

Inventor of mRNA Technology: Vaccine Causes Lipid Nanoparticles to Accumulate in ‘High Concentrations’ in Ovaries

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*On the “Dark Horse Podcast,” **Dr. Robert Malone**, creator of mRNA vaccine technology, said the COVID vaccine lipid nanoparticles — which tell the body to produce the spike protein — leave the injection site and accumulate in organs and tissues.*

On June 10, Dr. Robert Malone, creator of mRNA vaccine technology, joined evolutionary biologist **Bret Brownstein**, Ph.D., for a 3-hour conversation on the “[Dark Horse Podcast](#)” to discuss multiple safety concerns related to the Pfizer and Moderna vaccines.

In this [short outtake](#) from the full podcast, Malone, Brownstein and tech entrepreneur [Steve Kirsch](#) touch on the implications of the controversial Japanese [Pfizer biodistribution study](#). The study was made public earlier this month by **Dr. Byram Bridle**, a viral immunologist.

They also discuss the lack of proper animal studies for the new mRNA vaccines, and [the theory](#), espoused by virologist **Geert Vanden Bossche**, Ph.D., that mass vaccination with the mRNA vaccines could produce ever more transmissible and potentially deadly variants.

As [The Defender reported](#) June 3, Bridle received a copy of a Japanese biodistribution study — which had been kept from the public — as a result of a freedom of information request made to the Japanese government for Pfizer data.

Prior to the study’s disclosure, the public was led to believe by regulators and vaccine developers that the spike protein produced by mRNA COVID vaccines stayed in the shoulder where it was injected and was not biologically active — even though regulators around the world had a copy of the study which showed otherwise.

The [biodistribution study](#) obtained by Bridle showed lipid nanoparticles from the vaccine did not stay in the deltoid muscle where they were injected as the vaccine’s developers claimed would happen, but circulated throughout the body and accumulated in large concentrations in organs and tissues, including the spleen, bone marrow, liver, adrenal glands and — in

“quite high concentrations” — in the ovaries.

The mRNA — or messenger RNA — is what tells the body to manufacture the spike protein. The lipid nanoparticles are like the “boxes” the mRNA is shipped in, according to Malone. “If you find lipid nanoparticles in an organ or tissue, that tells you the drug got to that location,” Malone explained.

According to the [data](#) in the Japanese study, lipid nanoparticles were found in the whole blood circulating throughout the body within four hours, and then settled in large concentrations in the ovaries, bone marrow and lymph nodes.

Malone said there needed to be monitoring of vaccine recipients for leukemia and lymphomas as there were concentrations of lipid nanoparticles in the bone marrow and lymph nodes. But those signals often don’t show up for six months to three or nine years down the road, he said.

Usually, [signals like this](#) are picked up in animal studies and long-term clinical trials, but this didn’t happen with mRNA vaccines, Malone said.

Malone said there are [two adverse event signals](#) that are becoming apparent to the U.S. Food and Drug Administration (FDA). One of them is [thrombocytopenia](#) — not having enough platelets, which are manufactured in the bone marrow. The other is reactivation of latent viruses.

Malone found the ovarian signal perplexing because there is no accumulation in the testes.

Malone said the original data packages contained this biodistribution information. “This data has been out there a long time” within the protected, non-disclosed, purview of the regulators across the world, he said.

[According to Malone](#), the FDA knew the [COVID spike protein](#) was biologically active and could travel from the injection site and cause [adverse events](#), and that the spike protein, if biologically active, is very dangerous.

In fact, Malone was one of many scientists to warn the FDA about the dangers of the free spike protein.

Malone suggested autoimmune issues may be related to free-circulating spike protein which developers assured would not happen. To pick up autoimmune issues, a 2- to 3- year follow-up period in phase 3 patients would be required to monitor for potential autoimmune consequences from vaccines — but that monitoring didn’t happen with the Pfizer and Moderna vaccines.

Pfizer and Moderna also didn’t conduct proper animal studies, Brownstein said. What the animal models give us is a signal that alerts us to what we need to follow up on in humans.

Brownstein said:

“We’ve got very alarming short-term stuff. We’ve got short-term stuff that is alarming on the basis of where we find these lipids, where we find the spike proteins — those things are reasons for concern because it wasn’t supposed to be this way. We’ve also

got an alarming signal in terms of the hazards and deaths or the harms and the deaths that are reported in the system and there are reasons to think they are dramatic under-reports.”

Vaden Bossche got it right

One of the potential harms from the vaccines, [Brownstein said](#), was made famous by Vaden Bossche, a vaccinologist who worked with GSK Biologicals, Novartis Vaccines, Solvay Biologicals, [Bill & Melinda Gates Foundation](#)’s Global Health Discovery team in Seattle, and Global Alliance for Vaccines and Immunization in Geneva.

Earlier this year, Vaden Bossche put out a call to the World Health Organization, supported by a [12-page document](#), that described the “[uncontrollable monster](#)” that a global mass vaccination campaign could potentially unleash.

[Vaden Bossche said](#) a combination of lockdowns, and extreme selection pressure on the virus induced by the intense global mass vaccination program, might diminish the number of cases, hospitalizations and deaths in the short-term, but ultimately, will induce the creation of more mutants of concern. This is what Vaden Bossche calls “immune escape” (i.e. incomplete sterilization of the virus by the human immune system, even following vaccine administration).

Immune escape will in turn trigger vaccine companies to further refine vaccines that will add, not reduce, the selection pressure, producing ever more transmissible and potentially deadly variants.

The selection pressure will cause greater convergence in mutations that affect the critical [spike protein](#) of the virus that is responsible for breaking through the mucosal surfaces of our airways, the route used by the virus to enter the human body.

The virus will effectively outsmart the highly specific antigen-based vaccines being used and tweaked, [depending on the circulating variants](#). All of this could lead to a hockey stick-like increase in serious and potentially lethal cases — in effect, an out-of-control pandemic.

Malone said:

“Vaden Bossche’s concern is not theoretical. It is real and we have the data. We’re stuck with this virus or its downstream variants pretty much for the rest of our lives and it’s going to become more like the flu. We will have continuing evolution and circulation of variants, and that is an escape.”

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