

# iDNA Vaccines to Generate Internal Virus Production

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*The iDNA platform can be used to create vaccines in two different ways. You can either grow the iDNA in a culture to produce the vaccine in the conventional way, or you can inject the iDNA directly into the recipient and allow the body to produce the live attenuated virus internally*

*The first human trials for an iDNA shot that codes for a live virus could begin as early as 2024*

*In early April 2023, microbiologist Kevin McKernan reported he'd discovered DNA fragments in the mRNA shots made by Pfizer and Moderna, raising concerns about the possibility of genomic integration, autoimmune diseases and cancer. McKernan now reports having found a dose relationship between the load of DNA contamination and serious adverse events*

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If you thought mRNA injections were the craziest things the vaccine industry has cooked up lately, you haven't seen the half of it yet. Up next, we have so-called **"immunization DNA" or iDNA,<sup>1,2</sup> a novel class of gene therapy "vaccines" that encodes for the whole virus.**

It's like mRNA, but on steroids. Rather than instructing your cells to produce a small portion, the spike protein of a given virus, **iDNA products instruct cells to produce the virus in**

## **its entirety. As described in U.S. Patent 8691563B2:<sup>3</sup>**

“The iDNA generates live attenuated vaccines in eukaryotic cells in vitro or in vivo for pathogenic RNA viruses ... When iDNA is injected into the vaccine recipient, RNA of live attenuated virus is generated by in vivo transcription in the recipient’s tissues.

This initiates production of progeny attenuated viruses in the tissues of the vaccine recipient, as well as elicitation of an effective immune response protecting against wild-type, non-attenuated virus.”

According to Taipei-based Medigen,<sup>4</sup> which launched its iDNA “vaccine” platform in 2018, the technology “combines genetic stability of DNA with the exceptional efficacy of live attenuated vaccines.” “Live attenuated” vaccines refers to vaccines that contain live (viable) but weakened (less virulent) viruses.

The iDNA platform can be used to create vaccines in two different ways. You can either grow the iDNA in a culture to produce the vaccine in the conventional way, or you can inject the iDNA directly into the recipient and allow the body to produce the live attenuated virus internally.

## **What Could Go Wrong?**

A 2016 paper described the iDNA process thus:<sup>5</sup>

“As any DNA vaccine, iDNA plasmids are isolated from bacteria and include a eukaryotic promoter, such as cytomegalovirus (CMV) major immediate-early promoter.

However, unlike a traditional DNA vaccine that involves transcription of mRNA for expression of a subunit antigen, the iDNA vaccines transcribe the full-length genomic RNA of the live-attenuated vaccine virus. The full-length viral RNA then initiates limited replication of live-attenuated virus in the tissues of vaccine recipient resulting in efficient immunization.

Essentially, the iDNA plasmid turns a limited number of cells in the vaccine recipient into the cell-scale factories for ‘manufacturing’ of live-attenuated vaccine.

Thus, the iDNA technology represents a novel type of DNA vaccine. With the introduction of DNA-launched iDNA vaccines, DNA-based vaccines can be subdivided into (i) DNA vaccines that express subunit antigens and (ii) DNA vaccines that launch replication-competent, live-attenuated vaccines ...

Finally, the iDNA plasmid can be used as a genetically stable repository seed to prepare live-attenuated virus in vitro either for subsequent use as a traditional live-attenuated vaccine or, after virus inactivation, as a traditional inactivated virus vaccine.”

Oh joy. Considering the shocking harms mRNA injections are causing, which instruct your body to create just a small portion of a virus that has no capacity to self-replicate, what could conceivably happen if we start injecting DNA that causes your cells to churn out replication-competent live virus?

## Different Product, Same Lies

Materials describing this technology claim the self-replication is restricted to “a limited number of cells in the vaccine recipient,” but where have we heard that before?

The mRNA shots were also supposed to stay in the vicinity of the injection site, causing just the cells in your deltoid to produce spike protein, but we now have proof it goes everywhere and cells throughout the body are producing the spike.

So, just how would an iDNA shot affect just “a small number of cells” when anything injected travels throughout the body? And how is the manufacturing turned off? They don’t say, which makes me think it’ll be just like the mRNA shots, which have no off switch and have been found to, in some people, [produce spike protein for six months](#) or more.

When your immune system is taxed with a chronic infection in this way, it begins to break down. Autoimmune diseases can also develop, which is what we’ve seen with the mRNA shots. The risk of iDNA causing symptomatic sickness also strikes me as significant, especially if your immune system is already weak.

## ‘DNA Vaccine’ Safety Is Unclear at Best

According to New Scientist,<sup>6</sup> the first human trials for an iDNA shot that codes for a live virus could begin as early as 2024. Medigen is currently seeking approval to begin trials, but it’s unclear which infection is being targeted.

At present, no DNA vaccine has ever received full approval anywhere in the world. India did, however, issue emergency authorization for a DNA shot against COVID-19, called ZyCoV-D,<sup>7</sup> which encoded for two viral proteins, the spike protein and an IgE signal peptide.<sup>8</sup>

In March 2023, Cochrane founder Peter Gøtzsche and investigative journalist Maryanne Demasi published a systematic review of papers that had data on serious adverse events (SAEs) associated with the COVID jabs. About ZyCoV-D, they wrote:<sup>9</sup>

“A trial in India of ZyCoV-D, a DNA-based vaccine, was also highly problematic. It randomized 27,703 patients, either aged 12-17 years or 60 years and older. A supplement reported one SAE [serious adverse event] in the vaccine group and none in the placebo group among the elderly and one vs two in ‘comorbid subjects.’

The main text was totally different, with no division as per randomized group. It described 15 SAEs, but seven of these were merely being COVID-19 positive, which is not an SAE and furthermore belongs to the reporting of the benefits, not the harms. There was one death in each group. This paper, which was difficult to interpret, was published in The Lancet.”<sup>10</sup>

An online search for data on ZyCoV-D left me empty handed, so aside from that Lancet paper (and an interim report on the same trial<sup>11</sup>), there doesn’t appear to be much out there.

As for what they used as the placebo is also anyone’s guess, as the paper doesn’t specify.

Testing one vaccine against another is a simple trick to hide expected side effects, and we know that at least one other COVID shot (AstraZeneca), did not use an inert placebo but, rather, a vaccine against meningitis and septicemia.<sup>12,13</sup>

So, in summary, the safety of ZyCoV-D is anything but clear. Even if we did have data on it, it still would not tell us much about the safety of iDNA shots. ZyCoV-D only encodes for two proteins, whereas iDNA will encode an entire virus.

## **DNA in mRNA Shots Cause Concern Among Experts**

In early April 2023, microbiologist [Kevin McKernan reported he'd discovered DNA fragments](#) in the mRNA shots made by Pfizer and Moderna.<sup>14,15,16,17</sup> The highest level of [DNA contamination](#) found was 30%, meaning nearly one-third of the content of the shot was plasmid DNA. No DNA should be present in a commercial mRNA product that has been made under good manufacturing practices.

Since then, others have confirmed his results, including University of South Carolina professor Phillip Buckhaults. In September 2023, he testified<sup>18</sup> to this before the South Carolina Senate Medical Affairs Ad-Hoc Committee on the Department of Health and Environmental Control (DHEC).

Buckhaults is a molecular biologist and cancer geneticist with extensive experience in DNA sequencing, and initially set out to debunk McKernan's claims. To his shock, he replicated McKernan's findings instead.

In his testimony, he explained how these **DNA contaminants can integrate into your genome and disrupt the function of other genes, either long term or permanently, and may be passed on to offspring for generations.**

He told the senators he was "alarmed about this DNA being in the vaccine," as "there is a very real hazard" of it integrating into a person's genome and becoming a "permanent fixture of the cell" that can result in autoimmune problems and cancers.<sup>19</sup>

## **DNA Contaminants in mRNA Shots Greenlighted by Health Agencies**

In an October 21, 2023, tweet, Steve Kirsch argued:<sup>20</sup>

"You can now sue the mRNA COVID vaccine manufacturers for damages and the FDA is required to take the COVID vaccines off the market. Why? Adulteration. The plasmid bioactive contaminant sequences were NOT pointed out to the regulatory authorities.

Health Canada on Thursday confirmed the presence of DNA contamination in Pfizer COVID-19 vaccines and also confirmed that Pfizer did not disclose the contamination to the public health authority."

Fact checkers struck back, stating that health regulators had indeed been aware of the contamination before the shots were authorized, and that there's "no reliable evidence showing that DNA in vaccines integrates into our DNA or increases the risk of cancer."<sup>21,22</sup>

Well, they're at least correct on one point. Regulatory agencies were clearly aware of this problem, as Pfizer submitted documents to the European Medicines Agency (EMA) showing sampled lots had a broad range of double-stranded DNA (dsDNA) in them.<sup>23</sup> Many of those lots were far in excess of the EMA's maximum limits.

But as for whether the DNA can integrate and cause disability, the fact checker was clearly misdirecting. DNA integration is something that has been recognized for quite some time, and has been discussed in the medical literature. It's not a novel notion. Be that as it may, the U.S. Food and Drug Administration doesn't care. It told Factcheck.org:<sup>24</sup>

"The claim that the FDA is required to take any of the authorized or approved mRNA COVID-19 vaccines off the market is false. With over a billion doses of the mRNA vaccines administered, no safety concerns related to the sequence of, or amount of, residual DNA have been identified."

Never mind the fact that never-before-seen "[turbo cancers](#)" are sending people to their graves in record numbers. Nothing to see there.

## **Dose Response Found Between DNA Contamination Load and Adverse Events**

October 27, 2023, McKernan and four other coauthors published a preprint paper<sup>25</sup> in which they explore the dose response between the COVID shot lots found to be contaminated with DNA and serious adverse events.

The lots tested included 27 vials from 12 unique lots from Moderna and Pfizer. Residual DNA was found in all vials, but Moderna had lower and more consistent levels, suggesting they're using a more standardized manufacturing process than Pfizer. The U.S. Vaccine Adverse Events Reporting System (VAERS) was then queried for the number and categorization of adverse events reported for each of the lots tested.

"Quantification cycle (Cq) values (1:10 dilution) for the plasmid origin of replication (ori) and spike sequences ranged from 18.44 - 24.87 and 18.03 - 23.83 for Pfizer, and 22.52 - 24.53 and 25.24 - 30.10 for Moderna, respectively.

These values correspond to 0.28 - 4.27 ng/dose and 0.22 - 2.43 ng/dose (Pfizer), and 0.01-0.34 g/dose and 0.25 - 0.78 ng/dose (Moderna), for ori and spike respectively ...

In an exploratory analysis, we found preliminary evidence of a dose response relationship of the amount of DNA per dose and the frequency of serious adverse events (SAEs). This relationship was different for the Pfizer and Moderna products ...

**Conclusion:** These data demonstrate the presence of billions to hundreds of billions of DNA molecules per dose in these vaccines. Using fluorometry, all vaccines exceed the guidelines for residual DNA set by FDA and WHO of 10 ng/dose by 188 - 509-fold.

However, qPCR residual DNA content in all vaccines were below these guidelines, emphasizing the importance of methodological clarity and consistency when interpreting quantitative guidelines.

The preliminary evidence of a dose-response effect of residual DNA measured with

qPCR and SAEs warrant confirmation and further investigation. Our findings extend existing concerns about vaccine safety and call into question the relevance of guidelines conceived before the introduction of efficient transfection using LNPs.

With several obvious limitations, we urge that our work is replicated under forensic conditions and that guidelines be revised to account for highly efficient DNA transfection and cumulative dosing.”

## Resources for Those Injured by the COVID Jab

The more we learn about the COVID jabs, the worse they appear, and if iDNA shots become reality, we may be looking at an even greater calamity. It’s time to end the madness before it’s too late, and the way we do that is by rejecting all gene-based shots, be they RNA, mRNA, DNA, iDNA or anything else they might come up with.

Also, if you already got one or more COVID jabs and are now reconsidering, you’d be wise to avoid all vaccines from here on, including conventional ones, as you need to end the assault on your body. Even if you haven’t experienced any obvious side effects, your health may still be impacted long-term, so don’t take any more shots.

If you’re suffering from side effects, your first order of business is to eliminate the spike protein that your body is producing. Two remedies that can do this are hydroxychloroquine and ivermectin. Both drugs bind and facilitate the removal of spike protein.

The Front Line COVID-19 Critical Care Alliance (FLCCC) has developed a post-vaccine treatment protocol called [I-RECOVER](#). Since the protocol is continuously updated as more data become available, your best bet is to download the latest version straight from the FLCCC website at [covid19criticalcare.com](https://covid19criticalcare.com).<sup>26</sup>

For additional suggestions, check out the [World Health Council’s spike protein detox guide](#),<sup>27</sup> which focuses on natural substances like herbs, supplements and teas. Sauna therapy can also help eliminate toxic proteins by stimulating autophagy.

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## Notes

<sup>1</sup> [Frontiers in Tropical Diseases March 18, 2022; 3](#)

<sup>2, 5</sup> [Expert Rev Vaccines September 2016; 15\(9\): 1223-1234](#)

<sup>3</sup> [U.S. Patent 8691563B2](#)

<sup>4</sup> [Medigen](#)

<sup>6</sup> [New Scientist November 6, 2023 \(Archived\)](#)

<sup>7</sup> [BBC August 20, 2021](#)

<sup>8, 10</sup> [The Lancet April 2, 2022; 399\(10332\): 1313-1321](#)

<sup>9</sup> [medRxiv March 22, 2023](#)

<sup>11</sup> [Pharmacovigilance, Efficacy, Safety and Immunogenicity of ZyCoV-D: Interim efficacy results, Page 12](#)

<sup>12</sup> [Health Desk October 1, 2021](#)

<sup>13</sup> [McGill July 3, 2020](#)

<sup>14</sup> [Twitter KanekoaTheGreat May 20, 2023](#)

<sup>15, 23</sup> [Anandamide \(Kevin McKernan\) Substack May 20, 2023](#)

<sup>16</sup> [The Healthcare Channel May 22, 2023](#)

<sup>17, 19</sup> [Spectator Australia September 25, 2023](#)

<sup>18</sup> [Jessica Rose Substack September 18, 2023](#)

<sup>20, 21</sup> [Health Feedback October 21, 2023](#)

<sup>22, 24</sup> [Factcheck.org November 3, 2023](#)

<sup>25</sup> [OSF Preprints October 27, 2023](#)

<sup>26</sup> [Covid19criticalcare.com](#)

<sup>27</sup> [World Council for Health Spike Protein Detox Guide November 30, 2021](#)

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