

# mRNA and Pregnancy: Brain Damaged Mother and a Dead Baby After One Pfizer COVID-19 mRNA Vaccine at 14 Weeks Pregnancy

By [Dr. William Makis](#)

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[Sep. 6, 2023](#) - Coomera, QLD, Australia - 38 year old Heidi Strbak lived an active life of bushwalking, horse riding and served 4.5 years in the army. She has a 7 year old son. On Dec. 31, 2021 at 14 weeks of her 2nd pregnancy she took one Pfizer dose. It destroyed her life and killed her baby. Here is her story:

Heidi Strbak was Born on the 27th March 1983 and lives in Coomera, Queensland. On the 31st of December 2021 at fourteen weeks gestation during her second pregnancy, Heidi received her first and only **P** 🦠 😞 in her left arm at Chempro Chemist on the Gold Coast. Heidi, a once vibrant, strong, and healthy woman is now in a state of semi coma requiring full-time care.

Heidi lived an active life of horse riding, bushwalking, and served four and a half years in the army with full army clearance. She worked full time at George's Seafood Sanctuary Cove where she covered long shifts and was constantly on her feet. She has a seven-year-old son called Seth. She was so strong, so full of life and other than occasional sinus, she had absolutely no health complaints.

During one of Heidi's routine antenatal appointments, it was strongly recommended she take the 🦠 😞, the advice being that all pregnant woman needed it to protect both themselves and their baby. Being the kind and caring woman she is, always putting others' needs above her own, Heidi followed the health advice of her doctor.



Within a week her health began to slowly decline. She was so tired; she suffered vertigo and was so unsteady on her feet she nearly fell over while at the shops with her friend. I could tell by looking at her something wasn't right; she did not look good. Her condition escalated to the point where she was ringing the doctor for medical certificates as she could no longer go to work. Then eventually she stopped coming downstairs at all.

Upon the doctor's investigation she was told she had high blood pressure and was prescribed some pills which she was reluctant to take during her pregnancy. The next day she felt even worse, and her blood pressure went through the roof. She was put on a twenty-four-hour heart monitoring machine which detected huge fluctuations in her heart activity.

On the 17th of January 2021 Heidi's GP wrote a referral to the maternity unit at the Gold Coast University Hospital requesting an earlier appointment because of the risk associated with hypertension during pregnancy.

Heidi was required to have a second 🦠😞 to be able to visit the doctor at the hospital. She was due for her second 😞 on the 22nd of January 2022. It was on this day in the early hours of the morning that Heidi suffered a major cardiac arrest.

My husband and I were woken by a banging at our bedroom door. It was Heidi's partner who had just returned home from night shift. He had found Heidi lying at the bottom of the stairs. She was fitting when he found her there and had a small pulse. By the time we got to Heidi she had stopped fitting, and no longer had a pulse.

I am a nurse, so while calling emergency services I started survival care. While getting little response I did manage to get a small heartbeat. Within seven minutes the paramedics arrived. Heidi had hit the right side of her neck when she fell so there was a lot of blood. They dragged her into the lounge room where there was more space and when the tactical ambulance arrived, they defibrillated her four times.

At this stage we were told to go outside as the procedure is horrible to watch. They did manage to restore her heartbeat but then lost it again. They worked on Heidi for forty-five minutes during which time the police arrived and cordoned off the area as a crime scene. They treated the incident as suspicious and would not let us back inside. They told us Heidi was being taken to Gold Coast University Hospital and denied my plea to travel in the ambulance with my daughter. I was told that there were nine people in the ambulance leaving no room for me. The detectives refused to let me leave for the hospital until I had given a statement. At this time the shock set in, and I started to vomit. Heidi crashed a further two times in the ambulance and had to be intubated. When I arrived at the hospital to be beside Heidi, I was refused entry due to my 🦠😞 status. I had to get a special exemption, the whole process taking a couple of hours.

When I finally got to Heidi, she was in the emergency department hooked up to various machines but not on full life support, however, they were planning on transferring her to the ICU. It was so hard to get answers from people and from here it all becomes quite vague. So many people were in and out of the room, Heidi was hooked up to a plethora of tubes and she just looked so terrible. I pushed the medical staff to tell me what was happening, and they just kept telling me she'd had a massive heart attack and due to a down time of twenty-eight minutes she'd sustained hypoxia of the brain caused by a deprivation of oxygen. I'm aware of various ways to treat the condition to minimise swelling in the brain but when I tried to persuade them to treat her brain injury, I was told they were currently only interested in her heart as her primary injury. Her blood pressure was now stable, so I kept inquiring as to why they weren't treating her brain, to which they continued to justify that brain was secondary to heart.



I inquired as to whether Heidi's baby was in a stable condition. They said that at that stage they were treating Heidi as if the baby was not there and refused to do a scan or any checks on the baby. It was a month or more before they did any investigations whatsoever into the baby.

Heidi's partner and I were taken into a small room where we were informed that Heidi was brain dead. They told me they wouldn't turn off the machines today, but they would be turning them off tomorrow. I will never ever forget those words. Down the track we were informed that this information was incorrect, and the doctor denied having said it. It wasn't until after her discharge that we discovered the doctors were in discussions regarding the harvesting of Heidi's organs. There were two thousand pages of hospital records pertaining to Heidi's condition and treatment. We were denied access to these files and eventually our lawyer had to pay a sum of \$800 to the Gold Coast Community Hospital to obtain them.

Documented in black and white were the doctors' statements that Heidi was brain dead and subsequent discussions about donating her organs. At this stage Heidi was responding to commands to open and close her eyes and was able to squeeze my hand. Heidi was in an induced coma for two days and on the third day the doctors reduced sedation to gauge Heidi's response. If Heidi was not responsive, the plan was to put Heidi back into a coma so that there was less stress on her brain, allowing it time to heal. However, when the sedation was reduced, the doctors left Heidi in a state of semi coma. They did not use any available methods such as hypothermia (cooling Heidi's body to prevent extensive swelling of her brain) or opening her skull to release pressure.

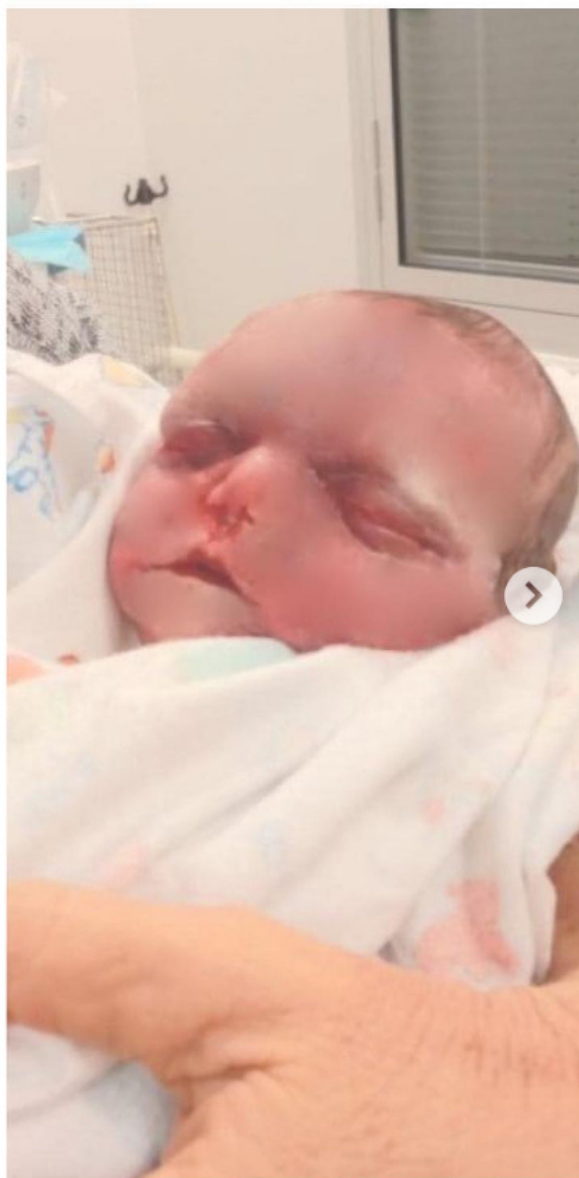
We were told that Heidi's brain injury was not treated as there were no suitable medications to do so. We offered a Chinese medicine (an gong nui huang wan) along with supporting literature stressing the importance of administering the drug in the acute stages soon after the injury was sustained.

The doctors told us they would think about our request as well as other treatments we offered including Ambrotose complex powder, cannabis oil, Stilnox, and a medication for Parkinson's Disease which has been proven to have positive effects on similar types on brain damage. The Therapeutic Goods Administration granted us permission to treat our daughter with Chinese medication and in the same email they acknowledged the reported injury from the 🤔. However, in the hospital files we had to fight to obtain, it was stated that Heidi's cardiac arrest was due to unknown causes with the added assumption that Heidi had fallen down the stairs without any supporting evidence pertaining to this. On the 8th of May 2022 the hospital ordered a blood infusion of two units of blood for Heidi. The very next day, 9th of May 2022, baby Grace's strong heartbeat stopped, and at thirty-four weeks gestation, Heidi's baby died in utero.



The hospital presented us with the option of delivering the baby or turning off Heidi's life support to allow her to pass along with her baby. That evening the hospital made an urgent application to the Office of the Public Guardian (OPG) seeking that Heidi's life support be withdrawn without delivering the baby. We demanded that the doctors remove the deceased baby before sepsis set into Heidi's womb and killed her. The baby was induced two days later on the 11th of May 2022 and taken to the coroner for autopsy.

Heidi's baby was buried by her father and his family in Allambie Garden, Nerang on the 19th of August 2022 while Heidi lay in her hospital bed. Due to conflict within our families and their blatant disregard for our incapacitated daughter's wishes, my husband and I did not attend the memorial service. We visit the site where our granddaughter Grace is laid to rest often.





After a total of three-hundred and twenty nights, Heidi was discharged from the hospital in October 2022. Heidi's Glasgow Coma Scale (GCS) ranged between three and nine while in the hospital. Since being at home for ten months, her GCS has reached eleven. A score of fifteen is full responsiveness, while eight or lower suggests a state of coma. At home Heidi is aware of her surroundings and is able to follow people with her eyes and move her limbs. She has a twenty-four-hour high care regime that continues daily, seven days per week.

Heidi relies upon specific equipment at home which the hospital promised to deliver. The items that actually arrived were wrong. She required a wheelchair and a bed which we had to source ourselves through suppliers. We are still awaiting the correct hoist. The National Disability Insurance Scheme gave us a hard time, stopping the carers from assisting me with Heidi's hospital visits and offering some respite from Heidi's full-time care.





Not only was the demand of high care stressful but I had to watch the hospital staff make countless mistakes. I actually had to stop the nurses giving Heidi the wrong medication at the wrong time. They didn't appear to be correctly trained for high care. The restriction has now been lifted but has left me with a lot of scarring due to sleep deprivation while providing round-the-clock care to Heidi. The care regime currently consists of morning care, washing, applying creams, pressure care, water flushes, Nepro food via peg feed, medication, exercises, joint massage, bowel management, eye, and oral care. She also has weekly acupressure and acupuncture. While under the care of an APHRA accredited Chinese doctor, Heidi is becoming more aware of us.

The 🦠😞 will affect many people. No one is bulletproof. Some will suffer unimaginably. Some will die. People should not be divided over 😞. The people need to unite against a government-imposed mandatory policy that suits only the government, not the people. We must not be blind; we must stop believing the government and understand they rely on us using the media to spread their misinformation. Heidi always thought of everyone else before herself and if she were able, I believe she would campaign against the 🦠😞.

Our daughter Heidi is a victim of the mandatory policy and her thirty-four-week-old baby died as a consequence. The pain of losing our child and the baby will never go away.

Heidi trusted, helped, and loved too much. Now she pays the price for her kindness as her life is destroyed forever.



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Heidi Strbak  
Coomera, QLD

📌#: FK 0892

Heidi's story is told from her mother Diane Strbak's perspective. Due to suffering a major cardiac arrest which left her in a state of semi coma, Heidi is currently unable to share her experience personally. She requires around-the-clock care and a costly treatment regime. Heidi and her unborn baby girl have been betrayed by the establishments supposed to protect them. Their ordeal has been nothing short of horrifying. If you would like to support the Strbak family you can contact Heidi's parents at: Jan @hityseth5 Diane @dianestrbak

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Please use this story respectfully to send a strong message to the world. This is not for entertainment purposes. This is life and death.

Edited · 4d

knipeyy This is close to the worst one yet.

4d · 329 likes

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angelat\_74 How on earth are people not yet outraged? They were more outraged at us speaking out prior to the rollout. How are they not in the streets by now? These stories are horrific!

3,754 likes

4 DAYS AGO

Comments on this post have been limited.

## My Take...

On Sep. 12, 2023, the Canadian government announced that new Moderna COVID-19 mRNA boosters (XBB.1.5) were approved, and recommended that all pregnant women get the shots, at all stages of pregnancy, despite NO STUDIES done to ensure safety in pregnancy.

This is medical malpractice, medical malfeasance, this is criminal.

I have written 12 substack articles on the dangers of COVID-19 mRNA vaccines in pregnancy, both to the fetus and to mom.

The dangers of COVID-19 mRNA vaccines in pregnancy can be summarized as follows:

- 1st trimester (0-12 weeks) - [congenital malformations](#) of heart, brain, limbs, fetus stops growing, miscarriage
- 2nd trimester (13-26 weeks) - [fetus stops growing](#), cardiac arrest, pulmonary hemorrhage, miscarriage, stillbirth
- 3rd trimester (27-40 weeks) - fetus stops growing, cardiac arrest, pulmonary hemorrhage, [STILLBIRTH](#), [preterm labor](#)
- at all stages of pregnancy (mom) - high risk of mom having [cardiac arrest](#), blood clots, blood pressure issues, aneurysms, brain bleeds, strokes, turbo cancer, dying in their sleep, [sudden death](#)
- [during delivery](#) - increased risk of death [during delivery](#), mostly from bleeding and clotting issues
- postpartum period (baby)
  - baby can develop [myocarditis](#)
  - baby can develop rare cancers
  - baby can suffer [sudden infant death](#)
- postpartum period (mom)
  - mother can suffer [blood clots \(most common\)](#), infection and sepsis, depression, psychosis, [stroke](#), [turbo cancer](#), sudden cardiac arrest, [sudden death](#)
- [breastfeeding](#) - breast milk contains LNPs/mRNA/spike protein
  - baby can suffer seizures, swollen lymph nodes, rashes, blood in urine and stool and can suffer sudden death
  - discoloration of breast milk with unknown consequences
  - decrease and cessation of milk production
  - mother can suffer bleeding, miscarriage of new pregnancy

CONCLUSION: None of the COVID-19 vaccines were ever tested for safety in pregnancy.

AstraZeneca and J&J are now off the market for clotting issues. It is unknown how many pregnant women and babies were harmed by them.

Pfizer & Moderna COVID-19 mRNA vaccines continue to injure and kill pregnant women and their babies by the thousands.

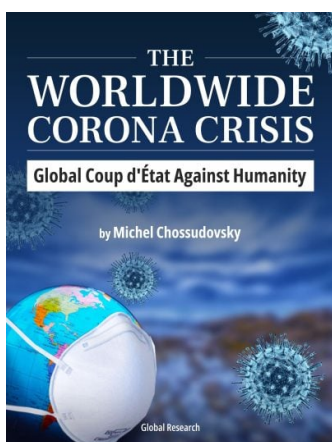
[Newly approved \(Sep.12, 2023\)](#) Pfizer & Moderna COVID-19 mRNA boosters XBB.1.5 are just as dangerous as previous versions of these vaccines - manufacturing process and poor quality control are the same, same LNPs, same contaminants (DNA plasmids, metallic fragments).

These products must be taken off the market immediately and everyone involved in authorizing, recommending and administering these products to pregnant women must be criminally prosecuted.

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by Michel Chossudovsky

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