

Mixing AstraZeneca, Pfizer & Moderna COVID-19 Vaccines: 24-year-old Australian Had 5 COVID-19 Vaccines, Died of Ruptured Brain Aneurysm

One Week After Fifth Dose of Moderna

By [Dr. William Makis](#)

Theme: [Science and Medicine](#)

Global Research, October 20, 2023

[COVID Intel](#)

All Global Research articles can be read in 51 languages by activating the Translate Website button below the author's name.

To receive Global Research's Daily Newsletter (selected articles), [click here](#).

Click the share button above to email/forward this article to your friends and colleagues. Follow us on Instagram and Twitter and subscribe to our Telegram Channel. Feel free to repost and share widely Global Research articles.

Sydney, Australia - 24 year old Bianca was a broker who was mandated first two COVID-19 Vaccines (AstraZeneca) by her employer. She then had an opportunity to work in Singapore and took 2 more boosters (Pfizer) to please her employer. She was then peer pressured to take another booster, 5th dose (Moderna) in 1st week of Jan. 2023. A week later on Jan. 16 she collapsed in the gym with seizures and died unexpectedly from a ruptured brain aneurysm on Jan. 17, 2023.



Her Full Story

<p>Bianca was a fit, healthy, 23-year-old living in Potts Point, Sydney when the pandemic hit in 2020. She had embarked on a successful career as a broker and was a massive foodie – she bought all organic, developed recipes, and cooked for her friends. She was into boxing and the outdoors, regularly taking her dogs to the beach and the park.</p> <p>Bianca was in good health except for an autoimmune condition, Hashimoto's, which she had had since the age of 21 following a diagnosis of Polycystic ovary syndrome (PCOS).</p> <p>Bianca was a bit wary about getting the 🦠. I'm a naturopath and had voiced concerns about the rushed development, and I asked Bianca to please look into it carefully before getting the 🦠. We had debates about it, but in the end, Bianca felt it was the right thing for her, and it was mandated for her job, so she went ahead with her first 🦠 in March, 2021.</p>	<p>She had bad headaches, dizziness and fatigue for a few days, but otherwise she was fine. 6 weeks later she had her second 🦠. This time, she got quite bad flu symptoms and had to take just over a week off work.</p> <p>During the next few months, Bianca was offered the opportunity to work overseas, in Singapore. She was so excited as she'd never been there before. With the travel coming up, and wanting to please her employers, Bianca took her next two 🦠, one 🦠 in July 2021, and one 🦠 in January 2022. Her GP advised her that due to her Hashimoto's, the 🦠 might be more suitable than the 🦠. On both occasions, Bianca experienced vertigo, but otherwise she was fine.</p> <p>Bianca did a 3-month stint in Singapore in early 2022 and had an absolute blast. There was talk of her doing more work overseas, possibly including Berlin, or another stint in Singapore. She was so, so excited. Bianca's uncle was in the same industry and had also lived in Singapore, and we have family in Germany, so there was a family connection with both places.</p>	<p>I don't know why Bianca got her fifth 🦠. It wasn't mandated at her work anymore, but based on things her friends have said, it seems that she was under peer pressure to get it. It's also possible that she wanted to keep 'up to date' for travel opportunities.</p> <p>In the first week of January 2023, Bianca got her fifth 🦠, this time 🦠. She called me the next day to say she felt really dizzy and fatigued, with blurry vision, but she didn't tell me that she had had the 🦠. For the next week she called me every day or 2, which was normal for us, and on those calls she was constantly complaining of being unwell.</p> <p>Not knowing about the 🦠, I suggested that she go to the doctor and take some supplements. It sounded like she had a strange flu or something. She went to see a GP and booked in for an MRI, but there was about a 4 week wait.</p>
<p>She came good for a couple of days, and on the 11th of January, she went on a work trip to Melbourne to watch the tennis at the Australian Open.</p> <p>We didn't speak for the first 2 days because she was quite busy, but a few days into her trip, Bianca called and told me she felt very nauseous, dizzy, and was throwing up repeatedly. She missed some of the tennis because she had to go to bed.</p> <p>Later I spoke to some of Bianca's work colleagues who were on the trip with her, and they said she had been up and down, and that she looked like she was putting on a brave face.</p> <p>On the morning of Monday the 16th of January, Bianca collapsed in the gym of her Melbourne hotel. Her travel friends weren't there, but the hotel staff saw her collapse and called an ambulance. I'm told that she was having seizures and was non-responsive.</p>	<p>After the paramedics arrived, Bianca's friend happened to call her phone, and the paramedics picked up the call. They told her that Bianca was having multiple seizures and that they were taking her to Royal Melbourne Hospital. That friend then called me, and even though I didn't know about the 🦠, I had strong intuition that the 🦠 was related. Bianca had never had a seizure in her life.</p> <p>I called the hospital but was not able to get any additional information. Half an hour later a surgeon from the hospital called me back to say they had taken Bianca into emergency surgery because she had a major aneurism in the back of her brain, and they were trying to stop the bleeding. He was unsure if Bianca would pull through.</p> <p>I frantically booked the next flight to Melbourne and rushed to Newcastle airport, which is the nearest to where I live, in mid-north New South Wales. I kept thinking 'it has to be the 🦠'. I can't describe why the intuition was so strong, it was almost like an out of body experience.</p>	<p>I landed in Melbourne mid-afternoon the same day and went straight to the hospital. When I arrived, they told me Bianca had 🦠. Bianca was behind glass doors and they weren't going to let me in at first, but I insisted. The staff on Bianca's team were crying and the head surgeon pulled me aside and said, 'we've done all we can, but we don't think she's going to make it.'</p> <p>When I heard this, I collapsed on the floor. Bianca's brother and her friends were also there in the waiting room so I had to go out with the doctors and we told them the news. Everyone was distraught, we were all crying and screaming.</p> <p>I stayed by Bianca's bedside overnight, but Bianca was unresponsive. She was pronounced braindead at 11am on Tuesday the 17th of January at 27 years old.</p> <p>Bianca had always wanted to donate her organs, so I had to facilitate this for her according to her wishes. I stayed in Melbourne to complete all the administrative aspects of Bianca's death, and then flew home, devastated, on the 19th of January.</p>
<p>Bianca's body was flown back to New South Wales on the 24th of January and we had her cremated, as she had said this was what she wanted. We had always talked openly about these things.</p> <p>In the months following Bianca's death, I talked with her friends, as I was trying to understand what had happened and if there was anything about Bianca's health that I didn't know about.</p> <p>Through these conversations, one of her friends said to me, 'do you think it was the 🦠?' and that's how I discovered that Bianca had taken the 🦠 just before going to Melbourne.</p> <p>I was shocked, but then on second thoughts it confirmed my intuition. I went through the whole guilt thing of 'why didn't she tell me??'. The weird thing is that when I was in the waiting room while Bianca was in hospital, I found out that there were at least 4 others in there for aneurisms and they had all had the 🦠.</p>	<p>I wanted to get an autopsy done for Bianca to determine what caused the aneurism, and I kind of assumed that the hospital would organise it. But I didn't know how to go about it, and because of the organ donation, and because I was in shock, I didn't have the presence of mind to pursue it.</p> <p>I've been trying to get Bianca's medical records but because she passed away without a will, there's a lot of red tape. I tried to contact her previous GP, but the GP has retired and I can't get in touch. I want to see if her batch numbers match with any of the batches on howbadismybatch.com.</p> <p>I've since spoken to Bianca's PCOS specialist and found out that she did not recommend that Bianca get the 🦠 because she thought that her autoimmune condition would be a risk factor for an adverse reaction.</p>	<p>I'm currently looking into how to go about getting a coroner's report, as I want answers on why Bianca died out of the blue at the age of 27. On Bianca's death certificate it attributes her death to a brain aneurism. It doesn't mention the 🦠 or 🦠. I know some people may attribute her aneurism to 🦠 but as 🦠 is a known side effect of the 🦠, which is supposedly meant to protect against 🦠, I'm not buying it.</p> <p>I haven't reported Bianca's death to the TGA database yet, but I intend to.</p> <p>I'm sharing Bianca's story because she deserves for it to be told. I want people to wake up to what's going on, and if it saves one life, it's worth it.</p> <p>NSW, 🦠 March 2021 🦠 April 2021 🦠 July 2021 🦠 January 2022 🦠 January 2023</p>

Government Recommendations on Mixing COVID-19 Vaccines

Canada (June 2021)

Canada recommends mixing and matching AstraZeneca, Pfizer and Moderna COVID-19 vaccines

NACI guidance based on early research from U.K., Spain that shows mixing shots is safe and effective



[Adam Miller](#) · CBC News · Posted: Jun 01, 2021 2:00 AM MDT | Last Updated: June 2, 2021



Dr. Theresa Tam, Canada's chief public health officer, talks about NACI's decision to recommend mixing COVID-19 vaccines between first and second shots.

USA (October 2021)

FDA approves mixing COVID vaccines

[Health](#) Updated on Oct 20, 2021 7:26 PM EDT – Published on Oct 20, 2021 5:05 PM EDT

WASHINGTON (AP) — U.S. regulators on Wednesday signed off on extending COVID-19 boosters to Americans who got the Moderna or Johnson & Johnson vaccine and said anyone eligible for an extra dose can get a brand different from the one they received initially.

The Food and Drug Administration's decisions mark a big step toward expanding the U.S. booster campaign, which began with extra doses of the Pfizer vaccine last month. But before more people roll up their sleeves, the Centers for Disease Control and Prevention will consult an expert panel Thursday before finalizing official recommendations for who should get boosters and when.

The latest moves would expand by tens of millions the number of Americans eligible for boosters and formally allow “mixing and matching” of shots — making it simpler to get another dose, especially for people who had a side effect from one brand but still want the proven protection of vaccination.

Specifically, the FDA authorized a third Moderna shot for seniors and others at high risk from COVID-19 because of their health problems, jobs or living conditions — six months after their last shot. One big change: Moderna's booster will be half the dose that's used for the first two shots, based on company data showing that was plenty to rev up immunity again.

For J&J's single-shot vaccine, the FDA said all U.S. recipients, no matter their age, could get a second dose at least two months following their initial vaccination.

The FDA rulings differ because the vaccines are made differently, with different dosing schedules — and the J&J vaccine has consistently shown a lower level of effectiveness than either of the two-shot Moderna and Pfizer vaccines.

As for mixing and matching, the FDA said it's OK to use any brand for the booster regardless of which vaccination people got first. The interchangeability of the shots is expected to speed the booster campaign, particularly in nursing homes and other institutional settings where residents have received different shots over time.

FDA's acting commissioner Dr. Janet Woodcock said the agency wanted to make its booster guidance as flexible as possible, given that many people don't remember which brand they first received. In other cases, some people may want to try a different vaccine if they previously experienced common side effects like muscle ache or chills.

Still, regulators said it's likely many people will stick with the same vaccine brand.



Medicines ▾

Human regulatory ▾

Veterinary regulatory ▾

Committees ▾

News & events ▾

Partners & networks ▾

EMA and ECDC recommendations on heterologous vaccination courses against COVID-19: 'mix-and-match' approach can be used for both initial courses and boosters [← Share](#)

News 07/12/2021

The EU is currently experiencing a rising number of infections in the ongoing COVID-19 pandemic, as well as an increase in hospitalisation rates. Vaccines are continuing to prevent many millions of EU citizens from becoming very ill or dying and figures show that numbers of hospitalisations and deaths remain lowest in those Member States with the highest vaccination rates. The European Medicines Agency (EMA) and the European Centre for Disease Prevention and Control (ECDC) therefore continue to urge all EU citizens to get fully vaccinated and to adhere to recent recommendations on booster vaccination.

In line with measures already taken by many Member States, an increasing number of clinical studies, supported by real world evidence, have now looked at the possibility of using two different COVID-19 vaccines¹, either for the first and second doses of a primary (initial) course, which is known as heterologous primary vaccination, or using a third dose of a different COVID-19 vaccine as a booster 3 to

Science

Mixing COVID-19 vaccines appears to boost immune responses

Findings from combination studies support measures to stretch supplies, avoid side effects

9 JUN 2021 • BY GRETCHEN VOGEL

Initial data support giving a dose of AstraZeneca's COVID-19 vaccine (left) followed by one of Pfizer and BioNTech's (right). VICTORIA JONES/PA IMAGES VIA GETTY IMAGES

Science's COVID-19 reporting is supported by the Heising-Simons Foundation.

Faced with short supplies of COVID-19 vaccines and unforeseen side effects, some countries have adopted an unproven strategy: switching shots midstream. Most authorized vaccines require two doses administered weeks or months apart, but Canada and several European countries are now recommending a different vaccine for the second dose in some patients. Early data suggest the approach, born of necessity, may actually be beneficial.

In three recent studies, researchers have found that following one dose of the vaccine made by AstraZeneca with a dose of the Pfizer-BioNTech vaccine produces strong immune responses, as measured by blood tests. Two of the studies even suggest the mixed vaccine response will be at least as protective as two doses of the Pfizer-BioNTech product, one of the most effective COVID-19 vaccines.

POPULAR SCIENCE

SCIENCE TECHNOLOGY ENVIRONMENT DIY HEALTH GEAR

NEWSLETTER SIGN-UP MERCH POPSCI +

icine → Vaccines

Mixing and matching COVID-19 vaccines could provide superior immunity

The approach could prompt a powerful immune response.

BY KATE BAGGALEY | PUBLISHED OCT 21, 2021 3:30 PM EDT

HEALTH

nature

Explore content About the journal Publish with us Subscribe

nature > news > article

NEWS | 21 October 2021

Mix-and-match COVID vaccines ace the effectiveness test

Combining two different COVID-19 vaccines provides protection on par with that of mRNA vaccines – including protection against the Delta variant.

Ewen Callaway

Study after study has shown that people who receive two different COVID-19 vaccines generate potent immune responses, with side effects no worse than those caused by standard regimens.

TIME

HEALTH • COVID-19

A New Study Makes the Case for Mixing and Matching the Pfizer-BioNTech, Moderna and J&J Vaccine Doses

Joe Biden Gets His Booster Shot

WASHINGTON Sep 27, 2021

BY ALICE PARK

OCTOBER 15, 2021 6:00 AM EDT

As soon as health officials made it clear that the world would need a booster dose of the COVID-19 vaccine, they needed to know if people could mix doses of vaccines made by different manufacturers.

WHO (2022)



World Health Organization (WHO) Western Pacific
@WHOWPRO



It's safe to mix and match different types of COVID-19 vaccines, for second and booster doses.

If you are offered a different COVID-19 vaccine than you received from your first and/or second dose, you should go ahead and get vaccinated.

COVID-19 Vaccines

It is safe and effective to mix-and-match different COVID-19 vaccines.

If you are offered a second or third dose with a different COVID-19 vaccine than you received for your first and/or second dose, you should go ahead and get vaccinated.

The protection you get from mixing-and-matching may even be stronger than from just getting one vaccine type.

ALT 20/03/2022

6:34 PM · Aug 5, 2022

My Take...

I have done many substack articles on Pfizer & Moderna COVID-19 mRNA vaccines causing aneurysms, and young people dying suddenly of ruptured brain aneurysms (and occasionally other aneurysms).

One of the most unethical and unscientific things you can do in medicine, is to advise a patient to take and mix experimental pharmaceutical products with no long term safety studies.

Do you see it? Look how they all aggressively promoted mixing and matching", to the point of fraudulently claiming it provided "superior immunity".

Bianca was almost certainly killed by a COVID-19 vaccine, but WHICH ONE?

And there-in lies the real reason for “mixing and matching”.

To make it impossible to trace the vaccine damage to a specific product.

I suspect, this is where all of this leads to:

Published **July 31, 2023**

By **Stephanie Desmon**

Preventing Another “Tripledemic” with Vaccines for Flu, COVID, and RSV



Note: For the latest on COVID vaccines for fall 2023, please visit [What to Know About the Updated COVID-19 Vaccine for Fall/Winter 2023](#)

As fall approaches, pharmacies and doctor’s offices around the country will soon be displaying their signs reminding everyone to get their flu shot. Also available this fall: updated COVID-19 vaccines and a new RSV vaccine. **To head off another “tripledeemic” winter, enough people will need to get vaccinated at the right time.**

In this Q&A, adapted from the [July 31 episode](#) of [Public Health On Call](#), virologist [Andrew Pekosz, PhD](#), a professor in [Molecular Microbiology and Immunology](#), explains when flu, COVID, and RSV vaccines will roll out, who will benefit from them, and how effective they’re expected to be.

We are entering an era of mRNA vaccine mixing.

HEALTH · PUBLIC HEALTH

A trio of vaccines should protect against a 2023 ‘triple-demic,’ experts say—if people get them

BY LIBBY RICHARDS AND THE CONVERSATION

October 13, 2023 at 3:32 AM MDT



Nurses draw vaccine doses from a vial as Maryland residents receive their second dose of the Moderna coronavirus vaccine at the Cameron Grove Community Center on March 25, 2021, in Bowie, Md.

PHOTO BY WIN MCNAMEE/GETTY IMAGES

As cold and flu season ramps up, health care experts are once again on high alert for the possibility of a tripledemic, or a surge brought on by the respiratory viruses that cause COVID-19, the flu and respiratory syncytial virus, or RSV. The good news is that this year, health officials have more tools at their disposal to combat them.

Most Popular

FINANCE

Bank of America warned consumers they would be pushed to the ‘point of pain’—and CEO Brian Moynihan says we’ve now...

October 18, 2023

BY ELEANOR PRINGLE

TECH

Jeff Bezos and Bill Gates-backed trucking startup to slash hundreds of jobs after being just weeks away from running...

Tripledemic? What CDC Recommends for COVID, Flu, and RSV

Written by [Kara Grant, MS](#)

3 min read

Oct. 5, 2023 – As we forge ahead into fall and winter, the threat of a "tripledeemic" – when cases of COVID-19, flu, and RSV surge at the same time – looms over our heads.

Leading experts from the CDC on Wednesday met and addressed the [three viruses](#) that we're faced with and how best to protect ourselves and others.

In the meeting, CDC Director Mandy Cohen, MD, MPH, said that clear, simple messaging is of the utmost importance right now: The most effective way to protect yourself from the worst of this season's viruses is to get vaccinated. Everyone above 6 months old should get their [flu shot](#) and updated [COVID vaccine](#); pregnant women and adults over 60 should get vaccinated against RSV. For all of these viruses, the month of October is the best time to get your shots to prevent infection down the line.

["Coadministration of this vaccine along with influenza and COVID vaccines is completely acceptable,"](#) said Demetre [Daskalakis, MD, MPH](#), the acting director of the National Center for Immunization and Respiratory Diseases (NCIRD). ["And it's](#)

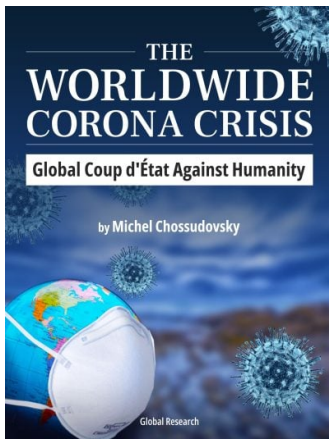
May the vaccine "mix and match" odds ever be in your favor.

*

Note to readers: Please click the share button above. Follow us on Instagram and Twitter and subscribe to our Telegram Channel. Feel free to repost and share widely Global Research articles.

Dr. William Makis is a Canadian physician with expertise in Radiology, Oncology and Immunology. Governor General's Medal, University of Toronto Scholar. Author of 100+ peer-reviewed medical publications.

Featured image is from COVID Intel



The Worldwide Corona Crisis, Global Coup d'Etat Against Humanity

by Michel Chossudovsky

Michel Chossudovsky reviews in detail how this insidious project “destroys people’s lives”. He provides a comprehensive analysis of everything you need to know about the “pandemic” — from the medical dimensions to the economic and social repercussions, political underpinnings, and mental and psychological impacts.

“My objective as an author is to inform people worldwide and refute the official narrative which has been used as a justification to destabilize the economic and social fabric of entire countries, followed by the imposition of the “deadly” COVID-19 “vaccine”. This crisis affects humanity in its entirety: almost 8 billion people. We stand in solidarity with our fellow human beings and our children worldwide. Truth is a powerful instrument.”

Reviews

This is an in-depth resource of great interest if it is the wider perspective you are motivated to understand a little better, the author is very knowledgeable about geopolitics and this comes out in the way Covid is contextualized. —Dr. Mike Yeadon

In this war against humanity in which we find ourselves, in this singular, irregular and massive assault against liberty and the goodness of people, Chossudovsky’s book is a rock upon which to sustain our fight. —Dr. Emanuel Garcia

In fifteen concise science-based chapters, Michel traces the false covid pandemic, explaining how a PCR test, producing up to 97% proven false positives, combined with a relentless 24/7 fear campaign, was able to create a worldwide panic-laden “plandemic”; that this plandemic would never have been possible without the infamous DNA-modifying Polymerase Chain Reaction test - which to this day is being pushed on a majority of innocent people who have no clue. His conclusions are evidenced by renown scientists. —Peter Koenig

Professor Chossudovsky exposes the truth that “there is no causal relationship between the virus and economic variables.” In other words, it was not COVID-19 but, rather, the deliberate implementation of the illogical, scientifically baseless lockdowns that caused the shutdown of the global economy. —David Skripac

A reading of Chossudovsky’s book provides a comprehensive lesson in how there is a global coup d’état under way called “The Great Reset” that if not resisted and defeated by freedom

loving people everywhere will result in a dystopian future not yet imagined. Pass on this free gift from Professor Chossudovsky before it's too late. You will not find so much valuable information and analysis in one place. -Edward Curtin

ISBN: 978-0-9879389-3-0, Year: 2022, PDF Ebook, Pages: 164, 15 Chapters

Price: ~~\$11.50~~ FREE COPY! [Click here \(docsend\) and download.](#)

We encourage you to support the eBook project by making a donation through Global Research's [DonorBox "Worldwide Corona Crisis" Campaign Page.](#)

The original source of this article is [COVID Intel](#)
Copyright © [Dr. William Makis](#), [COVID Intel](#), 2023

[Comment on Global Research Articles on our Facebook page](#)

[Become a Member of Global Research](#)

Articles by: [Dr. William Makis](#)

Disclaimer: The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: publications@globalresearch.ca
www.globalresearch.ca contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: publications@globalresearch.ca