

## New German Study: All COVID mRNA Vaccinated Children Are at Increased Risk of Cancer

New German study proves IgG4 elevation in children 5-11 one year after taking Pfizer COVID-19 mRNA vaccines

Theme: Science and Medicine

By Dr. William Makis Global Research, October 07, 2024 COVID Intel 5 October 2024

Below is an excerpt from an article on <u>The People's Voice</u>:

A German peer-reviewed study has found that children who received two doses of Pfizer's COVID-19 mRNA vaccine had immune system damage one year after vaccination, and an elevated risk of developing cancer during their lifetime.

A team of German researchers, led by Dr. Robin Kobbe from the Institute for Infection Research and Vaccine Development at the University Medical Center Hamburg-Eppendorf, analyzed blood samples from **14 healthy children aged 5-11**.

# The study tracked their immune responses from the day they received the first dose of Pfizer's vaccine, one month after, and again one year following the second dose.

One year post-vaccination, researchers observed elevated levels of IgG4 antibodies in the children's blood, indicating a shift in their immune response, and elevating the risk of cancer in these vaccinated children.

While prior studies have found <u>elevated levels of IgG4 in adults</u> after repeated <u>mRNA COVID-19 vaccination</u>, Kobbe and his co-authors said their investigation is the first showing it happens in children, too.

The researchers wrote in their report published July 30 in **The Pediatric Infectious Disease Journal**, "IgG4 responses should gain more attention in health and disease, especially in the context of mRNA vaccination."

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## Delayed Induction of Noninflammatory SARS-CoV-2 Spike-Specific IgG4 Antibodies Detected 1 Year After BNT162b2 Vaccination in Children

#### Abstract

Humoral immune responses after BNT162b2 vaccination are predominantly composed of

immunoglobulin (Ig) G1 and IgG3 subclass antibodies.

As previously described in adults, S1-specific and receptor-binding domain-specific IgG4 levels increase significantly 1 year after the second BNT162b2 vaccination in children 5-11 years of age.

Understanding mRNA vaccine-specific IgG4 responses in all age groups is crucial as more mRNA vaccines will reach licensure in the coming years.

Click here to read the full report.

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## My Take...

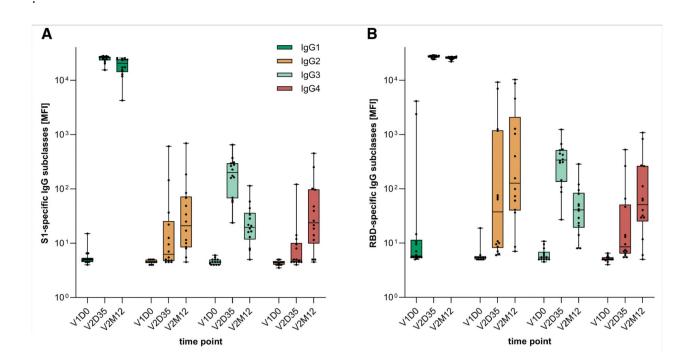
I first presented this risk to the Alberta United Conservative Party (UCP) government on June 17, 2024 at an event called "An Injection of Truth".

I told the 18,000 strong live audience that all children who had COVID-19 mRNA vaccines would have an increased risk of cancer for the rest of their lives.

This is the first study that provides scientific evidence to back up that statement.

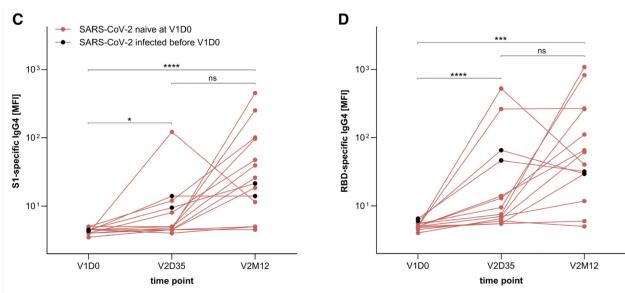
These are the shocking results:

"The children's antibody response 5 weeks after the second BNT162b2 vaccination was dominated by the IgG1 and IgG3 subclasses, which subsequently decreased over time. By contrast, IgG2 and IgG4 levels were relatively low at week 5 after the second vaccination and increased in frequency until the late follow-up for both S1 and RBD (Figure 1A and B)"



"Specifically, S1- and RBD-specific IgG4 antibody levels increased significantly 1 year after

the second vaccination compared to baseline (Fig. 1C and D). As reported by Buhre et al<sup>8</sup> for adults, we observed higher IgG4 levels in infection-naive children at the time of first vaccination compared to the previously infected individuals"

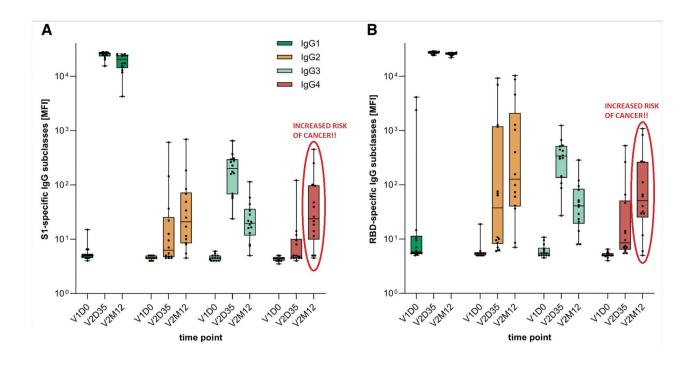


Longitudinal IgG subclass composition of spike-specific antibodies following BNT162b2 vaccination in children. A and B: Subclass composition of (A) S1- and (B) RBD-specific IgG subclasses at baseline (V1D0), 4 weeks (V2D35) and 1 year (V2M12) after the second vaccination. Boxplots indicate median, IQR and min-max range. Dots represent individual study participants. C and D: Longitudinal dynamics of (C) S1- and (D) RBD-specific IgG induction. Cometting lines indicate data points belonging to the same study participant. All data points are reported as median fluorescent intensity (MF1), measured by the Bio-Plex 200 system. Fourteen children [median age, 8.5 (IQR, 64-10.0) years] received 2 does of the mRNA-BNT162b2 vaccine (10 ug. Commiany, BioNTech/Pfizer) with a median interval of 27.5 (IQR, 72-48) days; blood was collected on the day of the first dose (V1D0), as well as 5 weeks [V2D35; median, 35.5 (IQR, 30-45) days] and 1 year [V2M12; 350.5 (IQR, 34-434) days] after the second dose. Two individuals had been infected prior to V1D0 (indicated by black circles in C and D), and all previously unificeted clildren experienced breakthrough SARS-Cov-2-Omicina infection until V2M12. Statistical comparisons between V1D0, V2D35 and V2M12 are only shown so neb by the Kruskal-Wallis equality-of-populations rank test, followed by Dunn's test, Bonferroni-adjusted for multiple comparisons (\*P < 0.05; \*\*P < 0.01; \*\*P < 0.001; and \*\*\*\*P < 0.001). ns indicates not significant.

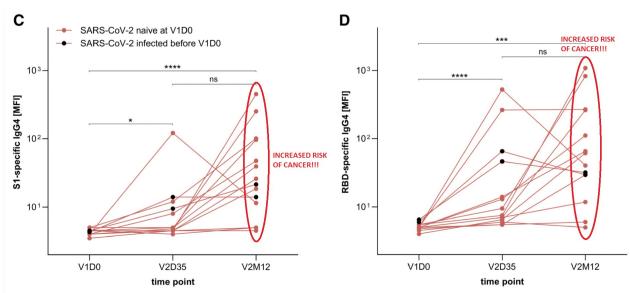
- Fourteen children [median age, 8.5 (IQR, 6.4-10.0) years] received 2 doses of the mRNA-BNT162b2 vaccine (10 μg, Corminaty, BioNTech/Pfizer) with a median interval of 27.5 (IQR, 27-28) days
- blood was collected on the day of the first dose (V1D0), as well as 5 weeks [V2D35; median, 35.5 (IQR, 30-45) days] and 1 year [V2M12; 350.5 (IQR, 344-364) days] after the second dose
- all previously uninfected children experienced breakthrough SARS-CoV-2-Omicron infection until V2M12.

Explanation:

- 14 children had 2 Pfizer COVID-19 mRNA Vaccines
- the Vaccine failed in all of them within 1 year (all of them got infected with Omicron by 1 year follow-up)
- All children have increased IgG4 at 1 year follow-up = all children have increased risk of CANCER (some have higher risk than others, as some have higher IgG4 levels)



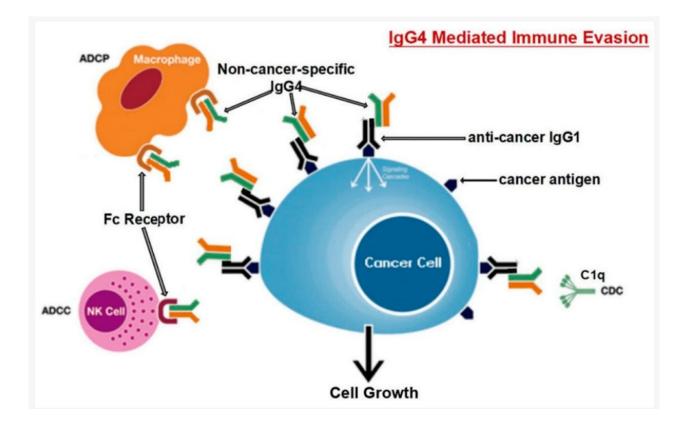
Here is the IgG4 in children who were previously infected with Omicron (black dots) and who weren't (red dots):



Longitudinal IgG subclass composition of spike-specific antibodies following BNT162b2 vaccination in children. A and B: Subclass composition of (A) S1- and (B) RBD-specific IgG subclasses at baseline (V1D0), 4 weeks (V2D35) and 1 year (V2M12) after the second vaccination. Boxplots indicate median, IQR and min-max range. Dots represent individual study participants. C and D: Longitudinal dynamics of (C) S1- and (D) RBD-specific IgG induction. Connecting lines indicate data points belonging to the same study participant. All data points are reported as median fluorescent intensity (MFI), measured by the Bio-Plex 200 system. Fourteen children [median age. 8.5 (IQR, 64–10.0) years] received 2 does of the mRNA-BNT162b2 vaccine (10 µg. Commindy, BioNTech/Pirzer) with a median interval of 27.5 (IQR, 27–28) days; blood was collected on the day of the first dose (V1D0), as well as 5 weeks [V2D35; median, 35.5 (IQR, 30–45) days] and 1 year [V2M12; 350.5 (IQR, 344–364) days] after the second dose. Two individuals had been infected prior to V1D0 (indicated by black circles in C and D), and all previously minificeted children experienced breakthrough SARS-CoV-2-Omicron infection until V2M12. Statistical comparisons between V1D0, V2D35 and V2M12 are only shown for [gG4 subclasses, irrespective of statistical significance. Comparison over time within either HS 10 refBD group was done by the Kruskal-Wallis equality-of-populations rank test, followed by Dunn's test, Bonferroni-adjusted for multiple comparisons (\*P < 0.05; \*\*P < 0.01; \*\*P < 0.001; nat \*\*\*\*P < 0.001). ns indicates not significant.

Our Study on how IgG4 increases risk of Cancer:

 <u>2023 Uversky, Redwan, Makis, Rubio-Casillas</u> – IgG4 Antibodies Induced by Repeated Vaccination May Generate Immune Tolerance to the SARS-CoV-2 Spike Protein



**Figure 3.** The suggested pathway for immune evasion evolved by cancer cells through lgG4 produced from B lymphocytes is depicted diagrammatically. Prolonged exposure to cancer antigens causes B cells to change their class and generate lgG4. With its Fc-Fc binding characteristic, such enhanced lgG4 can interact with cancer-bound lgG as well as Fc receptors on immune effector cells. Increased lgG4 in the cancer microenvironment promotes an efficient immune evasion mechanism for cancer due to its special structural and biological properties. The acronyms ADCC, ADCP, CDC, and NK stand for antibody-dependent cell-mediated cytotoxicity, antibody-dependent cell phagocytosis, complement-dependent cytotoxicity, and natural killer cells, respectively. Reproduced from [101]. This is an open-access article distributed under the Creative Commons Attribution Non-Commercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited, appropriate credit is given, any changes made indicated, and the use is non-commercial.

## Conclusion

All children ages 5-11 years old who took Pfizer COVID-19 mRNA vaccines were found to have elevated IgG4 levels at 1 year after second dose, which means their risk of developing cancer is increased.

This is an absolute bombshell of a study.

The Alberta government was informed of this risk on June 17, 2024. Every day that this government has failed to act since then, it is fully responsible for the harm done to mRNA-vaccinated children.

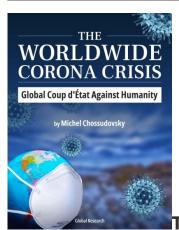
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#### Birds Not Bombs: Let's Fight for a World of Peace, Not War

**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+ peerreviewed medical publications.

#### Featured image <u>source</u>



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

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