

Injuries, Causes, & Treatments, IJVTPR 3(1): *For “Such a Time as This”*

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Abstract

This editorial presents the main questions for volume 3, issue 1 of the *IJVTPR*, titled *Injuries, Causes, & Treatments*. The focus is on the clinical outcomes still unfolding from billions of injections of the COVID-19 “vaccines” — the “synthetic gene therapies” administered, according to the Pharmaceutical Technology trackers in 2022, in more than 13 billion doses to more than 5 billion persons at the time of this writing. What are (1) the components in those injections that are (2) causing the observed clinical outcomes, and, (3) what treatments are possible for people who have received one or more of the injections?¹ Yuval Noah Harari has said that in a hundred years “the corona virus epidemic” will be marked “as the moment when a new regime of surveillance took over, especially, surveillance under the skin”. He says it enables overseers to “collect biometric data, analyze it, and understand people better than they understand themselves”. Or, as Klaus Schwab of the World Economic Forum put it, the power of “genetic editing” redefines everyone who receives it. Just so, the COVID era has elevated the subject-matter of this journal to a higher level than could even have been imagined in the summer of 2019 when it was being conceptualized. The *Inaugural Issue* was well underway before March 11, 2020 when the World Health Organization proclaimed the corona pandemic. The first issue of the journal would not appear until July 15, 2020, only months before what Schwab would call the “Fourth Industrial Revolution”. Is the “Fourth” one — with transformative gene editing at its core — an intended resuscitation of the “Third Reich”? Who could have imagined beforehand and who can now comprehend the events that are confronting us all?

Keywords: *adverse events, biological castes, clinical outcomes, COVID injectables, COVID era, Fourth Industrial Revolution, genetic editing, Klaus Schwab, mathematical proofs, modified nucleic acids, surveillance under the skin, synthetic XNA, transhumanism, vaccines, World Economic Forum*

¹ Other questions and subject-matter within the scope of the journal, e.g., comments on articles already published, or additional commentary on the three opening papers announced in this introduction, are welcomed, but the clinical impact of the COVID-19 injectables is central to this issue of the journal.

Looking Ahead

As we launch *IJVTPr*, volume 3, issue 1, following COVID-19, we are soliciting submissions about three fundamental questions which are summed up in our title *Injuries, Causes, & Treatments*. The main questions to be addressed in this issue are these:

- (1) what is actually in the manufactured COVID-19 injectables (Hughes, 2022, and the follow up discussion by Santiago, 2022a, 2022b) and in the bodily fluids and tissues of recipients, now administered in more than 13 billion doses (Pharmaceutical Technology, 2022), as others follow up on the original research by Lee et al. (2021), and by Benzi Cipelli et al. (2022);
- (2) what clinical outcomes injuries, diseases, and the like can be shown reasonably, or perhaps provably, to have been caused by the specific components in the injectables interacting with the human maintenance, repair, and defense systems (Inbar et al., 2016; Shaw, 2017, 2021; Seneff & Nigh, 2021; Seneff et al., 2022; Kyriakopoulos et al., 2022) that have been injected in multiple does in more than 5 billion “fully vaccinated” persons (Pharmaceutical Technology, 2022); and
- (3), finally, what treatment protocols can be used possibly to cure, ameliorate, or, in worst case scenarios, merely manage the injuries already documented, for example, in our immediately preceding issue titled the *COVID Aftermath*.

During the COVID era, over the last three years, the medical/pharmaceutical interests of the world have been, it seems to me, swallowed up by the same “military-industrial complex” that US President Dwight D. Eisenhower warned us about in his “[Farewell Address](#)” in 1961. In this journal, as I documented in an earlier paper (2021), at least since World War II, the US government has counted on vaccine manufacturers to protect the “free world” from the threat of bioweapons.² It seems it was that particular threat that motivated the US Congress to pass legislation in 1986 as seen in the discussion of the Childhood Vaccine Injury Act below, that was presented to the public as if it were for the benefit of vaccine injured persons, but, in fact, was intended to place an impenetrable legal shield over the vaccine manufacturers counting on the supposition that they would protect the whole population from the bioweapons of the future.

It is therefore unsurprising to those who have examined the history of the clandestine bioweapons research in the USA and elsewhere (Ainscough, 2002; Hassani et al., 2004; Jaiswal et al., 2014; Silver, 2015; “Ken Alibek,” 2020; Oller, 2021), that over the decades leading up to SARS-CoV-2, the US vaccine manufacturing program has increasingly come under the control of the federal government. During the COVID era, it has been placed completely under the direct control of the very “military-industrial complex” that Eisenhower warned against (Latypova, 2022b, 2022c). In fact, early in the COVID-19 crisis, [Operation Warp Speed](#) (US GAO, 2021) handed over the whole medical-pharmaceutical vaccine industry to the unilateral (we could even say “dictatorial”) control of the US Department of Defense (Oller & Santiago, 2022; Latypova, 2022c). Moreover, as is argued in depth by Latypova (2022a) — after she rules out all the various other possible alternatives that she conceives of — “the Deep State”, that seems to be managing the Department of Defense, may not only be aiming to thin the world’s population (see [Infertility: A Diabolical Agenda](#); Oller et al., 2017, 2021), but also to create enough general fear to cause the worldwide acceptance of billions of experimental genetic injections. Meanwhile, the contents of the injections are being represented to all their recipients as “safe and effective” not quite conventional “vaccines” rush ordered but reassuringly produced,

² Oddly, as will be made clearer in what follows, it has turned out, the “free world” through Fauci and our own Department of Defense, seems to have sought the assistance of the Chinese Communist Party which represents the antithesis of “freedom”. Now President Biden seems to intend to transfer of US sovereignty to a global government associated loosely with the UN.

according to the manufacturers, with all necessary diligence and care. Based on her analysis, Latypova argues that what is taking place is biowarfare with a deliberate “intent to harm”. But why?

Perhaps the goal of the seemingly amorphous biowarfare program, if that is what is underway, may be something along the lines of the future described by Harari and the World Economic Forum (2020/2022). Harari speaks of a possible future hypothetical biological caste system at about 7 minutes and 4 seconds into his 2015 TED talk where he predicts that transhumanist robots will easily eclipse the accomplishments of human beings with “the rich being upgraded into virtual gods and the poor being degraded to the level of useless people” (Harari & TED, 2015). Is this not fairly close to what the demagogues of recent years have been working toward all along while the public face they put on their agenda is “universal health care” and freedom from the threat of viral diseases for every person on the planet to be achieved by getting everyone “fully vaccinated”?

In support of Latypova’s hypothesis that the COVID-19 injections involve a backgrounded intention to do harm, it is useful to mention Fleming’s (2021) documentation of the US sponsorship of a string of patents and prestigious research papers showing, it seems, conclusively that SARS-CoV-2 was an engineered bioweapon jointly produced by researchers in the USA and in the Peoples Republic of China. Fleming’s compilation of documents, along with Latypova’s research on the chronology of legal empowerment of federal agencies leading up to complete control by the US Department of Defense, points to an epicenter of the COVID-19 catastrophe extending outwardly like the vectors of exploded matter emanating from the origin of an explosion. Moreover, as documented by Robert F. Kennedy, Jr. (2021), it would be difficult to over-estimate the importance of the role played by Anthony Fauci and the federal agencies under his control in the orchestration of the epidemic disease conditions of the worldwide health catastrophe that is still unfolding before our eyes.

THE ROLE OF THE IJVTPR ITSELF

From its *Inaugural Issue*, the IJVTPR has served as a genuine peer-reviewed academic journal with no financial obligations or ties to “the military-industrial complex” that seems now to have engulfed completely the worldwide medical-pharmaceutical industry. Just as the “emergency” powers invoked by Lenin in the 1920s were destined to be made “permanent” (Paul Johnson, 1983/2001, p. 92), it seems the “emergency authorizations” of the COVID era and the takeover of the worldwide medical-pharmaceutical industry are likewise going to be made permanent under the control of the US Department of Defense — until, possibly, control is more fully handed to the global beast under the apocalyptic authority of the yet to be revealed Antichrist (“Mark of the Beast” 2021a). Is truth not stranger than fiction as some sage remarked long ago? With all the foregoing in mind, I feel compelled to ask a purely rhetorical question: *who could have possibly predicted, prior to the COVID era, that the secular science of vaccine theory, practice, and research would occupy an absolutely central place in this unprecedented moment in history where the world population seems poised to come under the complete control of demonic powers?* As I approach my 80th year on this planet, I can say without fear of contradiction, that I have never before heard so many people in many different disciplines, spheres of influence, and walks of life referring in unanimity to what is happening around us as “demonic”, “diabolical”, “evil”, and even “Satanic”.

WAS IT SCIENTIFIC PRIDE AND HUBRIS THAT BROUGHT US HERE?

Paul Johnson (1983/2001, p. 240) complained that it was “ill-informed meddling” with the free market that led to the Great Depression. It all began well before the crash of the New York Stock Exchange in 1929 which helped to grease the skids of governments on the way to World War II. It seems to me that similarly ill-advised meddling by over-zealous genetic engineers has likewise led to the series of catastrophes

reverberating something like the aftershocks of an earthquake except for the fact that the post-COVID shockwaves seem to be getting stronger rather than weaker.

At the Present

The first three papers of volume 3, that we produce now along with this introduction, show: (1) that adverse events from the COVID-19 injections have tended to be minimized, ignored, or falsely denied by the medical authorities responsible for administering them (see the first entry by Provost, [2023](#)); (2) that the injectables seem to be causing an accelerated form of Creutzfeldt-Jacob prion disease, the human form of Mad Cow Disease (Perez, Moret-Chalmin, & Montagnier, [2023](#)); and, what is worse, if it is possible for things to actually be getting worse, the host of disease conditions initiated in what are euphemistically termed “side effects” of the COVID-19 injections seem to be more severe six months after they were first reported as “adverse events” (see the third article in this opening issue by Banoun & Provost, [2023](#)). In fact, it appears from the research that the disorders and disease conditions that are accelerating all-cause mortality across all age groups in the most heavily vaccinated nations of the world (Oller & Santiago, [2022](#); Dowd, [2022a](#), [2022b](#)) are waxing rather than waning as the world progresses more deeply into the post-COVID era.

WHAT ARE WE TO BELIEVE?

Have the genetic engineers responsible for manufacturing whatever is in the COVID-19 injections intended harm, as Latypova has argued, or, have they greatly over-estimated their own powers to improve on what God gave us by presumptuously meddling with the human genome?³ Personally, I would rather suppose that the medical-pharmaceutical industry, and even the military overseers that seem overtly to have assumed complete control based on “emergency authorizations”, have inadvertently blundered into costly errors of judgment rather than deliberate unleashing of a synthetic bioweapon platform into the bodies of more than half the population of the world. My preferred hypothesis, which might be proposed as an alternative to the conclusion of premeditative mass murder perpetrated by the US Department of Defense (Latypova, [2022a](#)), is that the hubris of the researchers involved since about 1958 in “gain of function” (“dual use”) ramping up under the quasi-secret Fauci led government agencies, has merely run amuck with a worldwide catastrophic flair that the clandestine agencies are still scrambling to deny and/or repair (Hughes, [2022](#)).

At any rate, I want to suggest, even to assert on the grounds of certain irrefutable mathematical proofs — consistent and general arguments that are too simple to be wrong — concerning all possible meaningful sign systems including natural languages, genetic systems natural or not, material or imaginary meaningful systems, and, apparently, also even extending to the quantum information systems that Einstein described as “spooky” (Einstein et al., [1935](#); Oller, [1996](#); *Nature Computational Science*, [2022](#)), all of them showing that

³ The [December 9, 2022 video podcast](#) mainly features Ryan Cole, MD (pathologist) and Del Bigtree discussing whatever may eventually, by diligent investigation, actually be found in the COVID-19 injectables. The record of their meeting dated December 9 beginning in the video at 1 hour 21 minutes and 10 seconds and takes up almost exactly one hour ending at 2:21:00. The meeting of Bigtree and Cole in the Highwire studio, they mention, took place the day after the December 8, 2022 meeting in Washington convened by Senator Ron Johnson as a “Roundtable on COVID-19 Vaccine Safety and Efficacy”. That prior three-hour long meeting is summarized in about 9 minutes beginning at marker 12 minutes and 36 seconds into the video (also available on Rumble [here](#) as Episode 297 of the Highwire series). The Washington meeting addressed the catastrophe unfolding in the aftermath of the COVID-19 injections. In addition to Senator Ron Johnson and Del Bigtree it also involved former multiple billion-dollar investment advisor at Blackrock, Ed Dowd; insurance analyst, Josh Stirling; lawyer of note, Aaron Siri; senior advisor to FDA commissioner, David Cortler; pediatric cardiologist, Kurt Milhoan, MD, PhD; and several persons who testified of debilitating COVID-19 injection injuries or deaths. The best known among the invited speakers were the medical doctors that have frequently been in the news of late including Ryan Cole, Peter McCullough, Robert Malone, Harvey Risch, and James Thorp.

failure to take ordinary truth relations seriously leads inevitably to entropic decay, and in biological systems, that corruption leads to disease, disorder, and death.

The manufacturers of the COVID-19 injectables, provided at least that the part of their narrative about the *intended functions of the modified RNA in the lipid nanoparticles is true* (for instance, according to Nance & Meier, 2021), are from the start, *by their intentional design, aiming to deceive the cells of every recipient with what amount to tens of billions of biological lies in every injection, followed by even more lies in the constructed spike proteins that must follow if the “vaccines” do their intended work of deceiving the body’s cells.* The fact is that every single well-formed modified RNA that successfully commandeers any protein producing ribosome is at least one deliberate lie, and every spike protein that it may crank out is another. As the synthetic RNA presents itself to the endoplasmic reticulum of the cells, acting exactly like every invasive virus, it must represent itself to be something that it is not. It is not a natural mRNA from the self, but a foreign invader from the COVID genetic platform. Its presence right next to the nucleolus housing the most vital nuclear DNA crucial to our health and well-being, is based exclusively on a deliberate, manufactured, biological lie. As Nance and Meier (2021) explained, the synthetic nucleic acid, is “cloaked” and is thus disguised as a natural mRNA produced by the body’s own nuclear DNA. However, what they are calling “mRNA” is actually, as Santiago (2022a, 2022b) has explained (Oller & Santiago, 2022), a synthetic creation more properly termed a xeno-nucleic acid, an XNA — that is one that is a foreign invader of the body. It is not produced by the body’s own nuclear DNA as it represents itself to be. Therefore, every well-formed, or even fragmentary bit of this XNA that succeeds in deceiving the protein manufacturing systems is a lie.

IF THE MESSENGER XNA ONLY WORKED EXACTLY AS INTENDED . . .

Although the developers of these biologically deceptive devices claim in hopeful sounding language that the deceptions, if they work only as intended (Nance & Meier, 2021), will do no serious harm but will rather generously result in health benefits richly compensating for any supposedly minor problems they might cause. Among the hoped for benefits, of course, were prevention of the targeted disease, prevention of its spread, and so forth. The emerging clinical results already are showing that the genetic engineers were mistaken from the outset about all of those “benefits”, and, in the meantime, all kinds of undesirable clinical outcomes are manifesting themselves as ugly realities. Lying of the sort engaged in by the authorities, however, was mathematically certain to cause such disastrous results. Here is why.

Before the worldwide catastrophe of COVID-19 began to unfold, Christopher A. Shaw and I had already published a theoretical argument about the body’s many-layered barriers to foreign invasion demonstrated by our own nuclear DNA. It resides inside the nucleolus in our nucleated cells at what is arguably the deepest possible and most protected level in the body. The only noteworthy exception consists of the gamete cells which are, in some respects, even more intensely guarded than the individual’s own nuclear DNA (Oller & Shaw, 2019). Our argument, supported by theoretical and clinical evidence, suggested that if all else is held equal, the deeper the penetration of an injury or disease agent through all the various membranes and barriers ultimately guarding our DNA (and gamete cells), the more likely is disorder, disease, and death not only to the individual, but to future generations. In a worst case scenario, sufficiently widespread damage would exterminate the human race. The argument showing why deliberate lies told to the body’s maintenance, repair, and defense systems is a universally bad idea is very simple: for any meaningful sign systems to work successfully, in linguistic communication, genetic systems, computing, and in any real communication system imaginable, ordinary material facts must be represented faithfully — “truthfully” in the least burdened sense of the term “truth”. That is, the material facts represented in whatever system of signs may be at issue, must deliver whatever the more abstract sequence of signs representing those material facts conventionally require.

While it is true, of course, that fictional representations about possible courses of action, some of which, thankfully, will not be taken, also fictional (imagined) hypotheses leading to useful experimentation, and the like, are extremely useful, deliberate deceptions, especially the ones that are taken to be true, lead to what Bertrand Russell (1919/1989, p. 169) described as unpleasant consequences — the outcomes can resemble the sort of event manifested in stepping into a fictional elevator where there is a real elevator shaft but no actual elevator. The end result of believing in fictions dressed up as true representations is never salubrious. Although errors are fictions innocently taken to be true representations, they are instructive as soon as they are discovered because finding them requires replacing some or all of their parts, the ones that are false, by true and correct representations. Lies, on the other hand, are less useful than fictions because they are artfully contrived to deceive interpreters — they can even come to deceive their inventors in certain pathologies (e.g., in what is known variously as *pathological lying*, *pseudo mania pathologica*, and *mythomania*, to name some of the descriptors (Oller et al., 2010, pp. 41, 505-508) — and they are far more apt to be hurtful than unintended errors because, if well constructed, artful lies are apt to be regarded as ordinary true representations. What makes lies more corrupt and potentially more harmful than any comparable fiction or error purporting to represent the same or similar facts, is that the lie can never be trusted to determine any valid information about whatever facts it purports to represent.

In his recent interaction with Del Bigtree, at the conclusion of the [hour-long video segment](#) (2:18:00; footnote 3), the distinguished medical pathologist, Ryan Cole, MD, observes “the cells don’t lie”. His point, as he has explained in some detail in the preceding video segment, is that the synthetic RNA in the injectables, provided only that it does what the manufacturers intend for it to do, will deceive the body’s ribosomes into producing huge quantities of the most harmful part of the SARS-CoV-2 virus, its spike protein. Meantime, because the complex bodily systems of DNA, RNA, and proteins do not lie to each other, the deception introduced by the synthetic RNAs that are lying — effectively claiming to be from the self-DNA when in fact they are entirely foreign — will produce the foreign spike protein which, according to Cole, is the essential cause of the harmful clinical consequences emerging from the worldwide distribution of the COVID-19 synthetic RNA lies. The poor quality of the manufactured materials in the injectable fluids that have been examined under many different microscopes, may be producing a host not only of the intended but harmful foreign spike proteins, but also, because of the shoddy and rushed manufacturing which Cole comments on frequently in the video, they may contain fragments of spike proteins, also pretending to be native to the body, but which are also effectively another pack of lies.

The clinical consequences of the body’s attempt to interpret all the lying that the COVID-19 injections have presented to it amounts to what some of my colleagues and I have called “biosemiotic entropy” (2014b): it disrupts the body’s communication systems invariably trending toward disorder, disease, and death. The consequence of trusting in lies as if they were ordinary true representations, provided all else is held equal, is universally damaging to all meaningful sign systems. In biological systems, the most evident consequences of violating ordinary truth relations come in the clinical outcomes that show up as disorders, diseases, and death as argued in a series of papers that I wrote and/or edited for the physics journal of *Entropy* (Oller, 2010, 2014a, 2014b) and as Shaw (2017) explained in his book about *Neural Dynamics of Neurological Disease*. When deliberately evil intentions come into play, we may as well call the resultant entropy by the three-letter biblical word, *sin*. All of what we are talking about here follows directly from irrefutable mathematical proofs that are too well-known, too simple (comprehensible), rigorously self-consistent, and comprehensive in their general coverage of all possible sign systems to turn up wrong. The proofs are indefeasible and they show unequivocally that the ordinary human language capacity ranks as the very highest of human abilities.

Simple Irrefutable and General Mathematical Proofs

When I chose to study the human language capacity and the science of linguistics for my graduate degrees from 1965 to 1969, I hardly dared to imagine that I was pursuing an understanding of what is absolutely the highest level of human cognitive power. I did not realize yet that our linguistic capacity absolutely must and does define a level above that of mathematics, physics, or any other science. I supposed from the start that the human language capacity — the same one that babies are endowed with before ever learning their first meaningful word — was foundational, but I hardly dared to assert that all the disciplines of all the ages from mathematics and physics, to biology, psychology, genetics, the arts, humanities, religion, theology, etc., without any possible exception, all of them, absolutely depend on the human language capacity (Berwick & Chomsky, 2017; Oller, 2022), yet that is the case.⁴

Whatever knowledge, understanding, and other creations the language capacity enables — all of them remain intrinsically lower on whatever rank or scale of complexity can be conjured up — than the capacity that enables their creation. The prophet Isaiah (29:16) expressed the principle rhetorically in the question, does a pot have the power to challenge the potter on why it was made as it is? The fact that the maker always outranks the things that are made is echoed in many places throughout the canonical biblical scriptures, and in the sciences as well. It is, in fact, the necessary conclusion of irrefutable mathematical logic that applies to all possible meaningful sign systems (Peirce, 1897; Tarski, 1941, 1949; Oller, 2010, 2014a).

Given these facts, I will assert and leave it to any challenger to refute my claim that the foundational cornerstone of all that the *IJVT* or any other *academic journal can possibly be about* absolutely must be less complex than the human language capacity. Further, and again I invite any challenger to prove wrong my assertion that the human genome *cannot be less complex than the human language capacity which it must contain and express in some manner yet to be determined*. In addition to those two propositions as a foundational context — ones that place the theories and practices of the medical-pharmaceutical manufacturers as subordinate to the foundational science on which they depend — I believe that the *IJVT*, as a peer-reviewed outlet with no pecuniary gains to influence what is accepted or rejected, is uniquely placed to address the unfolding catastrophe that has elevated vaccine theory, practice, and research to the level of an unparalleled watershed of transformative human history.

Whereas Ryan Cole (footnote 3), seems to have concluded that the deliberately deceptive synthetic-XNA coding for the SARS-CoV-2 spike protein, and the poor quality of rushed manufacturing, may account for the whole of the various foreign contaminants as well as what he takes to be amyloid aggregates (abnormal proteinous clots) wreaking havoc with all of the body's systems, also damaging the endothelial linings of blood vessels flaking off cholesterol crystals that he believes some have misinterpreted to be programmable chips, etc., his remarks at the end of the conversation with Del Bigtree leave open many questions that need to be addressed. He says, “we were meant to be human and not transhuman or one of these conglomerations of some odd genetic combination of something that does not belong in our cells” (at

⁴ To avoid misleading the reader concerning the extent of agreement with Chomsky, in personal correspondence (and in his own publications) as recently as 2001 and 2011, he made it clear that he still thinks fictional worlds are on a par with the real material world that we happen to inhabit. He said in 2001 that he read my proofs (ones published before the cited works in *Entropy*, obviously) “with interest” but that he would continue down the road he had been following all along, placing emphasis, as I understand him and Berwick, on syntactic structure as the defining feature of language. This also seems clear from his book with Berwick as I have explained in detail in my recent book on the human language capacity (Oller, 2022). To my knowledge Chomsky makes no formal distinction between ordinary true representations as contrasted with fictions, errors, lies, and nonsense. He says Peirce is his closest mentor from the historical past and yet he hardly cites Peirce in his published works and, to my knowledge, does not take account of Peirce's monumental proofs in “The Logic of Relatives” (1897).

2:20:00). With that in mind, it seems he has *not ruled out* the well-publicized reality of the “transhumanist agenda” to which I turn next.

THE TRANSHUMANIST AGENDA

If there were any doubt about the “transhumanist agenda” explained by some of the world’s best-known powerbrokers formerly operating behind the scenes, but some of them now speaking openly on the public stage of what many have been calling “the Deep State”, a Google search of the exact sequence “transhumanist agenda” generated 1.48 million perfect matches in .34 seconds on January 6, 2023. Among those promoting such an agenda are Klaus Schwab, George Soros, and Bill Gates, with Tony Fauci as a backgrounded facilitator (Gates, 2010, 2020; Harari & TED, 2015; Harari, 2017; Harari & World Economic Forum, 2018, 2020; Schwab & Malleret, 2020).

The charismatic and appealing Israeli, Yuval Noah Harari at 7 minutes and 4 seconds into his TED talk of 2015 elevates fiction and imagination to a level, above truth. He demotes God, nations, our individual selves, our rights as human beings, our freedom of will, etc., to the level of invented and purely imaginary fictions with no material reality to back them up. But, he promotes fictions in general to a level, it seems, above the most ordinary form of truth. At the end of his talk, one viewed by January 7, 2023 by 22.3 million people (and “bots”) and counting, he speaks of computers outperforming human beings. He envisions the possibility of biological castes with “the rich being upgraded into virtual gods and the poor being degraded” to the “level of useless people”. Harari says,

people could look back in a hundred years and identify the coronavirus epidemic as the moment when a new regime of surveillance took over, especially surveillance under the skin, which I think is maybe the most important development of the twenty-first century . . . this ability to hack human beings, to go under the skin, collect biometric data, analyze it, and understand people better than they understand themselves, this I believe is maybe the most important event of the twenty-first century.

More recently, as documented at “Grazing the Surface” there is a [video compilation](#) (here in a Rumble video) dated March 18, 2022 where at about 4 minutes into a talk Harari again speaks of global “surveillance”. Then, the video compilation continues with Schwab speaking about “the Fourth Industrial Revolution” and saying (at 4:34) that it

doesn’t change what you are doing but it changes *you* ... if you take genetic editing, just as an example, it’s *you* who are changed because it has a big impact on your identity.

It seems clear enough, as many pundits have suggested, that we have indeed come to an intellectual, emotional, ethical, legal, and spiritual demarcation of some importance. With that in mind, it may be useful to consider how we got here. A crucial stepping stone from the Eisenhower’s Department of Defense initiatives in the late 1950s moving us inexorably toward [Operation Warp Speed in 2021](#) was H.R. 5546 signed into law by President Ronald Reagan in 1986.

How the Medical-Pharmaceutical Industry Came Under the Control of the Military-Industrial Complex

With the passing of the [National Childhood Vaccine Injury Act](#) in 1986, the manufacturers of vaccines became shielded from lawsuits initiated by vaccine injured consumers (Oller et al., 2010, pp. 631-639; Shaw, 2021; also Robert F. Kennedy, Jr., 2021). With that law, the government agencies supposedly protecting the individual citizens of the country became the defenders of the vaccine manufacturing/marketing industry. The National Vaccine Injury Compensation Program that was associated with the 1986 law, rather than offering relief to injured children, worked entirely in favor of the manufacturers of the vaccines causing

those injuries. What is more, as the only unbiased comparison of unvaccinated children with the huge majority of the age cohorts living in the USA in 1919-1920 showed conclusively, the children of the USA (and those in other heavily vaccinated countries) are not only *not* being “saved from diseases” and *not* being made “healthier” by the supposedly “safe and effective” childhood vaccines but they are (Garner, 2021, 2022) being harmed. The supposed “life-saving” vaccines preventing “countless deaths” from “childhood diseases” are the only plausible source of the epidemic NCDs. The vaccines themselves are causing the disorders, diseases, and earlier mortality in our heavily vaccinated population.

THE MILITARY-INDUSTRIAL COMPLEX SWALLOWS THE MEDICAL-PHARMACEUTICAL INDUSTRY

At the same time, which those NCDs were ramping up more and more in the USA, empirical proof of the legal impenetrability of the protection provided by the 1986 law for vaccine manufacturers — though reasonably challenged by thousands of private citizens who properly sought relief from NCDs, with autism and all its related complexities at the center — is documented in *Autism: the Diagnosis, Treatment, and Etiology of the Undeniable Epidemic* published in 2010 by Jones and Bartlett (Oller & S. D. Oller, 2010; now available without cost on ResearchGate). Lawsuits filed by more than 5,300 parents or guardians of injured children were lumped into a package known as the “Omnibus Autism Proceeding” (2022). Tellingly, all of them were summarily concluded against the claimants and in favor of the vaccine manufacturers in the year 2009.⁵ (just after our *Autism* book had already been produced with a 2010 copyright date insisted on by the publisher to which we objected to no avail). The decision handed down was summed up by Keelan and Wilson (2011) in the *American Journal of Public Health*:

The US Court of Federal Claims, which adjudicates cases for the National Vaccine Injury Compensation Program, has been confronted with more than 5000 cases submitted on behalf of children with autism spectrum disorders, seeking to link the condition to vaccination. Through a test case process, the Omnibus Autism Proceedings have in every instance found no association between autism spectrum disorders and vaccines. However, vaccine advocates have criticized the courts for having an overly permissive evidentiary test for causation and for granting credence to insupportable accusations of vaccine harm. In fact, the courts have functioned as intended and have allowed for a fair hearing of vaccine concerns while maintaining confidence in vaccines and providing protection to vaccine manufacturers [p. 2016].

Long before [Operation Warp Speed](#) was announced by the US Government Accounting Office (US GAO, 2021) and, in fact, three years *before* Eisenhower issued his prescient warning — the US “military industrial complex” had already begun gearing up to transfer oversight of the medical/pharmaceutical industry to the US Department of Defense (DARPA, 2023). That transfer began at least as far back as 1958 though it seems to have been completed during the COVID rollout of the new genetic editing vaccine products. Along the way, the medical/pharmaceutical industry, increasingly under the now exclusive control of the US Department of Defense, has been exploring ways to make selected infectious and potentially lethal disease agents even more so. The supposed reason for such “gain of function” (also known as “dual function”) research was to counter the potential of bioweapons that might be used against the free world (Oller, 2021).

⁵ The decision from the US Court of Federal Claims, better known to the parents of injured children as the “Vaccine Court”, came down just after our *Autism* book had already been produced with a 2010 copyright date insisted on by the publishers. We objected to that post-dating but to no avail. Needless to say, this decision put the kibosh to whatever incentives parents previously had to try to get help for their injured children under the scope of the Childhood Vaccine Injury Act. They learned that the law was not about protecting, or compensating vaccine injured citizens, but was about protecting the vaccine manufacturers from those injured citizens. For a thoroughgoing legal analysis, see Kennedy’s book about *The Real Anthony Fauci* (2021).

MOTIVATION FOR CREATING THE IJVTPR

But well before the role of bioweapons came into sharper focus during the COVID era, the main motivation for the *Inaugural Issue* of the *IJVTPR*, followed by the second issue called *COVID-19*, was the fact that the government/medical/pharmaceutical industry had already come to own and thus control the mainstream worldwide media, and through its use of government funding had also established hegemonic power to shape the outcomes of mainstream academic/medical research toward pre-determined results. Unsurprisingly, results were plainly being massaged to favor the marketing interests of drug companies with “vaccines” at the front and center of their most lucrative products. By “generous” payments to academic and medical editorial boards, ultimately funded in the same manner as the National Vaccine Injury Compensation Program — by money raised directly or indirectly through one form or another from of taxation — the military-industrial complex, by virtue of its control of the medical-pharmaceutical industry, also came assumed control of the mainstream academic/medical journals associated with universities and colleges worldwide (Liu et al., 2017; Inoue et al., 2019; Shaw, 2020; Oller et al., 2020; Anderson et al., 2020; Moynihan et al., 2020; Guo et al., 2021). What is commonly presented as “research” in those mainstream journals is mostly advertising bought and paid for by the controlling interests of the newly empowered military-industrial complex (Smith, 2005; EPIC Magazine, 2017; Children’s Health Defense Team, 2021).

FROM ACCIDENTAL INJURIES TO DELIBERATE ENGINEERING

In volume 2, the *COVID Aftermath*, followed by *Epidemic NCDs*, contributing authors mainly addressed the noncommunicable chronic diseases, including the new ones emerging from COVID-19, that are now also reaching huge epidemic proportions in the world’s most heavily vaccinated nations. For the USA, Garner’s original research (2022) on the traditional “childhood vaccines” and other pre-COVID-19 vaccines, ruled out all the possible explanations for NCDs *except for the CDC scheduled childhood vaccines and the ones being promoted for pregnant women along with the phenylketonuria shot for neonates*. The post-birth childhood vaccines in question were being received by an average of 99.74% of the targeted US population in the decades leading up to Garner’s data collection in 2019-2020. Her nationwide research clinched the case. Not only autism spectrum disorders but the other epidemic NCDs in general are caused by the childhood vaccines, and by the accompanying vaccines administered during pregnancies, and also by the phenylketonuria shot which contains the same sort of neurotoxic aluminum adjuvant included in many of the vaccines (Petrik et al., 2007; Tomljenovic & Shaw, 2012; Luján et al., 2013; Shaw et al., 2014; D. Kennedy et al., 2016; Inbar et al., 2017; S. H. Lee, 2021). The latter shot is routinely administered to almost all babies born in the USA immediately upon their birth.

THE TRANSHUMANIST AGENDA TAKEOVER

Paradoxically, it was supposedly for the sake of protecting the general population from the threat of bioweapons that the military-industrial complex engorged itself further with the medical/pharmaceutical industry during the COVID-19 worldwide shutdown (Latypova, 2022). Now, at least some of the elite powerbrokers are openly advocating (Broudy et al., 2020; Broudy & Arakaki, 2020; Kyrie & Broudy, 2022) a “brave new world” (Oller & Shaw, 2020) without “free will” under the control of robots supposedly becoming smarter and more capable than their human inventors. According to the promoters of the transhumanist agenda, especially, Schwab and Gates, the aims of the coming new normal, the transhumanist future, can be achieved through the injectable, breathable, or ingestible “vaccines”. It would appear that, for the current crop of COVID-19 injectables must contain the vanguard components of that future world in some embryonic experimental form. Certainly, the synthetic genetic materials were initially described by spokespersons for the Department of Defense in hopeful terms (Nance & Meier, 2021), but without, it seems, full disclosure, or even full knowledge on the part of even the manufacturers about what was actually in the scaled up production of the many billions of COVID-19 vaccine doses that have been produced.

Setting to one side the transhumanist agenda for the declared components in the injectables — never mind the contaminants and whatever undeclared elements the COVID-19 products may contain — they were invariably rushed to market breaking all speed limits and bypassing all the traditional controls (footnote 3; Gutschi, 2022). *Operation Warp Speed* happened so fast and so haphazardly, that even the manufacturers could not possibly know what contaminants were inadvertently introduced and what other quality breaches may have occurred along the way (Lee et al., 2021; Benzi Cipelli et al., 2022; Hughes, 2022; Santiago, 2022a, 2022b; Bigtree & Cole, 2023). The patents and publications indicating a very wide-ranging program aiming to do biometric monitoring of every person on the planet — adumbrated in talks by Harari and in documents brought forward by Fleming and others along with pronouncements by Schwab — suggest that plans for surveillance and control of every person on the planet, however, cannot be entirely dismissed. Hence the most pressing question of the third volume of the *IJVT*: what, in fact, do the COVID-19 injectables actually contain and why are those components, whatever they are, causing so many serious injuries and deaths?

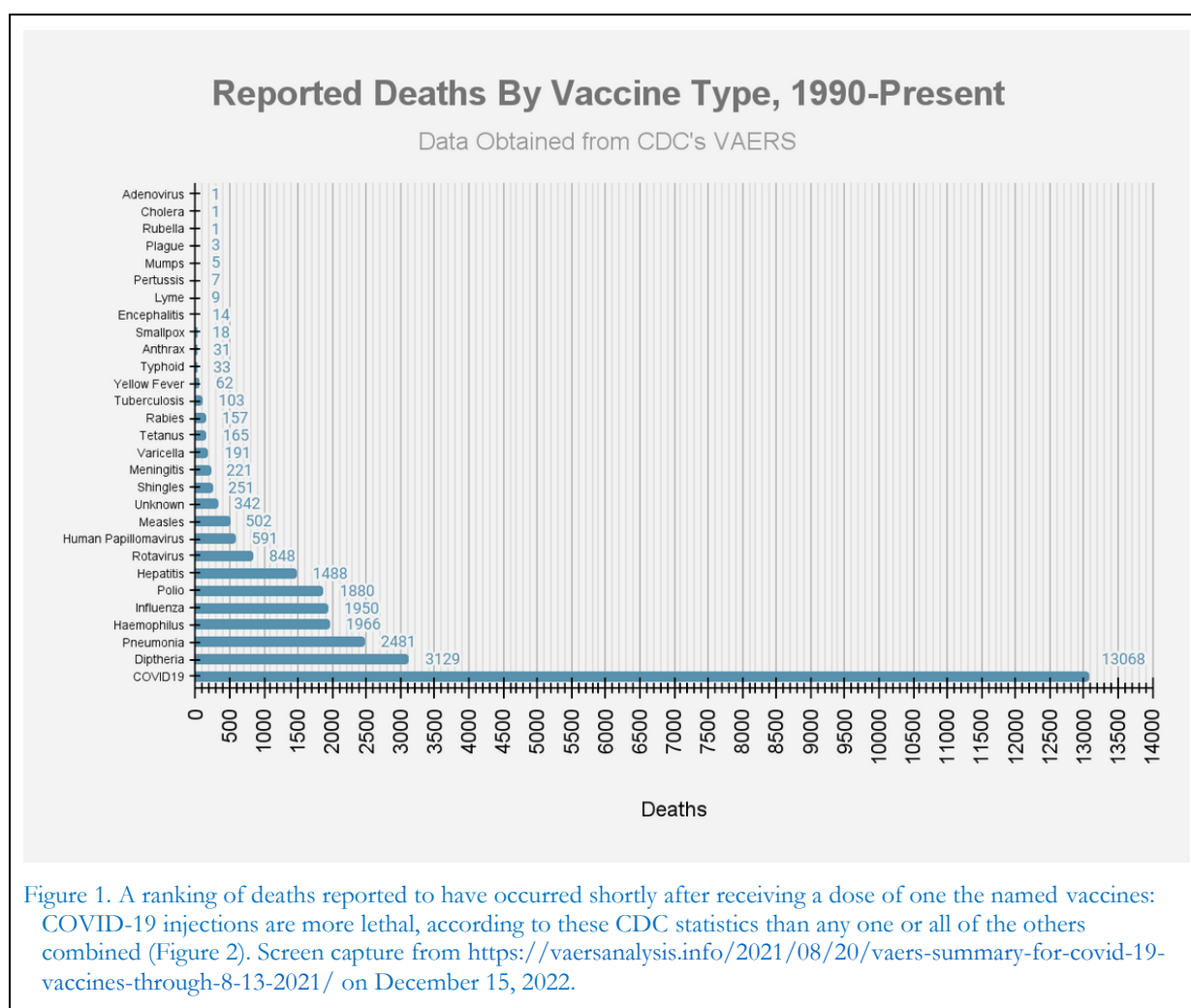


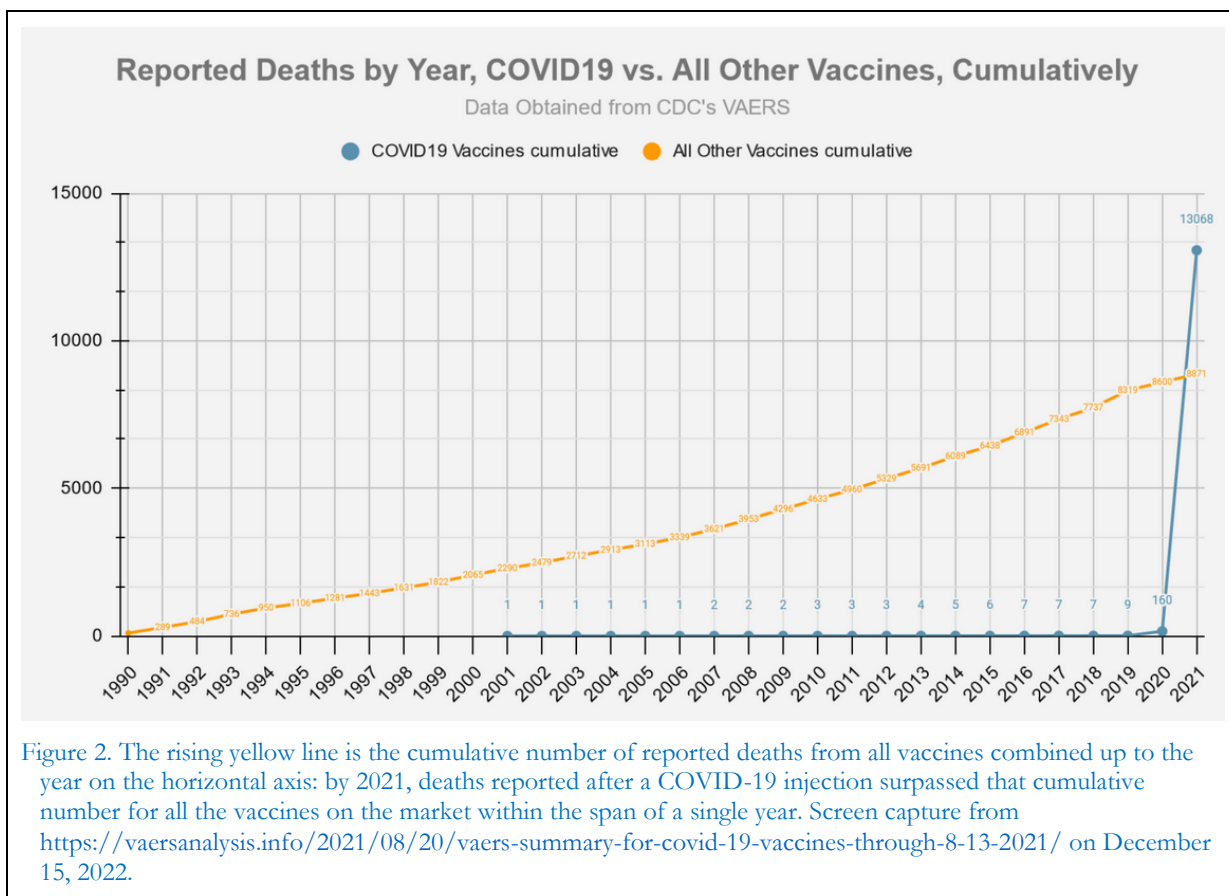
Figure 1. A ranking of deaths reported to have occurred shortly after receiving a dose of one the named vaccines: COVID-19 injections are more lethal, according to these CDC statistics than any one or all of the others combined (Figure 2). Screen capture from <https://vaersanalysis.info/2021/08/20/vaers-summary-for-covid-19-vaccines-through-8-13-2021/> on December 15, 2022.

“SIDE EFFECTS” ALIAS “VACCINE INJURIES”

We know from the only substantial USA based empirical study of the vaccine injuries which are euphemized as mere “side effects” that more than 99% of them are not reported to any regulatory agency at all: Lazarus et al. (2010) in an empirical examination of “1.4 million doses (of 45 different vaccines) . . . given to 376,452

individuals” found that the vast majority of the occurring vaccine adverse events are *not reported*. In fact, they concluded that “fewer than 1% of vaccine adverse events are reported”. Now, with the rollout of the COVID-19 injectables, adverse events of *greater severity, diversity, and exponentially greater frequency*, than in all the prior history of record keeping by the responsible federal agencies have already occurred and are continuing to mount up as shown in Figures 1 and 2.

In both figures, only the deaths reported in the VAERS data are considered. Figure 1 ranks the number of deaths associated with the various vaccines listed on the vertical axis. On the horizontal axis, it shows the relative magnitude in increments of 500 deaths. It is evident that the COVID-19 injectables, according to reported deaths within the narrow time window afforded by the VAERS protocols (ranging from 7 to 42 days after the injection; US Public Health and Human Services, *n. d.*, and the [VAERS Table of Reportable Events Following Vaccination](#)) greatly exceed any other vaccine category. Figure 2 follows up on that



comparison showing in the blue line across the horizontal dimension that in the first year of reporting to VAERS, the COVID-19 injectables involved more deaths than in all prior years not only of any other vaccine but of all other vaccines combined. The cumulative number of deaths reported is shown on the horizontal axis in the orange line for all years from 1990 through 2021. That cumulative number is substantially surpassed in just one year by the COVID-19 injectables.

COVID-19 INJECTIONS “SAFE AND EFFECTIVE”?

The well-known slogan associated with the whole vaccine industry by the US Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC) that the COVID-19 injectables are “safe and effective” has been echoed by drug regulators and promoters throughout the world for decades and continues to be used as a “mantra” (Kyrie & Broudy, 2022b) for getting the public to accept the COVID-19 injections. A letter-for-letter Google search for the exact sequence “COVID-19 vaccines are safe and effective” on January 4, 2023 produced 285,000 exact matches in .87 seconds. To show how and why such a sequence proclaiming the COVID-19 injectable products to be “safe and effective” would reverberate in the memory of the general public worldwide, I also did a search also on January 4, 2023 for any form of the less constrained sequence “vaccines are safe and effective” which yielded 393,000 exact matches in .71 seconds.

Now, nearly two years after the worldwide introduction of the gene-based injectables, we know that the COVID-19 “vaccines” are neither safe nor effective. They do not prevent infection, nor were they even tested to see if they could stop transmission of infection, as was recently revealed by a senior Pfizer executive in testimony before the European Parliament (Franks, 2022; Phillips, 2022). In fact, Latypova (2022) has shown from her investigative research into official documents that all that the US Department of Defense required of the participating COVID-19 vaccine manufacturers was to show the feasibility of “a large scale manufacturing demonstration” — this, under Other Transactions Authority (OTA) provided by the applicable military law (Latypova, 2022; US Code 4021 and 4022) . But, not only have the COVID-19 injections not prevented the purportedly high incidence of the spread of COVID-19 — a claim used by Fauci and the CDC as justification for one booster after another.

At the same time, in addition to the fact that Fauci’s remonstrations about getting everyone “boosted” repeatedly are tantamount to repeating for each shot that all of them have failed, there is the overwhelming evidence (Figures 1 and 2) that the multiple injections themselves are almost certainly the proximate cause of the host of disorders, diseases, and deaths still being attributed, probably falsely, to the SARS-CoV-2 virus. Among the new disease conditions in addition to the host of unexplained sudden deaths (Dowd, (2022a, 2022b), myocarditis, cancer, etc. (Blaylock, (2022), and the new form of Creutzfeldt-Jacob Disease — the human prion variant of Mad Cow Disease — discussed in the second paper of volume 3 by Perez, Moret-Chalmin, and the 2008 Nobel Laureate, Luc Montagnier. Interestingly, at the time of this writing, Chesnut (2023) has unearthed three studies of coronavirus spike protein (Versteeg et al., 2007; Lin et al., 2008; Hamdan et al., 2017) — all published *before* COVID-19 was proclaimed a worldwide pandemic by the World Health Organization on March 11, 2020 — showing that coronavirus spike protein can cause stress in the endoplasmic reticulum (ER) leading to precisely the sorts of “new” disease conditions, including prion disease in humans, that we are now finding as the rollout of COVID-19 injections continues.

The ER, of course, is the critical part of the cell where mRNA is translated to protein. Lin et al. (2008) write that it is the “site of synthesis and folding of membrane and secretory proteins, which collectively represent a large fraction of the total protein output of a mammalian cell”. Stress in this region was known since 2007 to lead to a serious disease conditions including but not limited to “myocarditis”, “cancer”, “Alzheimer’s”, and “prion” formation. Why, then, we must ask, did the US Department of Defense together with its OTA manufacturers at Pfizer, Moderna, and AstraZeneca choose the coding for the SARS-CoV-2 coronavirus spike protein as the synthetic component for the billions of nucleated cells of recipients of the COVID-19 injectables to produce by the billions?

A NEW AND ACCELERATED FORM OF HUMAN PRION DISEASE

What Montagnier and colleagues have shown is that the mRNA coding for the SARS-CoV-2 spike protein in the COVID-19 injectables — assuming that the much advertised XNA coding sequence for that protein

(Nance & Meier, 2021) really is the primary component housed in the lipid nanoparticles of the injectables — is that it not only causes prion disease in humans but produces an accelerated variant of such disease. Symptoms appear within 14 to 30 days of an injection and death can be expected within about one year or less. This rapidly developing form of Creutzfeldt-Jacob Disease can be attributed directly, according to the authors, to a prion region (an amino acid sequence) coded into the SARS-CoV-2 spike protein in all its variants except for Omicron. Considering the fact that it seems usually to require a second dose of one of the COVID-19 injectables to trigger the prion disease in most of the susceptible recipients that have been examined, it is a peculiar absurdity for the CDC and related agencies to promote COVID-19 “booster” shots to compensate for the patently obvious ineffectiveness of the previous injections that the person to be “boosted” has already received, yet, according to the CDC, all of which shots, were and remain powerless to prevent COVID-19 disease. Apart from meeting industry profit projections, advocating such “boosters” makes no sense at all. Given the accumulating data showing irrefutably that adding one or more injections to any individual recipient seems certain only to increase that person’s risk of hospitalization and death the advocacy of additional boosters seems tantamount to a lethal variety of medical fraud (Oller & Santiago, 2022; Blaylock, 2022). “Boosters” do nothing to protect anyone from COVID-19 disease as suggested by Anthony Fauci himself (Fauci, 2021).

ADVERSE EVENTS SEEM TO GET WORSE OVER TIME

The third paper in volume 3, one by Banoun and Provost, does not seek to differentiate the types of adverse reactions followed by various disease conditions in COVID-19 injection recipients, but shows that whatever the disease conditions the injurious shots may have already induced as adverse events (AEs), they tend to become worse after a six-month lapse. Given that the window of observation for AEs attributable to any given COVID-19 injection is in many cases limited to a few minutes or a couple of hours from the time of the shot, but, according to the [VAERS time table](#), not more than 7 to 42 days after an injection, the Banoun and Provost study of AEs is particularly revealing. If the conditions attributable to the injectables themselves are getting worse over time, it seems increasingly likely that there may never have been a real SARS-CoV-2 viral pandemic in the first place. The preventative “vaccine” may not only have been “worse than the disease”, as argued by Seneff and Nigh (2021), it may have been the actual cause of what has been called “COVID-19 disease” in all of its forms — long, short, and in between.

The worsening disease conditions brought on by one or more injections as shown in the original empirical research by Banoun and Provost suggests that the mainstream narrative about saving lives and preventing disease may have been, as Latypova suggests, a smokescreen for the sinister purpose of *The Great Reset* as advocated by Klaus Schwab and others. Calling attention to such a diabolical scheme as a hypothetical possible explanation for the whole of the COVID-19 exercise might seem preposterous if Schwab and others were not openly promoting their transhumanist agenda to remove free will, to challenge any right for individuals to hold private property, and to effectively remove the right of individuals to control their own buying and selling without interference from the military-industrial complex. However, as unlikely as a complete takeover of the world monetary system might have seemed just a few years ago, the means by which to effect such a takeover has been in the works for decades as seen in the 2019 application for a world-patent by Microsoft shows. The filing date was June 20, 2019 for the international patent application to the World Intellectual Property Organization for a “Cryptocurrency System Using Body Activity Data”, serially numbered 060606. The whole of the application published on March 26, 2020 appears as the Appendix to the paper titled “The Mark of the Beast” (Oller, 2021a). It envisions a system using biometric data to potentially control the buying and selling of every person on the planet as loosely also described by Harari and at the 2020 World Economic Forum (2020/2022). The historian, Paul Johnson in his *Modern Times: The World from the Twenties to the Nineties* (2001, p. 131) quotes Hitler from *Mein Kampf* as writing that “the object of all propaganda” is “an encroachment upon man’s freedom of will”. Harari even goes so far as

to suggest that free will itself, along with property ownership, is merely an imagined fiction perhaps soon to be done away with in a strange new world of transhumanism (Kyrie & Broudy, 2022a, 2022b).

Conclusion

With all the foregoing in mind, and all that is contained in the 40 entries already published in the journal, as we launch issue 1, volume 3 of the *IJVTPr*, we are calling for submissions on three fundamental questions: (1) what is actually in the manufactured COVID-19 injectables and in the bodily fluids and tissues of recipients of one or more of them; (2) what clinical outcomes injuries, diseases, and the like can be reasonably, or perhaps provably, attributed to those specific components interacting with the human maintenance, repair, and defense systems; and (3), finally, what treatment protocols can be used to possibly cure, ameliorate, or in worst case scenarios merely manage the injuries already documented, for example, in the our immediately preceding issue titled the *COVID Aftermath*.

Conflicts of Interest

The author acknowledges that he is the Editor-in-Chief of this journal. That being said, this work has nonetheless been subjected to the same peer-review and critique as every editorial or review paper published in the *IJVTPr*. No royalties are earned by the author from any of the books or articles referred to and the author is retired from any gainful university employment where citations or recognition of published works might benefit him in a pecuniary manner. The author's works cited are generally available without cost just as the articles in this journal are. The author's participation in the *IJVTPr*, and in creating works available on the internet, are aimed at figuring out how the most abstract sign systems of language, genetics, and physics connect us with God, each other, and with the material world. The hope is to enhance our present lives and the future of our children, theirs, and the ones to come. It seems that human babies still come into the world without financial security or political influence, and yet are endowed by their Creator with the most advanced powers of cognition and thought that every human being possesses. Therefore, their defense and their future, so long as any of us are still living, it seems, remains our inescapable but highly honorable responsibility as human beings.

Acknowledgments

As the sole author of this editorial, one that has been improved in organization and clarity by multiple readers from the Editorial Board of the *IJVTPr*, but for which I take full responsibility of any remaining infelicities or errors, I offer special thanks to David Hughes, PhD, Daniel Broudy, PhD, Daniel Santiago, PharmD, and Christopher A. Shaw, PhD, and Allison Bakovic, MD, PhD, for their help on this introduction. However, they are not responsible for any of what I say or any errors I may have made in saying it. Neither are any of the other people that I must also thank here. Without them, this journal would not exist. In 2010, I was invited to contribute a paper to an edited volume of the physics journal *Entropy* by Søren Brier, PhD. Later, 2012-2014, I also edited a special issue for that same journal to which various members of the future Editorial Board of the *IJVTPr* contributed. Among the other contributors was the world-renowned biochemical geneticist, Mae-Wan Ho, PhD, and in the list of distinguished contributors who were destined to become associate editors were Christopher A. Shaw, PhD; Robert M. Davidson, MD, PhD; and Stephanie Seneff, PhD. Later, our Editorial Board would be joined by Russell Blaylock, MD and neurosurgeon; Mary Holland, JD, and CEO for the Robert F. Kennedy, Jr. organization known as the Children's Health Defense. All of these and others would continue as mainstays in the present Editorial Board of the journal. It was Shaw's idea, however, to create such a journal, though he "nominated" yours truly in the summer of 2019 to be its Editor-in-Chief. Shortly after that a promised source of funding from a would-be sponsor introduced by the donor's legal advisor got cold feet and bailed out. We went ahead with the journal without the promised support and about a year later, on July 15, 2019, after setting up the website, editing the first five papers, and getting them reviewed by all the members of the Editorial Board, the journal was officially launched. As someone once observed, this sort of academic work is a "team sport". It cannot be done without mutually supportive collaborators.

References

- Ainscough, M. J. (2002). *Next Generation Bioweapons: The Technology of Genetic Engineering Applied to Biowarfare and Bioterrorism*. Defense Technical Information Center. <https://apps.dtic.mil/docs/citations/ADA468243>
- Anderson, T. S., Gellad, W. F., & Good, C. B. (2020). Characteristics Of Biomedical Industry Payments To Teaching Hospitals. *Health Affairs*, 39(9), 1583–1591. <https://doi.org/10.1377/hlthaff.2020.00385>

- Aspect, A., Clauser, J. F., & Zeilinger, A. (2022). *The Royal Swedish Academy of Sciences has decided to award the Nobel Prize in Physics 2022 jointly to*. 19. <https://12newsworld.com/2022/48/04/nobel-prize-2022-royal-swedish-academy-nobel-prize-in-physics-alain-aspect-john-f-closer-anton-zeilinger.html>
- Banoun, H., & Provost, P. (2022). A 6-week time period may not be sufficient to identify potential adverse events following COVID-19 vaccination. *International Journal of Vaccine Theory, Practice, and Research*, 3(1), 775–790. <https://doi.org/10.56098/ijvtpr.v3i1.67>
- Benzi Cipelli, R., Giovannini, F., & Pisano, G. (2022). Dark-field microscopic analysis on the blood of 1,006 symptomatic persons after anti-COVID mRNA injections from Pfizer/BioNtech or Moderna. *International Journal of Vaccine Theory, Practice, and Research*, 2(2), 385–444. <https://doi.org/10.56098/ijvtpr.v2i2.47>
- Berwick, R. C., & Chomsky, N. A. (2017). Why only us: Recent questions and answers. *Journal of Neurolinguistics*, 43, 166–177. <https://doi.org/10.1016/j.jneuroling.2016.12.002>
- Bigtree, D. (Director). (2023, December 8). *Episode 297: BLEEDING TRUTH*. <https://rumble.com/v1zn8m0-episode-297-bleeding-truth.html>
- Blaylock, R. L. (2022). The COVID-19 “vaccines”: What is the truth? *International Journal of Vaccine Theory, Practice, and Research*, 2(2), 595–602. <https://doi.org/10.56098/ijvtpr.v2i2.57>
- Broudy, D., & Arakaki, M. (2020). Who wants to be a slave? The technocratic convergence of humans and data. *Frontiers in Communication*, 5. <https://doi.org/10.3389/fcomm.2020.00037>
- Broudy, D., Bergman, T., & Ed Rankin. (2020, February 20). Telecom Jackboot: A 5G Kick to the Groin. *OffGuardian*. <https://off-guardian.org/2020/02/20/telecom-jackboot-a-5g-kick-to-the-groin/>
- Chesnut, W. M. (2023, January 3). Massive discovery: Known in 2007: expressing the viral spike protein alone induces endoplasmic reticulum stress: an explanation for emerging heterogeneous pathologies [Substack newsletter]. *WMC Research*. https://wmcresearch.substack.com/p/massive-discovery-known-in-2007-expressing?utm_medium=email
- Children’s Health Defense Team. (2021). Planned surveillance and control by global technocrats: a big-picture look at the current pandemic beneficiaries. *International Journal of Vaccine Theory, Practice, and Research*, 1(2), 143–171. <https://doi.org/10.56098/ijvtpr.v1i2.7>
- DARPA. (2022). In *Wikipedia*. <https://en.wikipedia.org/w/index.php?title=DARPA&oldid=1129961739>
- Dowd, E. (Director). (2022a, May 6). *Ed Dowd Assesses the COVID Numbers*. <https://rumble.com/v13rixu-ed-dowd-assesses-the-covid-numbers.html>
- Dowd, E. (2022b). *Cause Unknown*. Children’s Health Defense. <https://www.target.com/p/cause-unknown-children-s-health-defense-by-ed-dowd-hardcover/-/A-87479317>
- EPIC Magazine. (2017, December 2). Vaccines are big business. Pharma is a trillion-dollar industry with vaccines accounting for \$25 billion in annual sales. The Center for Disease Control’s decision to add a vaccine to the schedule can guarantee its manufacturer millions of customers and billions in revenue with minimal advertising or marketing costs and complete immunity from lawsuits. *E.P.I.C. Empowering People, Inspiring Community*. <http://epicmag.org/vaccines-big-business/>
- Einstein, A., Podolsky, B., & Rosen, N. (1935). Can quantum-mechanical description of physical reality be considered complete? *Physical Review*, 47(10), 777–780. <https://doi.org/10.1103/PhysRev.47.777>
- Eisenhower, D. D. (1961). *Eisenhower’s Farewell Address*. [https://en.wikisource.org/wiki/Eisenhower%27s_farewell_address_\(press_copy\)](https://en.wikisource.org/wiki/Eisenhower%27s_farewell_address_(press_copy))
- Fleming, D. R. M. (2021). *Is COVID-19 a Bioweapon? A Scientific and Forensic Investigation*. Skyhorse. <https://www.simonandschuster.com/books/Is-COVID-19-a-Bioweapon/Richard-M-Fleming/Children-s-Health-Defense/9781510770195>
- Franks, C. (2022, October 13). *Pfizer didn’t know if COVID vaccine stopped transmission before rollout*. <https://www.news.com.au/technology/science/human-body/pfizer-did-not-know-whether-covid-vaccine-stopped-transmission-before-rollout-executive-admits/news-story/f307f28f794e173ac017a62784fec414>
- Garner, J. (2021). *The Control Group: Pilot Survey of Unvaccinated Americans*. The Control Group, PO Box 1504, Roseville, CA 95678, info.cg@thecontrolgroup.org. <https://www.thecontrolgroup.org/gallery>
- Garner, J. (2022). Health versus disorder, disease, and death: Unvaccinated persons are incommensurably healthier than vaccinated. *International Journal of Vaccine Theory, Practice, and Research*, 2(2), 670–686. <https://doi.org/10.56098/ijvtpr.v2i2.40>

- Gates, B. (2010, February 20). *Bill Gates: Innovating to zero!* | TED Talk | TED.com. http://www.ted.com/talks/bill_gates
- Gates, B. (2020). *Bill Gates: How Gene Editing, AI Can Benefit World's Poorest—YouTube*. https://www.youtube.com/watch?v=YNBOS4UBbDI&list=LL8qoMcUqKWLdc3YC6s5Ov_g
- Guo, X. M., Cowan, M., Folsom, S., Ehimiaghe, E., Persenaire, C., Barber, E. L., & Tanner, E. J. (2021). Discrepancies between author- and industry-reported disclosures of financial relationships at an annual gynecologic oncology research meeting. *Gynecologic Oncology*, 160(1), 260–264. <https://doi.org/10.1016/j.ygyno.2020.10.039>
- Gutsch, M. (Director). (2022, November 2). *Quality issues with mRNA Covid vaccine production*. <https://www.bitchute.com/video/muB0nrznCAC4/>
- Hamdan, N., Kritsiligkou, P., & Grant, C. M. (2017). ER stress causes widespread protein aggregation and prion formation. *Journal of Cell Biology*, 216(8), 2295–2304. <https://doi.org/10.1083/jcb.201612165>
- Harari, H. N. & World Economic Forum (Directors). (2018, January 25). *Will the Future Be Human? - Yuval Noah Harari*. <https://www.youtube.com/watch?v=hL9uk4hKyg4>
- Harari, Y. N. & TED (Directors). (2015, July 24). *Why humans run the world*. <https://www.youtube.com/watch?v=nzj7Wg4DAbs>
- Harari, Y. N., & World Economic Forum. (2020/2022). *World Economic Forum's Dr. Harari: Humans are Now Hackable Animals – Deep State NH & Agenda 2030*. <https://www.grazingthesurface.com/2022/03/18/world-economic-forums-dr-harari-humans-are-now-hackable-animals/>
- Harari, Y. N., & World Economic Forum (Directors). (2022, March 7). *We are now hackable animals*. <https://www.youtube.com/watch?v=45FuyCmyvRs>
- Hassani, M., Patel, M. C., & Pirofski, L. (2004). Vaccines for the prevention of diseases caused by potential bioweapons. *Clinical Immunology*, 111(1), 1–15. <https://doi.org/10.1016/j.clim.2003.09.010>
- Hughes, D. A. (2022). What is in the so-called COVID-19 “vaccines”? Part 1: evidence of a global crime against humanity. *International Journal of Vaccine Theory, Practice, and Research*, 2(2), 455–586. <https://doi.org/10.56098/ijvtpr.v2i2.52>
- Inbar, R., Weiss, R., Tomljenovic, L., Arango, M.-T., Deri, Y., Shaw, C. A., Chapman, J., Blank, M., & Shoenfeld, Y. (2016). Behavioral abnormalities in young female mice following administration of aluminum adjuvants and the human papillomavirus (HPV) vaccine Gardasil. *Vaccine*, S0264410X16000165. <https://doi.org/10.1016/j.vaccine.2015.12.067>
- Inbar, R., Weiss, R., Tomljenovic, L., Arango, M.-T., Deri, Y., Shaw, C. A., Chapman, J., Blank, M., & Shoenfeld, Y. (2017). Behavioral abnormalities in female mice following administration of aluminum adjuvants and the human papillomavirus (HPV) vaccine Gardasil. *Immunologic Research*, 65(1), 136–149. <https://doi.org/10.1007/s12026-016-8826-6>
- Inoue, K., Blumenthal, D. M., Elashoff, D., & Tsugawa, Y. (2019). Association between physician characteristics and payments from industry in 2015-2017: Observational study. *BMJ Open*, 9(9), e031010. <https://doi.org/10.1136/bmjopen-2019-031010>
- Jaiswal, V., Chauhan, R. S., & Rout, C. (2014). Common antigens prediction in bacterial bioweapons: A perspective for vaccine design. *Infection, Genetics and Evolution*, 21, 315–319. <https://doi.org/10.1016/j.meegid.2013.11.011>
- Jeon, K.-Y. (2022). Moving and living micro-organisms in the COVID-19 vaccines—Prevention, early treatment cocktails for COVID-19 and detoxification methods to reduce sequels of COVID-19 vaccines. *American Journal of Epidemiology and Public Health*, 6(1), 001–006. <https://www.scireslit.com/PublicHealth/AJEPH-ID50.pdf>
- Johnson, P. (1983). *Modern Times Revised Edition: The World from the Twenties to the Nineties (Perennial Classics)* (Revised). Harper Perennial Classics. https://www.amazon.com/Modern-Times-Revised-Twenties-Perennial/dp/0060935502/ref=sr_1_1?crid=2PX3V59UEOKHI&keywords=modern+times+paul+johnson&qid=1672856219&prefix=modern+times+%2C100&sr=8-1
- Keelan, J., & Wilson, K. (2011). Balancing Vaccine Science and National Policy Objectives: Lessons From the National Vaccine Injury Compensation Program Omnibus Autism Proceedings. *American Journal of Public Health*, 101(11), 2016–2021. <https://doi.org/10.2105/AJPH.2011.300198>
- Kennedy, D., Seneff, S., Davidson, R. M., Oller, J. W., Haley, B. E., & Masters, R. D. (2016). Environmental toxicants and infant mortality in America. *Peertechz Journal of Biological Research and Development*, 1(1), 36–61. <https://www.peertechzpublications.com/articles/OJBS-1-105.php>
- Kennedy, R. F., Jr. (2021). *The Real Anthony Fauci: Bill Gates, Big Pharma, and the Global War on Democracy and Public Health*. Skyhorse Publishing. <https://www.simonandschuster.com/books/Thimerosal-Let-the-Science-Speak/Robert-F-Kennedy/9781632206015>

- Kyriakopoulos, A. M., Nigh, G., McCullough, P. A., & Seneff, S. (2022). Mitogen Activated Protein Kinase (MAPK) Activation, p53, and Autophagy Inhibition Characterize the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Spike Protein Induced Neurotoxicity. *Cureus*, *14*(12), e32361. <https://doi.org/10.7759/cureus.32361>
- Kyrie, V., & Broudy, D. (2022a). Cyborgs R Us: The bio-nano panopticon of injected bodies? *International Journal of Vaccine Theory, Practice, and Research*, *2*(2), 355–383. <https://doi.org/10.56098/ijvtpr.v2i2.49>
- Kyrie, V., & Broudy, D. (2022b). The COVID-19 concoction: A recipe for successful psychological operations. *Propaganda in Focus*, *7901*. <https://propagandainfocus.com/the-covid-19-concoction-a-recipe-for-successful-psychological-operations/>
- Latypova, A. (Sasha) (Director). (2022a, December 2). *Intent to Harm—Evidence of the Conspiracy to Commit Mass Murder by the US DOD, HHS, Pharma Cartel*. <https://www.bitchute.com/video/8ftbShzrkj19/>
- Latypova, A. (Sasha). (2022b, December 6). mRNA Injections as a Dual-Use Technology – Assessment of Threat of Misuse as Biological and Chemical Weapons [Substack newsletter]. *Due Diligence and Art*. https://sashalatyova.substack.com/p/mrna-injections-as-a-dual-use-technology?utm_campaign=post_embed
- Latypova, A. (Sasha). (2022c, December 28). The role of the US DoD (and their co-investors) in the “COVID countermeasures” enterprise [Substack newsletter]. *Due Diligence and Art*. https://sashalatyova.substack.com/p/the-role-of-the-us-dod-and-their?publication_id=870364&isFreemail=true
- Lee, S. H. (2021). Toll-like Receptor 9 Agonists in HPV Vaccine Gardasil9. *International Journal of Vaccine Theory, Practice, and Research*, *1*(2), 295–317. <https://doi.org/10.56098/ijvtpr.v1i2.13>
- Lee, Y. M., Park, S., & Jeon, K.-Y. (2021). Foreign materials in blood samples of recipients of COVID-19 vaccines. *International Journal of Vaccine Theory, Practice, and Research*, *2*(1), 249–265. <https://doi.org/10.56098/ijvtpr.v2i1.37>
- Lin, J. H., Walter, P., & Yen, T. S. B. (2008). Endoplasmic reticulum stress in disease pathogenesis. *Annual Review of Pathology*, *3*, 399–425. <https://doi.org/10.1146/annurev.pathmechdis.3.121806.151434>
- Liu, J. J., Bell, C. M., Matelski, J. J., Detsky, A. S., & Cram, P. (2017). Payments by US pharmaceutical and medical device manufacturers to US medical journal editors: Retrospective observational study. *BMJ*, *359*, j4619. <https://doi.org/10.1136/bmj.j4619>
- Luján, L., Pérez, M., Salazar, E., Álvarez, N., Gimeno, M., Pinczowski, P., Irusta, S., Santamaría, J., Insausti, N., Cortés, Y., Figueras, L., Cuartielles, I., Vila, M., Fantova, E., & Chapullé, J. L. G. (2013). Autoimmune/autoinflammatory syndrome induced by adjuvants (ASIA syndrome) in commercial sheep. *Immunologic Research*, *56*(2–3), 317–324. <https://doi.org/10.1007/s12026-013-8404-0>
- Moynihan, R., Albarqouni, L., Nangla, C., Dunn, A. G., Lexchin, J., & Bero, L. (2020). Financial ties between leaders of influential US professional medical associations and industry: Cross sectional study. *BMJ-British Medical Journal*, *369*, m1505. <https://doi.org/10.1136/bmj.m1505>
- Nance, K. D., & Meier, J. L. (2021). Modifications in an Emergency: The Role of N1-Methylpseudouridine in COVID-19 Vaccines. *ACS Central Science*, *7*(5), 748–756. <https://doi.org/10.1021/acscentsci.1c00197>
- Nature Computational Science. (2022). Pioneering quantum information science. *Nature Computational Science*, *2*(11), Article 11. <https://doi.org/10.1038/s43588-022-00368-0>
- Oller, J. (2022). *The Human Language Capacity: An Introduction for Parents, Teachers, and University Students*. https://www.researchgate.net/publication/364355827_The_Human_Language_Capacity_An_Introduction_for_Parents_Teachers_and_University_Students
- Oller, J., & Shaw, C. A. (2020). Brave new world: Omens and opportunities in the age of COVID-19. *International Journal of Vaccine Theory, Practice, and Research*, *1*(1), 1–10. <https://doi.org/10.56098/ijvtpr.v1i1.2>
- Oller, J., Shaw, C., Tomljenovic, L., Ngare, W., Karanja, S., Pillette, J., & Clement, F. (2020). Addendum to “HCG Found in Tetanus Vaccine”: Examination of Alleged “Ethical Concerns” Based on False Claims by Certain of Our Critics. *International Journal of Vaccine Theory, Practice, and Research*, *1*(1), 27–50. <https://doi.org/10.56098/ijvtpr.v1i1.3>
- Oller, J. W. (2010). The antithesis of entropy: Biosemiotic communication from genetics to human language with special emphasis on the immune systems. *Entropy*, *12*(4), 631–705. <https://doi.org/10.3390/e12040631>
- Oller, J. W. (2014a). Biosemiotic entropy: Concluding the series. *Entropy*, *16*(7), 4060–4087. <https://doi.org/10.3390/e16074060>
- Oller, J. W. (Ed.). (2014b). *Biosemiotic Entropy. Special Issue of Entropy*. 12–14. https://www.mdpi.com/journal/entropy/special_issues/biosemiotic_entropy

- Oller, J. W. (2021a). Buying and Selling with the “Mark of the Beast.” *International Journal of Vaccine Theory, Practice, and Research*, 1(2), 318–364. <https://doi.org/10.56098/ijvtpr.v1i2.20>
- Oller, J. W. (2021b). Weaponized pathogens and the SARS-CoV-2 pandemic. *International Journal of Vaccine Theory, Practice, and Research*, 1(2), 172–208. <https://doi.org/10.56098/ijvtpr.v1i2.16>
- Oller, J. (2022). *The Human Language Capacity: An Introduction for Parents, Teachers, and University Students*. https://www.researchgate.net/publication/364355827_The_Human_Language_Capacity_An_Introduction_for_Parents_Teachers_and_University_Students
- Oller, J. W., & Oller, S. D. (2010). *Autism: The Diagnosis, Treatment, & Etiology of the Undeniable Epidemic* (1st ed.). Jones & Bartlett Publishers. https://www.researchgate.net/publication/251231780_Autism_The_diagnosis_treatment_and_etiology_of_the_undeniable_epidemic_Sudbury_MA_Jones_and_Bartlett_Publishers
- Oller, J. W., Oller, S. D., & Badon, L. C. (2010). *Cases: Introducing Communication Disorders Across the Life Span*. Plural Publishing, Inc. https://play.google.com/store/books/details/Cases_Introducing_Communication_Disorders_Across_?id=bnU0BwAAQBAJ&gl=US
- Oller, J. W., & Santiago, D. (2022). All cause mortality and COVID-19 injections: Evidence from 28 weeks of Public Health England “COVID-19 vaccine surveillance reports.” *International Journal of Vaccine Theory, Practice, and Research*, 2(2), 301–319. <https://doi.org/10.56098/ijvtpr.v2i2.42>
- Oller, J. W., & Shaw, C. A. (2019). From superficial damage to invasion of the nucleosome: Ranking of morbidities by the biosemiotic depth hypothesis. *International Journal of Sciences*, 8(06), 51–73. <https://doi.org/10.18483/ijSci.2069>
- Oller, J. W., Shaw, C. A., Tomljenovic, L., Karanja, S. K., Ngare, W., Clement, F. M., & Pillette, J. R. (2017). HCG found in WHO tetanus vaccine in Kenya raises concern in the developing world. *OALib*, 04(10), 1–30. <https://doi.org/10.4236/oalib.1103937>
- Omnibus Autism Proceeding. (2022). In *Wikipedia*. https://en.wikipedia.org/w/index.php?title=Omnibus_Autism_Proceeding&oldid=1084541546
- Peirce, C. S. (1897). The logic of relatives. *The Monist*, 7(2), 161–217. <http://archive.org/details/jstor-27897407>
- Perez, J.-C., Moret-Chalmin, C., & Montagnier, L. (2023). Emergence of a new Creutzfeldt-Jakob Disease: 26 cases of the human version of Mad-Cow Disease, a few days after a COVID-19 injection. *International Journal of Vaccine Theory, Practice, and Research*, 3(1), 727–773. <https://doi.org/10.56098/ijvtpr.v3i1.66>
- Petrik, M. S., Wong, M. C., Tabata, R. C., Garry, R. F., & Shaw, C. A. (2007). Aluminum adjuvant linked to Gulf War Illness induces motor neuron death in mice. *NeuroMolecular Medicine*, 9(1), 83–100. <https://doi.org/10.1385/NMM:9:1:83>
- Pharmaceutical Technology. (2022, October 3). Covid-19 Vaccination Tracker. *Pharmaceutical Technology*. <https://www.pharmaceutical-technology.com/covid-19-vaccination-tracker/>
- Phillips, J. (2022, October 11). *Pfizer Exec Concedes COVID-19 Vaccine Was Not Tested on Preventing Transmission Before Release*. *Www.Theepochtimes.Com*. https://www.theepochtimes.com/mkt_app/pfizer-exec-concedes-covid-19-vaccine-was-never-tested-on-preventing-transmission_4788577.html
- Provost, P. (2023). The blind spot in COVID-19 vaccination policies: Under-reported adverse events. *International Journal of Vaccine Theory, Practice, and Research*, 3(1), 707–726. <https://doi.org/10.56098/ijvtpr.v3i1.65>
- Quantum entanglement. (2020). In *Wikipedia*. https://en.wikipedia.org/w/index.php?title=Quantum_entanglement&oldid=934375920
- Russell, B. (1919). On propositions: What they are and how they mean. In *Proceedings of the Aristotelian Society; also reprinted in Oller, 1989, pp. 135-174*. (Vol. 2, pp. 1–43). https://www.researchgate.net/publication/251231684_Language_and_experience_Classic_pragmatism_Lanham_Maryl_and_University_Press_of_America#fullTextFileContent
- Santiago, D. (2022a). A partial answer to the question posed by David A. Hughes, Phd, in the article: “What is in the so-called COVID-19 ‘vaccines’? Part 1: evidence of a global crime against humanity.” *International Journal of Vaccine Theory, Practice, and Research*, 2(2), 587–594. <https://doi.org/10.56098/ijvtpr.v2i2.56>
- Santiago, D. (2022b). Playing Russian Roulette with every COVID-19 injection: The deadly global game. *International Journal of Vaccine Theory, Practice, and Research*, 2(2), 619–650. <https://doi.org/10.56098/ijvtpr.v2i2.36>

- Schwab, K., & Malleret, T. (2020). *COVID-19: The Great Reset*. ISBN Agentur Schweiz. https://www.amazon.com/s?k=COVID-19%3A+The+Great+Reset&crd=NYIC9D2H5PEC&sprefix=covid-19+the+great+reset%2Caps%2C80&ref=nb_sb_noss_2
- Seneff, S., & Nigh, G. (2021). Worse Than the Disease? Reviewing Some Possible Unintended Consequences of the mRNA Vaccines Against COVID-19. *International Journal of Vaccine Theory, Practice, and Research*, 2(1), 38–79. <https://doi.org/10.56098/ijvtpr.v2i1.23>
- Seneff, S., Nigh, G., Kyriakopoulos, A. M., & McCullough, P. A. (2022). Innate immune suppression by SARS-CoV-2 mRNA vaccinations: The role of G-quadruplexes, exosomes, and MicroRNAs. *Food and Chemical Toxicology*, 164, 113008. <https://doi.org/10.1016/j.fct.2022.113008>
- Shaw, C. A. (2017). *Neural Dynamics of Neurological Disease*. John Wiley & Sons, Inc. <https://doi.org/10.1002/9781118634523.refs>
- Shaw, C. A. (2020). Weaponizing the peer review system. *International Journal of Vaccine Theory, Practice, and Research*, 1(1), 11–26. <https://doi.org/10.56098/ijvtpr.v1i1.1>
- Shaw, C. A. (2021). *Dispatches from the Vaccine Wars*. Skyhorse Publishing. <https://www.simonandschuster.com/books/Dispatches-from-the-Vaccine-Wars/Christopher-A-Shaw/Children-s-Health-Defense/9781510758506>
- Shaw, C. A., Li, D., & Tomljenovic, L. (2014). Are there negative CNS impacts of aluminum adjuvants used in vaccines and immunotherapy? *Immunotherapy*, 6(10), 1055–1071. <https://doi.org/10.2217/imt.14.81>
- Silver, S. (2015). Laboratory-acquired lethal infections by potential bioweapons pathogens including Ebola in 2014. *FEMS Microbiology Letters*, 362(1), 1–6. <https://doi.org/10.1093/femsle/fnu008>
- Smith, R. (2005). Medical Journals Are an Extension of the Marketing Arm of Pharmaceutical Companies. *PLOS Medicine*, 2(5), e138. <https://doi.org/10.1371/journal.pmed.0020138>
- Tarski, A. (1941). The concept of truth in formalized languages. *Journal of Symbolic Logic*, 6, 73–89. <https://www.scribd.com/document/144346536/The-Concept-of-Truth-in-Formalized-Languages>
- Tarski, A. (1949). The semantic conception of truth. In H. Feigl & W. Sellars (Eds.), *Readings in Philosophical Analysis* (pp. 341-374). Appleton. <https://www.jstor.org/stable/2102968>
- The Nobel Prize in Physics 2022*. (n.d.). NobelPrize.Org. Retrieved October 7, 2022, from <https://www.nobelprize.org/prizes/physics/2022/press-release/>
- Tomljenovic, L., & Shaw, C. A. (2012). Mechanisms of aluminum adjuvant toxicity and autoimmunity in pediatric populations. *Lupus*, 21(2), 223–230. <https://doi.org/10.1177/0961203311430221>
- US Government Accounting Office (US GAO). (2021, February 11). *Operation Warp Speed: Accelerated COVID-19 Vaccine Development Status and Efforts to Address Manufacturing Challenges* | U.S. GAO. <https://www.gao.gov/products/gao-21-319>
- US Public Health and Human Services. (n. d.). *VAERS - Report an Adverse Event*. <https://vaers.hhs.gov/reportevent.html>
- Versteeg, G. A., van de Nes, P. S., Bredenbeek, P. J., & Spaan, W. J. M. (2007). The coronavirus spike protein induces endoplasmic reticulum stress and upregulation of intracellular chemokine mRNA concentrations. *Journal of Virology*, 81(20), 10981–10990. <https://doi.org/10.1128/JVI.01033-07>

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