

# 20 Mechanisms of Injuries (MOI)

## How COVID-19 Injections Can Make You Sick; Even Kill You

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### Definitions:

**J&J – Johnson and Johnson** – uses adenovirus and transgene to create the spike protein  
**AZ – AstraZeneca** – uses adenovirus and transgene to create spike proteins; high risk of blood clots  
**Pfizer and Moderna** – use mRNA to create the spike protein  
**Spike protein** – antigen on surface of the SARS-CoV2 virus that binds to the ACE2 receptors on the surface of cells to enter into organs to start replication.  
**Anti-S-Antibody** – the antibody generated by your immune system B-cells after being exposed to the Spike protein; the antibody is supposed to bind to the spike protein on the surface of the virus to block entrance into the cells. However it is not known if this actually occurs.

**MOI #1** – Injections can lead to death through anaphylactic shock, a life-threatening allergic reaction. With COVID shots, the allergic reaction is suspected to be caused by previous exposure to and sensitization to polyethylene glycol [PEG].

**MOI #2** – Anti-Inflammatory macrophages, called M2, are inhibited by anti-spike-antibodies [**anti-S-Ab**].

**MOI #3** – All COVID shots lead to the creation of a **spike protein** through a process called translation. The spike protein can damage the body by **at least FOUR pathways**:

1. The spike protein behaves as a hapten, a small molecule that binds to the surface of organs, leading to an autoimmune response.
2. The spike protein can damage organs directly by promoting cardiovascular complications, damaging blood vessels in the lungs, and breaking through the blood brain barrier (BBB), important for protecting the brain.
3. The spike protein can incorporate into human DNA through a process called transfection.
4. The spike protein evokes the release of destructive anti-spike-antibodies, [**anti-S-Ab**] discussed below.

**MOI #4** – Spike protein can trigger changes in blood vessel walls, leading to **pulmonary artery hypertension (PAH)**, which is fatal even under the best current conventional and alternative treatments.

**MOI #5** – In men, the **spike protein** can bind to the ACE2 receptor on sperm. **Risk of infertility** is indicated but not yet proven.

**MOI #6** – Spike proteins cause inflammation and disruption of the **blood brain barrier (BBB)**, leading to **neuropathology and brain degeneration**.

**MOI #7** – Neurological degeneration: spike proteins can damage the *FUS* gene and mutate the *TDP-43 protein*, leading to **Amyotrophic Lateral Sclerosis (ALS)**.

**MOI #8** – Neurological degeneration: mutation and altered function of the TDP-43 protein can also lead to frontotemporal lobe degeneration (FTLD), **a cluster of chronic, degenerative neurological diseases**.

**MOI #9** – Mutation of the *FUS* gene can also lead to **cancer**.

**MOI #10** – **Adenoviruses** used in both the Johnson & Johnson shot and the AstraZeneca shots pose a **risk of cancer**.

**MOI #11** – Anti-spike-antibodies [**anti-S-Ab**] can cause significant damage, specifically to the lungs. The antibodies can also cross-react with **28 different human tissue types**, establishing a mechanism for **multi-system autoimmune disorders and multiorgan failure**.

**MOI #12** – Previous coronavirus exposure and the concept called ‘**original antigenic sin**’ stops true protection against the SARS-CoV2 if previously ill with a coronavirus infection.

**MOI #13** – There is an **increased risk of COVID illness and COVID-related death** in persons who has been previously vaccinated with an **influenza vaccine**.

**MOI #14** – The larger (highly elevated) SARS-CoV-2 antibody response from a COVID infection or from a COVID shot, **results in prolonged and more severe illness**.

**MOI #15** – COVID shots can lead to **enlarged lymph nodes** that may have long term ramifications.

**MOI #16** – Widespread use of COVID shots results in **non-neutralizing antibodies**, especially in people who have already had a COVID infection. This may be leading to **virulent mutant viruses**.

**MOI #17** – **Antibody Dependent Enhancement (ADE)** is a phenomenon occurs when a person is exposed to a circulating coronavirus after being vaccinated. The **anti-S-Ab** enhances the entry of the SARS-CoV-2 virus into the cell (usually macrophages) and accelerates its replication, causing more severe illness than they would have experienced if they had not been vaccinated.

**MOI #18** – Johnson/Johnson and AstraZeneca shots release a **transgene** that can lead to potentially deadly side effects from injecting raw genetic material that **can induce anti-DNA antibodies and can integrate into human DNA**.

**MOI #19** – Both Johnson/Johnson and AstraZeneca shots carry a snip of double stranded DNA (dsDNA) [transgene] wrapped in an adenovirus outer “shell.” 50-billion particles are injected with each injection. dsDNA-antibodies are diagnostic of a long list of autoimmune disorders.

**MOI #20:** The AstraZeneca shot has been known to be associated with potentially deadly blood clots, a condition named Vaccine-Induced Prothrombotic Immune Thrombocytopenia (VIPIT).

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*“Approving a vaccine, utilizing novel RNA technology without extensive testing is extremely dangerous. The vaccine could be a bioweapon and even more dangerous than the original infection.”*

**REF:** Classen JB. COVID-19 RNA Based Vaccines and the Risk of Prion Disease. Microbiol Infect Dis. 2021; 5(1): 1-3. <https://scivisionpub.com/pdfs/covid19-rna-based-vaccines-and-the-risk-of-prion-disease-1503.pdf>