antioxidant; present in red wines and Japanese Knotweed.

**B vitamins** — B vitamins can also influence several COVID-19-specific disease processes, including<sup>30</sup> viral replication and invasion, cytokine storm induction, adaptive immunity and hypercoagulability.

**Type 1 interferon** — Type 1 interferon prevents viral replication and helps degrade the RNA. It's available in spray form that you can spray directly into your throat or nose. You can try taking a couple of sprays per day prophylactically, and more if you have a cough, fever or headache.

**Note:** Most of the vitamins mentioned in the paper are available at [www.ghsdoc.com](http://www.ghsdoc.com)