

Can Super-Shots and 'Morality Pills' End COVID?

Analysis by [Dr. Joseph Mercola](#) ✓ Fact Checked

STORY AT-A-GLANCE

- › For years, Big Pharma has had its eye on mRNA gene transfer technology. In 2019, a Milken Institute panel specifically discussed how they might achieve the transition from conventional vaccine development to novel mRNA technology
- › A year into the rollout of the COVID jabs, we're realizing just how lacking scientists' understanding of these shots is. Or worse, they do understand, and don't care about the damage they cause
- › The mRNA has been genetically manipulated in a process called "codon optimization," and this process is KNOWN to create completely unforeseen side effects
- › Codon optimization can result in protein misfolding, which in turn has been linked to lethal conditions such as neurodegenerative diseases and heart failure
- › Pfizer appears to have been the most aggressive in their codon optimization. In its Risk Management Plan submitted to the FDA, Pfizer admits that the codon optimization they did resulted in elevated gamma-glutamyl transferase (GGT), which is an early marker of heart failure

For years, Big Pharma has had its eye on mRNA gene transfer technology. In 2019, a Milken Institute panel specifically discussed how they might achieve the transition from conventional vaccine development to novel mRNA technology.¹ You can listen to key excerpts from that meeting in the video below.

Participants included Dr. Anthony Fauci, director of the National Institutes of Allergy and Infectious Diseases (NIAID), and Rick Bright, Ph.D., former director of the U.S. Biomedical Advanced Research and Development Authority (BARDA), now a senior vice president of Pandemic Prevention and Response at The Rockefeller Foundation.

Bright suggested “There may be a need, even an urgent call, for an entity of excitement out there which is completely disruptive, not beholden to bureaucratic strings and processes.”

Reading between the lines, it sounds as though Bright was suggesting a pandemic could help them make this risky transition, as circumventing “bureaucratic strings and processes” would likely be more acceptable in the face of an acute crisis.

Well, by the looks of it, Bright and Fauci got their wish, and the global population is paying the price for their decision to throw bureaucratic strings and processes to the wind, along with the precautionary principle. Many doctors and scientists warned that mRNA-based “vaccines” were ill advised and premature.

The Worst Design Flaw in Medical History

Now, a year into this disastrous rollout, we’re realizing just how lacking scientists’ understanding of these shots are. Or worse, they do understand, and don’t care about the damage they cause.

In an August 2021 Substack article,² British cybersecurity researcher Ehdn Biber reviewed how the mRNA shots were made, homing in on what he believes may be “the worst design flaw in human history.”

The mRNA has been genetically manipulated in a process called “codon optimization,” and this process is KNOWN to create completely unforeseen side effects. “How come Prizer, Moderna, AstraZeneca, Janssen etc. are using a technology that both they and the regulators know will cause unknown results?” Biber asks. Here’s an excerpt from this eye-opening article:

“Trying to tell your body to generate proteins is hard for many reasons. One of them is the fact that when you try to run the protein information via ribosomes which process that code and generate the protein, it can be very slow or can get stuck during the process.

Luckily, scientists found a way to overcome this problem, by doing code substitution: instead of using the original genetic code to generate the protein, they changed the letters in the code so the code would be optimized. This is known as Codon Optimization.

Codons are three nucleotides; nucleotides are the building blocks of your DNA. Here is an example of Codon Optimization: 60% of the codons were altered, 22% of the nucleotides were altered. And yet the end result is that the ribosomes generate the same protein! Same? Well, not so much.

In 2011 Nature Medicine magazine published an article³ called ‘Breaking the Silence.’ It described how codon optimization, which uses this synonymous DNA changes, can trigger disease in a number of ways.

Turns out the protein which was manufactured when codon optimization has different ways it folds and a different 3D shape, and it ‘could cause immunogenicity, for example, which wouldn’t be seen until late-stage clinical trials or even after approval.’ This statement relates to the NORMAL approval cycle. The COVID vaccines went via an accelerated one.”

Biber cites a quote by Chava Kimchi Sarfaty, Ph.D., a principal investigator at the U.S. Food and Drug Administration: “We do not believe that you can optimize codons and have the protein behave as it did in its native form.”

In summary, codon optimization can alter the way proteins fold and function, and Sarfaty warned that “The changed form could cause immunogenicity, for example, which wouldn’t be seen until late-stage clinical trials or even after approval.”⁴ If the FDA knew all of this back in 2011, why have they not raised objections against codon optimization being used in the making of the COVID jabs?

Protein Misfolding Linked to Many Pathologies

Biber goes on to cite a number of studies linking protein misfolding to a variety of serious pathologies, such as the neurodegeneration seen in Alzheimer's, Parkinson's disease and heart failure.⁵ As explained in the 2017 paper, "Protein Misfolding Diseases":⁶

"The majority of protein molecules must fold into defined three-dimensional structures to acquire functional activity. However, protein chains can adopt a multitude of conformational states, and their biologically active conformation is often only marginally stable.

Metastable proteins tend to populate misfolded species that are prone to forming toxic aggregates, including soluble oligomers and fibrillar amyloid deposits, which are linked with neurodegeneration in Alzheimer and Parkinson disease, and many other pathologies."

"If it is so problematic, why do manufacturers use it?" Biber asks. The answer is because in order for the injection to work, they need higher levels of protein expression than is naturally possible.

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Pfizer appears to have been the most aggressive in their codon optimization, and it's no secret that the heavy alteration of the mRNA might cause protein misfolding and "splicing anomalies." As noted in a March 2021 paper:⁷

“BNT162b2 vaccine against COVID-19 is composed of an RNA having 4284 nucleotides, divided into six sections, which bring the information to create a factory of S spike proteins, the ones used by SARS-CoV-2 ... to infect the host. After that, these proteins are directed outside the cell, triggering the immune reaction and antibody production.

The problem is the heavy alteration of the mRNA: Uracil is replaced to fool the immune system with pseudouridine; the letters of all codon triplets are replaced by a C or a G, to extremely increase the speed of protein synthesis; replacement of some amino acids with proline; addition of a sequence (3'-UTR) with unknown alteration ...

An eventual mistranslation has consequences on the pathophysiology of a variety of diseases. In addition, the mRNA injected is pre-mRNA, which can lead to the multiple mature mRNA's; these are alternative splicing anomalies, direct source of serious long-term harm on the human health.

In essence, what will be created may not be identical with protein S spike; just an error in translational decoding, codons misreading, production of different amino acids, then proteins, to cause serious long-term damage to human health, despite the DNA is not modified, being instead in the cell nucleus and not in the cytoplasm, where the modified mRNA arrives.”

Pfizer Jab Raises Early Death Marker

In its BNT162b2/Comirnaty Risk Management Plan submitted to the FDA to get Emergency Use Authorization, Pfizer even admits that the codon optimization they did resulted in elevated gamma-glutamyl transferase (GGT),⁸ which is an early marker of heart failure.

Elevated GGT is also an indicator of insulin resistance, cardiometabolic disease,⁹ liver disease¹⁰ and chronic kidney disease.¹¹ When your GGT is elevated, it also means your liver is under stress. The ideal level of GGT is below 16 units per liter (U/L) for men and

below 9 U/L for women. Above 25 U/L for men and 18 U/L for women, your risk of chronic disease increases significantly.

What's more, as your GGT level rises, your glutathione goes down. This is part of the equation explaining how elevated GGT harms your health. By elevating your glutathione level, you will lower your GGT.

Yet, despite the fact that Pfizer acknowledges these risks, they did not conduct studies to assess pharmacological safety, genotoxicity or carcinogenicity. "How did they manage to avoid testing?" Biber asks.¹² The answer is nothing short of shocking.

Crucial Studies Were Skipped

Under normal circumstances, pharmacological safety, genotoxicity or carcinogenicity studies are done during animal studies. No animal studies were done for the COVID jab; hence none of these studies were performed, period. Thanks to the fast-tracking, the mRNA jabs went straight into human trials. And the FDA apparently has no intention of demanding Pfizer conduct tests to determine the health impacts of their codon optimization. As noted by Biber:

"The manufacturers know about the potential risk. The regulators know about the potential risk. Yet regulators don't test V products as gene therapy, and do not put in place codon optimization risk mitigation plan. IF YOU DON'T MEASURE RISK IT DOESN'T GO AWAY."

It's just astounding that they rolled out these shots to billions of people worldwide, knowing full well that the shots have the ability to cause serious problems.

Another problem raised in Biber's article is the fact that cell types differ widely in their coder usage, so determining how the mRNA is translated in one type of tissue reveals nothing about the translational kinetics in a different tissue. None of the COVID jab makers have tested their product on all of the tissue types available (51 in all).

“Translational kinetics can lead to translational pauses, which have a role in modulating protein conformation, can lead to structural changes, increase immunogenicity and change performance. This has been reported since the 90’s. Safe, right?” Biber writes.¹³

Summary

So, to summarize as concisely as I can, Pfizer, Moderna and Janssen all modified the genetic code of their RNA to ensure that the resulting spike protein that your body makes would be more stable, and to bypass protective mechanisms in the cells that prevent viral replication.

Without this change, your immune system would simply destroy the mRNA before your cells could start producing spike protein. The problem is that this codon optimization, this genetic rewriting, causes translation errors when your ribosomes – the “machinery” inside your cells that synthesize proteins – process the code.

These translation errors can result in misfolded and malfunctioning proteins. We already know that some protein misfolding is implicated in neurodegenerative diseases and sudden heart failure. But we really have no idea what the misfolded proteins created by the COVID jabs might do. The consequences may be identical to other protein misfolding, or they might result in entirely novel conditions.

To learn more, be sure to listen to the “Planet Lockdown” interview with Alexandra Henrion-Caude, Ph.D., a geneticist and researcher at the French Institute of Health, featured at the top of this article. She explains what RNA is, the theory of how the COVID jabs are supposed to work, and some of the main concerns surrounding their use.

She points out that, if you wanted to create a vaccine, you would not target the part of the virus that is most prone to mutation (the spike protein). One would select a part of the virus that is less likely to mutate. By targeting the spike protein, they set themselves up to produce multiple vaccines to keep up with mutations, so choosing the spike protein might well have been a financial decision.

Moreover, by selecting the spike protein as the target, they chose to program your body to produce the most toxic portion of the virus. We know that the spike protein alone is pathogenic – producing blood clots and abnormal bleeding, for example – even without the rest of the virus. Clotting and/or hemorrhaging is due to the fact that your immune system will attack and destroy the cells inside your vascular system that produce spike protein.

What Can You Do if You Got the COVID Jab?

As discussed above, due to the modification of the spike protein mRNA that was used in the vaccine to make it “more effective,” translation errors can result in misfolded proteins with very serious health complications.

Fortunately, your body has a process that is designed to correct for this misfolding, because about one-third of the proteins your body makes are misfolded from the moment they’re made.

There are two simple strategies you can use to target these proteins for refolding or elimination. The first one I have spoken about frequently in the past, and that is time-restricted eating, which is accomplished by eating all your meals within a six- to eight-hour window that ends at least three hours before bedtime. This will stimulate a process called autophagy while you sleep, and in the morning, as your fasting time goes past 14 hours.

The second, and less well-known strategy, is sauna bathing on a regular basis. If the sauna is hot enough, your body will make heat shock proteins that will refold or eliminate misfolded proteins. You just need to make sure it is hot enough and that you’re really sweating profusely. Biometrics you can measure is to increase your temperature by an oral thermometer to around 101 to 102 degrees Fahrenheit.

Additionally, you will likely lose 1 to 2 pounds from your sweat. Just be sure to drink enough water and replace the salt you lose. Also, many saunas are loaded with high

EMFs, so choose your sauna carefully. Many new infrared saunas have eliminated the magnetic fields but virtually all of them have high electric fields that can be problematic.

Morality Pills to Subdue Dissent?

Knowing what we know already, there's clearly cause for deep concern about the COVID jabs. It seems unquestionable that they can cause very serious health problems, both acutely and in the long term. Despite that, vaccine makers, national health agencies and political leaders are pushing forward, calling for every man, woman and child to get dosed multiple times.

There is simply no doubt that the COVID jabs are the greatest human experiment in history. The ramifications are already beyond devastating, but we really have no idea as to what the full extent will be.

The same can be said for every other pandemic measure employed, from universal masking and social distancing to lockdowns. Not one is backed by scientific evidence showing effectiveness, and we've only scratched the surface when it comes to assessing the damage they've caused.

To subdue dissent against this unethical experimentation on the public, at least one person has suggested an outrageously radical idea: "Morality pills." Basically, drug the population into submission. As reported by Forbes in August 2020:¹⁴

"... bioethicist Parker Crutchfield has suggested a controversial approach to battling the pandemic¹⁵ – namely a 'morality pill.' Specifically, he suggests that widespread administration of psychoactive drugs could provide 'moral enhancement' that would make people more likely to adhere to social norms such as wearing masks and adhering to social distancing guidelines ...

Crutchfield [notes] that those 'who need moral enhancement are also the least likely to sign up for it.' He therefore explores involuntary methods, such as legally requiring people take the morality pill or administering the drug secretly via the water supply.

In other words, mandating people take a 'morality pill' doesn't alter the fundamental moral calculus of any proposed policy. It merely makes enforcing good (or bad) laws easier for the authorities."

Crutchfield's suggestion seems ripped straight out of a dystopian novel, but it fits hand in glove with the technocratic ideology, which basically states that technocrats – a small, powerful elite who believe they can achieve immortality through transhumanism – are smarter and worthier of life than everyone else, and therefore have the right to dictate moral truth to the masses.

Editor's Note: After widespread criticism of its commentary on Crutchfield's morality pills, Forbes changed the article's headline in February 2022¹⁶ to "No, Don't Use a 'Morality Pill' to Stop the COVID Pandemic" and added an author's note explaining the headline was changed to "more clearly state" the author's personal position.

In Hot Pursuit of a Universal Super-Shot

Many experts are now admitting the pandemic is over and done with,¹⁷ but the pandemic industrial complex is not willing to let go of its brand-new golden goose. As discussed in the 2019 Milken Institute meeting, they're in hot pursuit of universal mRNA-based "super-shots."

In 2019, Fauci's focus was a universal influenza vaccine. Today, the goal is a universal COVID jab to protect against both old and new strains.¹⁸ One way to achieve that could be to target the nucleocapsid protein (n-protein), located inside the virus, rather than the spike, as is currently done.

By targeting a portion of the virus that doesn't mutate much from one strain to the next, you might end up with broader protection. The question is, why didn't they do that from the start? Or – perhaps a better question might be: Does this have anything to do with the "promising" mRNA HIV vaccine that NIAID director Dr. Anthony Fauci announced in December 2021?

As coauthor of the research paper on this vaccine, Fauci explained that it works like the COVID mRNA shots, but doesn't carry instructions for the spike protein. Rather, it delivers coded instructions for teaching two key HIV proteins to produce virus-like particles of themselves in muscle cells.¹⁹

No matter the reason for how the upcoming HIV mRNA jab works, despite decades of effort, polyvalent vaccines have all come up short. And considering the lackadaisical approach taken with the current COVID jabs, one has to wonder whether vaccine developers and regulators can be trusted to produce a safe and effective polyvalent vaccine.

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