

# Experiment in Progress: Neurological Damage from the mRNA Vaccine

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*In [December of 2019](#), COVID-19 made its world debut and took center stage as “the deadly contagion.” The strategy to build fear was the key that aligned world governments as one united force. For the first time in history, a virus became the trigger for the acceptance of a global vaccine.*

Ironically, at that time, the coronavirus had not been isolated.

## The Bluff

“Hegelian dialectic, or problem, reaction, solution. This method basically involves fabricating or intensify a problem, offering a draconian solution, then settling for a “compromise” that nevertheless furthers the intended goal.” — Jim Marrs, author

To this day, Coronavirus (Cov-19), has not been isolated.

Buried in [a PDF CDC document on page 41](#), the CDC admits that,

“no quantified virus isolates of the 2019-nCoV are currently available”, and used a genetically modified human lung alveolar adenocarcinoma cell culture to, “mimic clinical specimen.”

[See Global Research's coverage of this issue published at the outset of the corona crisis in January February 2020, see [Michel Chossudovsky's E-book, Chapter III](#), pages 32-34]

As it turns out, the only isolate is a lab-produced and [patented SARS Cov-2](#), part of the experimental mRNA injections created [as gene therapy](#).

Thus, is the COVID-19 strategy based on a lie? A September 2020 [letter to the editor](#) in the *British Medical Journal* connects some dots and calls out the bluff:

Rapid Response:

Re: Covid-19: Where is the virus?

Dear Editor

We are told that the virus is everywhere – in the air, in our breath, on fomites, trapped in masks – yet public health authorities seem not to be in possession of any cultivable clinical samples of the offending pathogen.

In March 2020, the World Health Organisation instructed authorities not to look for a virus but to rely instead on a genome test, the RT-PCR, which is not specific for SARS-CoV-2 [\(1\)](#) [\(2\)](#).

However, RT-PCR does not distinguish between infectious and non-infectious virus. Propagating virus from clinical samples confirms the presence of infectious virus but is not widely available (and) requires biosafety level 3 facilities” [\(4\)](#).

It appears, therefore, that we have public health bodies without clinical samples, a test which is non-specific and does not distinguish between infectivity and non-infectivity, a requirement for biosafety level 3 facilities to even look for a virus, yet we are led to believe that it is up all our noses.

So, where is the virus?

## The Set Up

When world governments synchronized to fight the “deadly coronavirus,” they unilaterally agreed to deploy experimental injections without any verifiable threat and only limited, short term data. The [medical narrative](#) explained:

The drama of the pandemic has forced the scientific community to accelerate the development and commercialization of vaccines, thereby enhancing the phases of active surveillance.

In 2019, then-president Trump paved the way for the U.S. deployment of experimental vaccines on a trusting public via two Executive Orders, bypassing Congress and the legal process: a [September 2019 Executive Order](#) and a December 2020 [Executive Order](#).

On March 20, 2020, during a [White House briefing on COVID](#), Secretary Mike Pompeo disclosed COVID as *a live exercise*.

We’re in a – we’re in a live exercise here – to get this right. – Secretary Mike Pompeo

In February 2021, [The U of Chicago Medicine](#) warned people with autoimmunity about experimental vaccines on its website, but doctors did not get the memo:

No data exists on the (COVID) vaccines’ effectiveness in immunocompromised patients because they weren’t included in the initial clinical trials. This is true of all vaccine trial studies.

In April 2023, buried in [correspondence to vaccine makers](#), the [FDA disclosed that it required years of additional safety studies on all mRNA vaccines thru 2027](#). Thus, the FDA

only *renewed* Pfizer's Emergency Use Authorization (EUA) COVID-19 vaccine. The formal FDA approval was for BioNTech's Comirnaty vaccine, which is used in Europe, not in the U.S.

Throughout the [live exercise](#), State governors declared illegal ["emergency" mandates](#) onto an unsuspecting public. People were ignorant of the consequences of a vaccine that had never been formally tested. Most people never knew they signed on as subjects of an ongoing governmental experiment.

In short order, [fifteen COVID-19 injections were granted "emergency-use authorization."](#) They were not FDA-approved. The CDC and FDA rushed the injections to market before the completion of conventional phases of clinical trials. Never before had science been so propagandized, and health been so ignored.

Looking back, had a [military operation been disguised](#) as a Public Health threat? Did the people who perceived a threat know that vaccine makers came with [criminal records](#) and full immunity for any injuries or deaths resulting from their products?

Is this *live exercise* [a crime against humanity?](#)

## Tracking Collateral Damage

After the mRNA therapies were rolled out, The World Health Organization (WHO), set up tracking for adverse events (AEs), using its [VigiBase global database](#). Unfortunately, the VigiBase system is a passive system, dependent on national centers for the timeliness, completeness, and quality of reports.

VigiBase is a global pharmacovigilance database established in 1978 and consists of over 20 million reports of suspected adverse events reported since its origin by its 130 member countries which represent 90% of the world population

Using the VigiBase, one 2022 study published in the Journal [Cureus](#), analyzed neurological AEs between December 15, 2020 to January 24, 2021. [The authors wrote:](#)

In this period, 103,954 adverse events were reported from 30,532 subjects who were administered the COVID-19 vaccine. Out of 103,954, 19,529 AEs were related to clinical events and investigations related to the neurological system.

The following AEs are only a few that are considered to be [associated with the administration of the experimental mRNA injections:](#)

ageusia, allodynia, anesthesia, anosmia, aura, balance disorders, [Bell's palsy](#), burning sensation, cervicobrachial syndrome, [cerebral venous sinus thrombosis](#), cluster headache, dizziness, postural dizziness, dysgeusia, exertional headache, facial paralysis, facial paresis, facial spasm, febrile convulsion, head discomfort, headache, hemiparaesthesia, hemiparesis, hyperaesthesia, hypersomnia, hypoaesthesia, hypogeusia, hyperresponsive to stimuli, hyposomnia, ischemic stroke, lethargy, loss of consciousness, migraine, migraine with aura, monoparesis, neuralgia, paraesthesia, paresis, parosmia, petit mal epilepsy, poor sleep quality, presyncope, seizure, sensory disturbance, sensory loss, sinus headache, syncope, taste disorder, tension headache, transient global amnesia, transient ischemic attack, tremor, tunnel vision.

Frequently observed adverse events following vaccinations were [headache](#), [vertigo/dizziness](#), [paresthesia](#), hypoesthesia, lethargy, and migraine.

The U.S. uses a similar, passive reporting system called the [VAERS Reporting System](#), overseen by the CDC and FDA. However, only about [1% of injuries/deaths are ever reported](#). This means that 5000 reports of death translate to 500,000 deaths.

## History of Vaccine Injuries

With vaccination, we traded infectious disease for autoimmune disease. – Anonymous

Since the introduction of vaccination, there has been a steady increase in the incidence of autoimmune diseases. Concomitantly, the incidence of most infectious diseases has declined. Some people call this dynamic [The Hygiene Hypothesis](#). We are too clean for our own good. And it all began with the idea to kill off our microbes to prevent natural infections, which builds immunity.

Unfortunately, the rise in vaccination has equaled a rise autoimmune disease. This has been known since 2000. Once called [Vacinosis](#), the name later changed to The ASIA Syndrome.

[A.S.I.A. is](#) “Autoimmune (Auto-inflammatory) Syndrome Induced by Adjuvants.” Hint: Adjuvants are integral to vaccines. The result is the body’s creation of autoantibodies, or antibodies that attack Self, also known as autoimmune disease.

Since A.S.I.A. was [first noted in 2011](#), the connection has been ignored by medical professionals. Also ignored? Vaccines have also been associated with CNS [demyelinating syndromes](#), which affect the nervous system. Again, this is not discussed in medical circles.

## Neurological Damage from mRNA

New vaccine studies on the experimental mRNA injections show damage to all biological systems. As expected, there is COVID-19-[vaccine-induced autoimmunity](#). But people are now showing a dysregulation of the immune system and the production of myelin sheath antigens that target neurons and the nervous system.

Myelin sheath antigens contribute to demyelinating diseases and disorders, with hard-to-pronounce names and acronyms. These include: Multiple Sclerosis (MS), Acute Disseminated, Encephalomyelitis (ADEM), Baló’s Disease (Concentric Sclerosis), Charcot-Marie-Tooth Disease (CMT), Guillain-Barre Syndrome (GBS), HTLV-I Associated Myelopathy (HAM), Neuromyelitis Optica (Devic’s Disease), Acute Haemorrhagic Leucoencephalitis, Primary Sjögren’s syndrome (SS), Neuromyelitis Optica Spectrum Disorder (NMOSD)

Demyelinating Diseases: any condition that causes damage to the protective covering (myelin sheath) that surrounds nerve fibers in your brain, the nerves leading to the eyes (optic nerves) and spinal cord.

The [most common symptoms of demyelinating disorders](#) are:

- Vision loss, double vision, blurred vision
- Eyesight problems, eye pain
- Muscle spasms
- Muscle weakness

- Muscle stiffness
  - Changes in how well your bladder and bowels work
  - Sensory changes
  - [Vertigo, dizziness](#)
  - Fever
  - Low energy
  - Headache, migraine
- 
- Nausea and vomiting
  - Uncontrolled hiccups
  - Confusion
  - Change in personality
  - Irritation
  - Trouble with coordination
  - Weakness in legs, ankles, feet/less feeling
  - Loss of muscle mass in legs, ankles
  - Trouble talking or understanding information
  - Trouble moving face, speaking, or chewing
  - Trouble walking, running, or climbing stairs
  - Trouble raising legs
  - Tripping or falling/Coordination problems
  - Memory loss
  - Weight loss
  - Seizures
  - Paralysis
  - Low back pain
  - Tremors
  - Sensitivity to touch
  - Bowel and bladder problems/constipation
  - Tingling in fingers, toes

## The Studies

As expected, the [list of vaccine-induced neurological damage](#) from the medical literature continue to grow on every continent:

1.. [Neurological Immune-Related Adverse Events After COVID-19 Vaccination: A Systematic Review](#) *J Clin Pharmacol*. March 2022

The most common neurological event was facial nerve palsy (50% of all events). Other less frequently reported events included the reactivation of herpes zoster, Guillain-Barre syndrome, other demyelinating diseases, and neuropathy.

2. [A rare presentation of undiagnosed multiple sclerosis after the COVID-19 vaccine](#) *Case Reports. J Community Hosp Intern Med Perspect*. November 2021

We present a rare case of a 32-year-old patient who presented with symptoms and suggestive of MS a few days after receiving the COVID vaccine.

3. [Sudden sensorineural hearing loss after COVID-19 vaccination](#) *Case Reports. Int J Infect*

Otolaryngologic adverse events after COVID-19 vaccination were reported, including several cases of sudden sensorineural hearing loss (SSNHL). We report three patients with SSNHL within three days after COVID-19 vaccination and consider an association between them.

4. [Multiple Sclerosis Disease-: Implications on the Risk of Infection and Future Vaccination](#) *CNS Drugs. September 2020*

When the future SARS-CoV-2 vaccine becomes available, patients with multiple sclerosis should be advised that certain therapies may interfere with mounting a protective immune response to the vaccine and that serological confirmation of a response may be required after vaccination.

Also, [Multiple sclerosis relapse after COVID-19 vaccination: A case report-based systematic review](#) *J Clin Neurosci. October 2022.*

5. [Covid-19 vaccination can induce multiple sclerosis via cross-reactive CD4+ T cells recognizing SARS-CoV-2 spike protein and myelin peptides](#) *World Health Organization, 2022*

[Qiu et al.](#) isolated spike protein-activated T-cells from the blood and cerebrospinal fluid of the two patients with post-mRNA vaccine multiple sclerosis. They then screened such activated T-cells against a range of multiple sclerosis-related proteins. They found that such activated T-cells also reacted with myelin sheath proteins, namely: myelin basic protein (MBP), myelin oligodendrocyte glycoprotein, (MOG), and proteolipid protein (PLP).

6. [The pituitary gland in SARS-CoV-2 infections, vaccinations, and post-COVID syndrome](#) *Elsevier. December 2023*

This review shows that the pituitary gland can be involved in SARS-CoV-2 infections and can be a target of side effects to SARS-CoV-2 vaccinations and of long-COVID.

7. [A review of neurological side effects of COVID-19 vaccination.](#) *European Journal of Medical Research. February 2023*

vaccination can have an adverse event, especially on nervous system. The most important and common complications are cerebrovascular disorders including cerebral venous sinus thrombosis, transient ischemic attack, intracerebral hemorrhage, ischemic stroke, and demyelinating disorders including transverse myelitis, first manifestation of MS, and neuromyelitis optica.

8. [Acute Vertigo After COVID-19 Vaccination: Case Series and Literature Review](#), *Front Med (Lausanne). January 2022*

In the period from May to July 2021, we evaluated 33 patients (mean age  $54.3 \pm 14.1$ ) with "acute vertigo" post COVID-19 vaccination. Symptoms included 16 patients (48.5%) with objective vertigo, 14 patients (42.4%) with subjective vertigo, and 3 patients (9.1%) with dizziness.

9. [Spectrum of neurological complications following COVID-19 vaccination.](#) *Neurological*

The most devastating neurological post-vaccination complication is cerebral venous sinus thrombosis. Cerebral venous sinus is frequently reported in females of childbearing age, generally following adenovector-based vaccination. Another major neurological complication of concern is Bell's palsy that was reported dominantly following mRNA vaccine administration. Acute transverse myelitis, acute disseminated encephalomyelitis, and acute demyelinating polyneuropathy are other unexpected neurological adverse events that occur as result of phenomenon of molecular mimicry.

10. [Neurological complications after first dose of COVID-19 vaccines and SARS-CoV-2 infection](#) *Nature Medicine. October 2021*

There was a substantially higher risk of all neurological outcomes in the 28 days after a positive SARS-CoV-2 test including Guillain-Barré syndrome (IRR, 5.25; 95% CI: 3.00-9.18).

11. [Otologic Manifestations After COVID-19 Vaccination: The House Ear Clinic Experience](#) *Otol Neurotol. October 2021*

Symptoms included 25 patients (83.3%) with hearing loss, 15 (50%) with tinnitus, eight (26.7%) with dizziness, and five (16.7%) with vertigo.

12. [COVID-19 vaccination unveiling subclinical Sjögren's syndrome](#) *Clinical and Experimental Rheumatology. September 2021*

We report the first case of subclinical SS to become clinically apparent after severe immunethrombocytopenia (ITP) following administration of the first COVID-19 vaccine dose. [Note a [2000 study](#) in the journal *Arthritis Rhum* showed Sjogren's syndrome occurring after Hep B vaccination].

13. [Side effects of BNT162b2 mRNA COVID-19 vaccine: A randomized, cross-sectional study with detailed self-reported symptoms from healthcare workers](#)

Commonly reported symptoms (occurrence in descending order) were soreness, fatigue, myalgia, headache, chills, fever, joint pain, nausea, muscle spasm, sweating, dizziness, flushing, feelings of relief, brain fogging, anorexia, localized swelling, decreased sleep quality, itching, tingling, diarrhoea, nasal stuffiness and palpitations.

14. [Vestibular neuritis after COVID-19 vaccination](#) *Case Reports. Hum Vaccin Immunother. December 2021*

Vestibular neuritis (VN) is an acute vestibular syndrome that causes acute and spontaneous vertigo due to unilateral vestibular deafferentiation, leading to nausea or vomiting and unsteadiness that can last from days to weeks. Reactivation of latent type 1 herpes simplex virus, autoimmune disorders, and microvascular ischemia are hypothesized to be etiologies.

15. [Watch out for neuromyelitis optica spectrum disorder after inactivated virus vaccination for COVID-19](#) *Neurol Sci. June 2021*



We reported for the first time a case of neuromyelitis optica spectrum disorder (NMOSD) that developed after the first dose of inactivated virus vaccine for COVID-19. The patient developed mild fever, vomiting, diarrhea, and cough after receiving the first dose of inactivated virus vaccine. Two months later, she experienced dizziness and unsteady walking. MRI scanning of the brain revealed lesions in area postrema and bilateral hypothalamus, typical for NMOSD. Serum antibodies for AQP4, ANA, SSA, SSB, Ro-52, and p-ANCA were positive. The patient was diagnosed as AQP4-positive NMOSD with coexisting systemic autoimmunity.

16. [Acute Vertigo After COVID-19 Vaccination: Case Series and Literature Review](#) *Front Med (Lausanne)*. January 2022

The 9 patients had an evoked nystagmus pathognomonic for benign paroxysmal positional vertigo; in the remaining 17 cases, peripheral vestibular dysfunction could be excluded and central disorder may be suggested. Due to the prevalence of nystagmus of non-peripheral origin, a central nervous system involvement could not be excluded.

17. [Neurological Immune-Related Adverse Events After COVID-19 Vaccination: A Systematic Review](#) *J Clin Pharmacol*. March 2022

This review compiles clinical data from reports of diagnosed immune-related neurological events that have occurred after COVID-19 vaccine administration....The most common neurological event was facial nerve palsy (50% of all events). Other less frequently reported events included the reactivation of herpes zoster, Guillain-Barre syndrome, other demyelinating diseases, and neuropathy. The underlying mechanism was hypothesized to be related to vaccine-induced type 1 interferon production leading to decreased tolerance of the myelin sheath antigens.

Many other studies show evidence of damage to the [cardiovascular system](#). In fact, More studies coming to light show how the glands of the [endocrine system](#), especially how the [thyroid](#) and [pituitary \(hyperpituitary\)](#) are affected, as well as the [gonads](#), with evidence of [premenstrual](#) and [menstrual changes](#) from [endocrine disruption](#). Additionally, [skin manifestations](#) and [oral anomalies](#) are documented.

## All In Your Head?

Some 'experts' claim that post-COVID symptoms are "all in your head," due to "stress."

While stress can, indeed, affect the severity of any imbalance in the body, it does not explain thousands of studies, evaluating hundreds of people who are experiencing direct effects, post-mRNA injection. Be aware of attitudes like this one, blaming the patient for "[perceived side effects](#)":

...if subjects are panicked, concerned, stressed or scared of the vaccination, their arteries will constrict and become smaller in and around the time of receiving the vaccine. This biological mechanism (the constriction of veins, arteries and vessels under mental stress) is the most likely cause for where there has been blood clots, strokes, heart attacks, dizziness, fainting, blurred vision, loss of smell and taste that may have been experienced shortly after vaccine administration.

Additionally, C19 vaccinated individuals who are completely asymptomatic have [the same blood clotting findings as the vaccine injured](#). Clotting is worsened upon exposure to 5G



frequencies or Pulsed Electromagnetic Fields (PEMF). [Read more about [The SMART™ Evolution](#)].

If symptoms are *all in your head*, then why are they being tracked and monitored through medical studies and databases? Why are new sequelae of symptoms being christened with [new names](#)? Why are new COVID treatments being publicized on TV?

Because, with the growth of [SARS-Cov-2 vaccine-induced disorders](#), pharmaceutical drug companies see growth in their own bottom lines using [new mRNA-based therapeutics](#)!

Never let a good crisis go to waste. – Winston Churchill

Perhaps doctors will prescribe antidepressants, too. But, the onslaught of new ‘OVID’ drug ads, such as [this 90-second commercial for PAXLOVID](#), is upon us.

Why not do away with new neuro-medical diagnoses and call it what it is; [Vacinosis](#)?

Could the world of science be creating a new normal? Is Sick the new Healthy? Is the media [weaponizing healthy people](#)?

By design, science is set up to quantify and commodify all human life, so quality of life is ignored.

If acceptable “adverse events” from medical products include personality changes, loss of sensitivity, loss of memory, loss of mobility, and loss of immunity, does that not equate to loss of identity, loss of freedom, and loss of humanity?

## Of Mice and Men

Most people know the book, “Of Mice and Men.” Fewer know that the book was based on a poem, titled, [To A Mouse, On Turning her up in her Nest, with the Plough, November 1785](#). by Robert Burns.

In scientific and experimental terms, there are often two subjects; mice and men.

Mice are small, easily frightened, easily defeated.

Men in are huge, fearless, deadly.

Mice = quiet and passive.

Men = outspoken, aggressive.

Reflect before you inject.

It is important to investigate the existing databases and do your own research. Know that the numbers are likely the tip of the AE iceberg since many injuries are never reported.

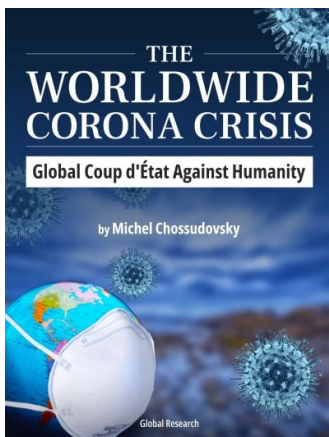
1. [VAERS](#)
2. [PubMed](#)
3. [Vaccine Injury Compensation Database](#)
4. [Europe PMC](#)

For humans to remain part of Humanity, they will first need to know they are not mice.

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