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Central Venous Thrombosis of the Brain After SARS-CoV-2 Infection and mRNA Vaccination

Neurologic Disaster is Even Worse After Injection

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Proponents of COVID-19 mass vaccination acknowledge that similar disastrous outcomes occur with both SARS-CoV-2 infection and the COVID-19 vaccines (myocarditis, blood clots, neurological problems). They position a tradeoff and suggest you should risk it with the vaccine in hopes its lower than that of the infection. Since 94% of Americans have had the COVID-19, its water under the bridge for the infection. Early therapy reduces the invasive systemic manifestations of the illness and markedly reduces hospitalization and death including from complications. With vaccination its a different story, the full force of engineered Spike protein is felt in the body with each shot and per case, the severity of the side effect is far worse than that with COVID-19.

Tu, et al illustrated this principle while analyzing central venous thrombosis which is a blood clot in the major vein of the brain which is a medical emergency requiring, hospitalization, intravenous or subcutaneous blood thinners, serial imaging, observation and in some cases surgery. Tu attempted to divide cases by large denominators to minimize risk; that is invalid in safety research since not all cases can be found particularly fatal ones without an autopsy. The important findings from Tu are in the tables. Central venous thrombosis after vaccination was a catastrophe with more cases, greater need for therapy, more brain surgery, and higher degrees of neurologic impairment at discharge for those who took the mRNA vaccine.

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Original Investigation | Neurology

Incidence of Cerebral Venous Thrombosis Following SARS-CoV-2 Infection vs mRNA SARS-CoV-2 Vaccination in Singapore

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Table 2. Description of Patients With Cerebral Venous Thrombosis After SARS-CoV-2 Infection

Sex/age	Comorbidities	Respiratory symptoms	Positive COVID-19 tests	Neurological symptoms	Days from COVID-19 symptoms	Location of CVT	Platelet count, per 10^9/L (range 150-450)	D-dimer (range <0.5μg/mL)	Normal thrombotic tests	Abnormal thrombotic tests	Treatment	mRS on discharge
M/31-40 y	None	None	Serology only	Seizures	NA	SSS, left transverse sinus, left sigmoid sinus, left IJV	265	4.38	Protein C, Protein S, anti-thrombin III, ACL, LAC, B2GP1, Factor V Leiden, G20210A	None	Warfarin	1
M/31-40 y	None	None	PCR	Headache, vomiting	NA	Right posterior condylar vein, right sigmoid sinus, right proximal IJV	305	4.3	ACL	None	None (had fracture of temporal bone)	0
M/31-40 y	None	Cough, pleuritic chest pain, fever	PCR	Headache	3	Left transverse and sigmoid sinus	187	<0.19	ACL	None	Dabigatran	0
M/21-30 y	None	None	Serology only	Headache	NA	SSS, transverse sinus, torcula, sigmoid sinuses	214	Not done	ACL, LAC, B2GP1	None	LMWH	1
M/31-40 y	None	None	PCR	Seizure	NA	Left transverse and sigmoid sinuses, left IJV	255	4.56	Protein C, antithrombin III, ACL, B2GP1	Protein S 53% (low) homocysteine elevated, LAC present	Surgical decompression, heparin or warfarin	6
M/21-30 y	Smoker	None	Serology only	Headache	NA	SSS, right transverse sinus, right sigmoid sinus, right IJV, bilateral cortical veins	338	<0.5	Protein C, Protein S, anti-thrombin III, ACL, LAC, B2GP1	None	Heparin or LMWH or warfarin	1

Abbreviations: ACL, anticardiolipin antibodies; B2GPI, B2 glycoprotein I; CVT, cerebral venous thrombosis; IJV, internal jugular vein; G20210A, guanine substitution with adenine at position 20210 at the prothrombin gene; LAC, lupus anticoagulant; LMWH, low molecular weight heparin; M, male; mRS, modified Rankin scale; NA, not applicable; PCR, polymerase chain reaction; SARS-CoV-2, Severe Acute Respiratory Syndrome Coronavirus 2; SSS, superior sagittal sinus.

SI conversion factors: To convert platelet counts to $\times 10^3$/μL, multiply by 1.0; to convert d-dimer to nmol/L, multiply by 5.476.

Table 3. Description of Cerebral Venous Thrombosis Following Messenger RNA SARS-CoV-2 Vaccination

Vaccine received	Sex/age, years	Co-morbidities	Presenting symptoms	Days from 1st dose of vaccine	Days from 2nd dose of vaccine	Location of CVT	Platelet count, per 10^9/L (range 150-450)	Normal thrombotic tests	Abnormal thrombotic tests	COVID-19 test	Treatment	mRS on discharge
BNT162b2	F/61-70 y	Hypertension	Headache	10	9	Right transverse, sigmoid, IJV	383	HIPA, Protein C, Protein S, anti-thrombin III, ACL, LAC, B2GP1	None	PCR negative	Surgical decompression, heparin or warfarin	5
BNT162b2	M/71-80 y	Hypertension, hyperlipidemia, diabetes	Headache	28	7	Right transverse and sigmoid sinuses	292	LAC present, ACL, B2GP1, Protein C protein S	None	PCR negative	Heparin or warfarin	3
BNT162b2	F/51-60 y	Hypertension, hyperlipidemia, diabetes, TIA, family history of unprovoked PE	Right sided weakness and sensory loss, Seizure	29	8	SSS, right transverse sinus, right sigmoid sinus, right IJV, bilateral cortical veins	250	Protein C, Protein S, ACL, LAC, B2GP1	Antithrombin III = 55% (normal range: 80%-120%)	Not performed	LMWH or warfarin	2
BNT162b2	M/51-60 y	Hyperlipidemia	Headache, left sided weakness and vomiting	22	1	Right transverse, sigmoid sinus, IJV	300	Anti-PF4 antibody, Protein C, Protein S, anti-thrombin III, ACL, LAC, B2GP1	None	PCR and serology negative	LMWH or warfarin	2
BNT162b2	M/61-70 y	Hypertension, hyperlipidemia, diabetes	Seizures and left upper limb weakness	33	11	SSS, right transverse sinus, bilateral sigmoid sinuses	333	Protein C, Protein S, anti-thrombin III, ACL, LAC	None	PCR negative	LMWH warfarin	0
BNT162b2	M/51-60 y	DVT, scar epilepsy, encephalitis, hyperlipidemia	Headache, right sided weakness and seizure	19	NA	SSS, cortical veins	212	HIPA, Protein C, Protein S, ACL, B2GP1	Anti-PF4 antibody positive, Anti-thrombin III = 73% (normal range: 80%-130%).	PCR negative	Heparin or LMWH or dabigatran	3
mRNA-1273	M/41-50 y	Smoker	Right sided weakness and seizure	39	11	SSS, left transverse and sigmoid sinuses	224	Protein S, ACL, LAC, B2GP1 normal	Anti-thrombin III = 79% (normal range: 93%-125%), Protein C = 66% (normal range: 83%-144%) D-dimer = 1.57 (normal range: <0.5ug/mL)	PCR and serology negative	SSS thrombectomy Heparin or LMWH or warfarin	2
mRNA-1273	M/61-70 y	Hypertension, hyperlipidemia, ischemic stroke	Right sided weakness	29	1	Right frontal superior cerebral vein	244	LAC present, Protein C, Protein S, anti-thrombin III, ACL, B2GP1	None	PCR negative	LMWH	4
mRNA-1273	M/51-60 y	None	Headache, vomiting, diplopia	23	NA	SSS, right transverse and sigmoid sinus	251	HIPA, Protein C, Protein S, anti-thrombin III, ACL, LAC	None	PCR negative	LMWH then warfarin	0

Abbreviations: ACL, anticardiolipin antibodies; B2GPI, B2 glycoprotein I; CVT, cerebral venous thrombosis; DVT, deep vein thrombosis; HIPA, heparin-induced platelet activation; ICH, intracranial hemorrhage; IJV, internal jugular vein; LAC, lupus anticoagulant; LMWH, low molecular weight heparin; mRS, modified Rankin scale; PCR, polymerase chain reaction; PF4, platelet factor 4 reactive antibodies; PE, pulmonary embolism; SARS-CoV-2, Severe Acute Respiratory Syndrome Coronavirus 2; SSS, superior sagittal sinus; TIA, transient ischemic attack.

SI conversion factor: To convert platelet counts to $\times 10^3$/μL, multiply by 1.0.

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Under no circumstances could someone accept a blood clot in the brain with the vaccine in the hopes of not getting COVID-19. That tradeoff is untenable and yet another reason why vaccine promoters have lost trust from a discerning public.

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by Michel Chossudovsky

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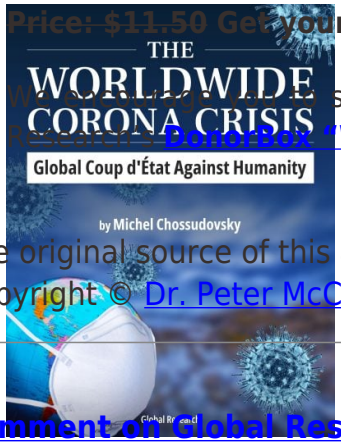

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