

Do COVID Injections Compromise Natural Immunity?

Analysis by [Tessa Lena](#)

STORY AT-A-GLANCE

- › “Blue Ocean Strategy” is a business strategy that proposes creating a brand new market and dominating it, as opposed to trying to compete in an existing market
- › Today’s new commercial frontier is the human body, “body as a platform”
- › We are being ushered toward a life-time subscription to an artificial immunity service
- › It is important to understand whether in the process of receiving experimental injections, our broad spectrum immunity gets compromised
- › A few studies came out recently showing that it may be the case, and more research is needed

People as Software Platforms

A few months ago, I wrote an article about the [war on natural immunity and ability](#), in which I discussed how we were being ushered toward a subscription model under which we would have to obtain a life-time subscription to the artificial immunity service – with boosters from here into infinity.

The notion of a life-time subscription to an artificial immunity service is dystopian, and I was hoping to be wrong. But alas, the messaging around the need for [boosters](#) due to waning immunity seems to indicate that this is where we are heading, unless we don't participate.

The model is based on the "Blue Ocean Strategy," which is a business strategy that "proposes creating a brand new market out of thin air and dominating it (a blue ocean) — as opposed to trying to compete in an existing market (an ocean red with blood)."

For example, when the internet was introduced into commercial use, it was a brand new market and a "blue ocean," since no such market had existed prior. The introduction of the internet created a whole new "space" that could be monetized in different ways.

Today's new commercial frontier is the biological realm and the human body, "body as a platform." In today's market terms, the human **body** has the market potential of a natural resource. You know how they say that data is the new oil? If data is the new oil, then we are all data hosts, and we can look forward to being treated like oil reserves.

"Here's how it applies to natural immunity. A healthy person with a natural immunity might be a happy person — but to a 2021 biotech entrepreneur, who views the human body as a market to dominate, he is a sheer insult. From the standpoint of that entrepreneur, replacing the default natural immunity of the past millions years with a fully artificial tool that requires a 'subscription' throughout one's entire lifetime (see 'variants' and 'boosters') is desirable.

Replacing the default natural immunity with an artificial tool is a very successful case of creating a brand new market ('artificial immunity market') out of air. A life-long subscription to artificial immunity, with an ever-expanding range of necessary 'upgrades' is a lot more profitable than some traditional shop selling vitamins. Even better, if artificial immunity destroys the natural immunity, customer loyalty is guaranteed."

At the time when my article about the war on natural immunity was published, it was still unclear if COVID injections had the potential to undermine our natural broad-spectrum natural immunity. It seems like it would be "good for business" in a psychopathic world but I didn't really want to think in that direction, it was too dark. Since then, however, a number of studies came out, and they look alarming.

Complexity of Innate Immune Response

Before we dig into the studies about mRNA vaccines and their impact on our innate immunity, let's talk about how our immune response works in general, in layman's terms. Our innate immune response is a very complex, coordinated dance between different types of cells and receptors.

All day long, our body is fighting off different mutations (i.e. potential cancers, for example), keeping in check dormant viruses, and so on. When our bodies are in their natural state, our immune systems get trained from doing the work. Just like an athlete or a pianist gets better from exercise, different components of our immune system get better from being exposed to different pathogens and fighting them off successfully.

And just like a person who has solved a particular challenge gets more experienced in general and develops the ability to solve other challenges more effectively, our natural broad immune response also "learns" broadly from solving specific challenges.

With vaccines – which in a good world could be a useful addition to the medical arsenal, if designed and manufactured with total integrity, thoroughly tested, and used without fanaticism – it gets tricky. The problem is that the scientists' understanding of the tremendous complexity of how everything in our body talks to each other is still very limited.

So when they design a solution to a particular problem – even with the best of intentions – they don't necessarily consider how their solution impacts us as a whole. Same applies to drugs, this is kind of just the myopic nature of how things are done in our culture. And when we add commerce and hubris and God knows what else to the mix, it gets even trickier.

As a type of a medical product, vaccines (or drugs) are as good or as faulty as our overall state of science and commerce. And because our culture leans on the side of "moving fast and breaking things," when vaccines are designed to solve a particular problem, the measured outcomes are about that problem alone.

In the real world, however, we are whole organisms, and everything in our bodies is interconnected and works together. Therefore, if a medication or a vaccines solves one problem at the expense of creating another problem, then we suffer as a whole.

DTP Vaccine: A "Natural Experiment" in Africa

For example, even before the mRNA vaccines showed up on the market, in 2017, a telling [study](#) was published in EBioMedicine. The study was called, "The Introduction of Diphtheria-Tetanus-Pertussis and Oral Polio Vaccine Among Young Infants in an Urban African Community: A Natural Experiment."

In that study, the researchers observed a "natural experiment" in which, for logistical reasons, one group of babies received the DTP vaccine, and another group of babies didn't. Here is their conclusion:

"DTP was associated with 5-fold higher mortality than being unvaccinated. No prospective study has shown beneficial survival effects of DTP. Unfortunately, DTP is the most widely used vaccine, and the proportion who receives DTP3 is used globally as an indicator of the performance of national vaccination programs. It should be of concern that the effect of routine vaccinations on all-cause mortality was not tested in randomized trials.

*All currently available evidence suggests that DTP vaccine may kill more children from other causes than it saves from diphtheria, tetanus or pertussis. **Though a vaccine protects children against the target disease it may simultaneously increase susceptibility to unrelated infections.** [emphasis mine]*

If I were to interpret that study philosophically, I would say that nature is generally wiser than the scientists – and so when scientists try to outsmart nature by force without being humble about how thoroughly they observe the outcome of their effort, and without total love for the people they are supposed to help – they almost inevitably underestimate the complexity of the situation and break something – and then somebody pays the price for their limited vision.

Without total honesty about one's limitations and without genuine love for the people, science turns into a conveyor belt that harms. And that's before adding the desire of

control and profits to the mix – and that happens to be the case almost universally, not just in medicine.

Potential Effects of COVID Jabs on Innate Immune Response

Now, when it comes to the COVID injections, we find ourselves in an even more adventurous territory since the product is new and experimental. In order for the mRNA vaccine to get into the body and be allowed by the body to do what it is designed to do in the ideal world, the body's natural immune reaction to foreign mRNA needs to be turned off – otherwise it will attack the invader on entrance and voila.

Thus, with the current technology, the body's "security alarm" gets turned off in order to let in the mRNA. But of course, that same security alarm is generally needed by the body, and it is currently unknown what kind of long-term effect turning it off in the context of these injections has on one's immunity.

If we are to look at the studies that are starting to come out now, the overall effects of turning off the "alarm" might be, well, alarming.

According to a 2021 [study](#) (not yet peer-reviewed) by a team of scientists from the Netherlands and Germany, titled, "The BNT162b2 mRNA vaccine against SARS-CoV-2 reprograms both adaptive and innate immune responses," the vaccine "modulated the production of inflammatory cytokines by innate immune cells upon stimulation with both specific (SARS-CoV-2) and non-specific (viral, fungal and bacterial) stimuli.

The response of innate immune cells to TLR4 and TLR7/8 ligands was lower after BNT162b2 vaccination [emphasis mine], while fungi-induced cytokine responses were stronger."

The paper further stated the following: "We observed a **significant reduction in the production of IFN- α secreted after stimulation with poly I:C and R848 after the administration of the second dose of the vaccine [emphasis mine]. This may hamper the initial innate immune response against the virus [emphasis mine], as defects in**

TLR7 have been shown to result in and increased susceptibility to COVID-19 in young males.

These results collectively demonstrate that the effects of the BNT162b2 vaccine **go beyond the adaptive immune system and can also modulate innate immune responses.**" [emphasis mine]

In other words, the BNT162b2 injection modified the innate immune response and seemingly weakened certain aspects of it, and no one really knows or understands the details and the very long-term consequences.

If you are curious about the technical detail of how the "alarm" gets turned off, this Scientific American [article](#) explains what kind of modifications are used in the mRNA vaccines in order to trick the body into letting the foreign mRNA in.

The article features two scientists: Karikó, senior vice president and head of RNA protein replacement therapies at BioNTech, and Weissman, a professor of vaccine research at the University of Pennsylvania's Perelman School of Medicine, who were awarded a \$3 million Breakthrough Prize in Life Sciences for their work.

The article says that "when foreign mRNA is injected into the body, it causes a strong immune response. But Karikó and Weissman figured out a way to how to modify the RNA to make it less inflammatory by substituting one DNA "letter" molecule for another."

Here is how the researchers themselves explain the mechanism in a [study](#) called, "Suppression of RNA recognition by Toll-like receptors: the impact of nucleoside modification and the evolutionary origin of RNA":

"DNA and RNA stimulate the mammalian innate immune system through activation of Toll-like receptors (TLRs) ... **We show that RNA signals through human TLR3, TLR7, and TLR8, but incorporation of modified nucleosides m5C, m6A, m5U, s2U, or pseudouridine ablates activity**" [emphasis mine]

Activation of Previously Dormant or Controlled Pathogens?

Are there recent studies addressing the clinical effects of receiving the COVID injections on people's broad immunity? There are a few. This [study](#) titled, "Hepatitis C Virus Reactivation Following COVID-19 Vaccination - A Case Report," deserved to be quoted in detail:

"Materials and methods: Here, we report a case of an 82-year old patient with dementia who was admitted to a nursing home in the Netherlands. After vaccination with COVID-19 vaccination, physical examinations and lab tests were performed.

Results: She had a reactivation of hepatitis C infection after vaccination with the mRNA-based Pfizer-BioNTech COVID-19 vaccine. This reactivation manifested with jaundice, loss of consciousness, hepatic coma and death.

Conclusion: This reactivation of hepatitis C virus after vaccination with the Pfizer-BioNTech COVID-19 vaccine suggests a need for critical consideration of individuals with prior HCV infection and considered for COVID-19 vaccination."

In other words, she passed away as a result of a hepatitis C infection that, according to the researchers, activated after she received the injection. While she luckily lived a long life and passed away at 82, no one knows how long she would have lived if she didn't get the injection. It's as simple as nobody knows, and it doesn't look like our leaders care to make sure that this is studied thoroughly before mandating the product on everyone.

Another [study](#) titled, "Varicella zoster virus reactivation and mRNA vaccines as a trigger" talks about the reactivation of the zoster virus following the mRNA vaccines. It states the following:

"The suggested pathogenic mechanism was induced lymphopenia and the functional impairment of lymphocytes, particularly CD8+ T cells and natural killer cells.

With regard to COVID-19 vaccines, it is postulated that, as a product of a massive shifting of naïve CD8+ cells, VZV-specific CD8+ cells are not temporarily capable of controlling VZV. The question of why VZV reactivation

occurs almost exclusively with mRNA-based COVID-19 vaccines and not with viral vector or inactivated COVID-19 vaccines remains to be answered."

[emphasis mine]

And finally, in this extremely informative [interview](#) on The Highwire, Dr. Ryan Cole provides a good explanation of the potential mechanisms of immunosuppression as a result of COVID injections. He also mentions his observations regarding an alarming trend of previously-under-control cancers going out of remission after the administration of COVID injections.

In another [talk](#), Dr. Cole goes further into what he believes to be a great uptick in cancers post-vaccination, based on the results that he is seeing in his labs.

Conclusion: Unfortunately, it looks like COVID injections could be compromising our broad-spectrum innate immunity at least to some degree – and I wish somebody with a conscience had looked into it very thoroughly before injecting the product into billions of bodies. Why? Because despite what the proponents of the Fourth Industrial Revolution think of us, we are human beings, not commercial platforms.

About the Author

To find more of Tessa Lena's work, be sure to check out her bio, [Tessa Fights Robots](#).