# Bombshell Study Shows mRNA Vaccines May Actually Impair Long-Term Ability to Fight Covid Infections

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Kyle Becker
May 28



A medical study conducted with joint research from scientists at a number of prestigious health institutions shows that mRNA vaccines may actually impair the immune system's ability to fight Covid-19 long-term.

The study analyzed data collected from Moderna's randomized control trial for its mRNA SARS-CoV-2 vaccine from July 2020 through March 2021.

The complex study entitled, "Anti-nucleocapsid antibodies following SARS-CoV-2 infection in the blinded phase of the mRNA-1273 Covid-19 vaccine efficacy clinical trial," shows that vaccinated individuals had impaired ability to produce specific kinds of Covid-relevant antibodies versus those who were unvaccinated but had natural immunity from prior infections.



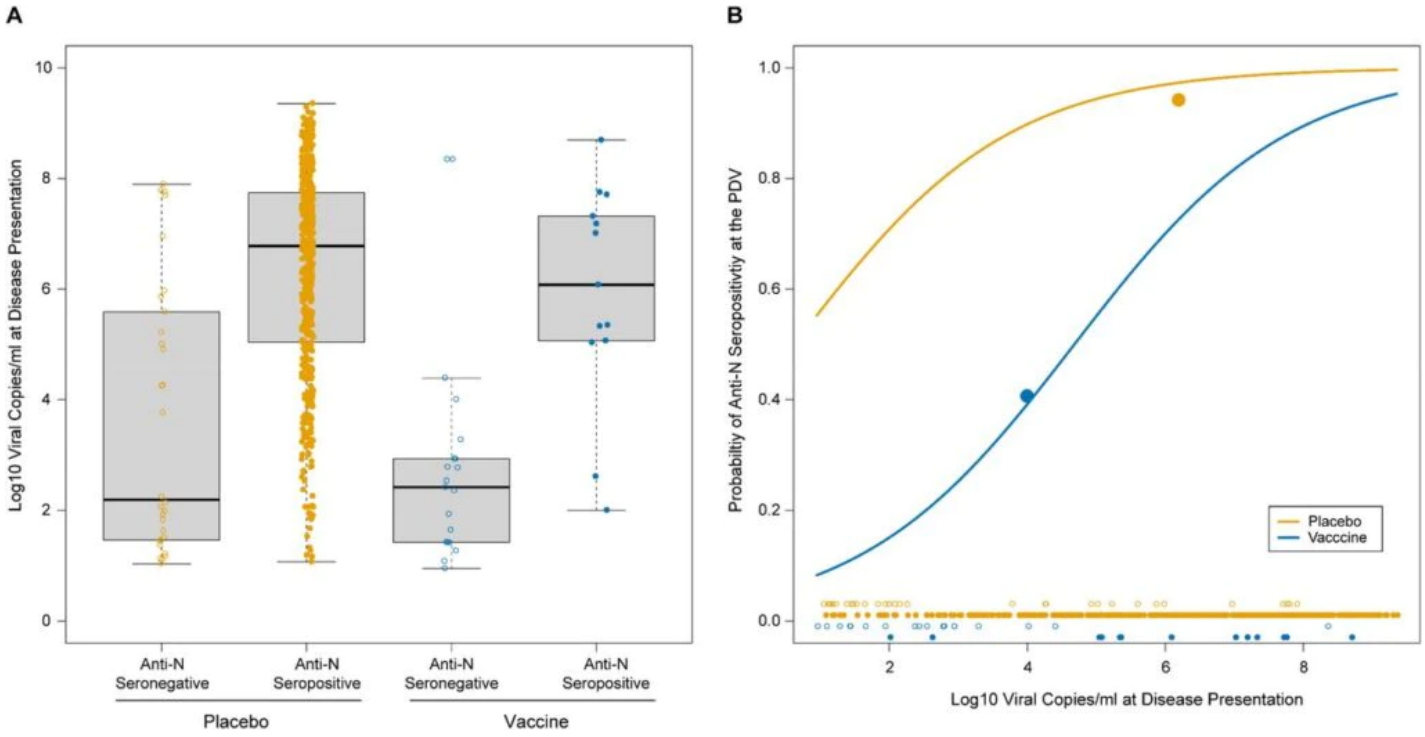
"These data show that, among the participants with PCR-confirmed Covid-19 disease, anti-N Ab seropositivity [a particular kind of antibody] at a median of 53 days post diagnosis occurred in 40% of the mRNA-1273 vaccine recipients vs. 93% of the placebo recipients," the study states.

Thus, vaccinated individuals had less than half the seropositivity rate as unvaccinated individuals with natural immunity, according to the study. The effect that authors discuss is caused 'seroconversion,' meaning the transference of infection to antibody protection in the immune system.

"While an increase in seroreversion cannot be ruled out, given the short time frame the more likely explanation is a **vaccine-induced reduction in seroconversion**," the authors state. "Anti-N seropositivity correlated with illness visit SARS-CoV-2 viral copy number, with each log increase in viral copy number nearly doubling the odds of anti-N seropositivity at the PDV. As the viral copy number on the day of the illness visit in mRNA-1273 vaccinated Covid-19 cases has been shown to be 100-fold lower than that in placebo recipient Covid-19 cases, the lower anti-N seropositivity in the mRNA-1273 recipients could be partly explained by their reduced exposure to N-antigen."

The authors proffered alternative explanations for the phenomenon.

"However, strong vaccine effects remain; at 2.0 log10 copies/ml the predicted probability of seroconversion was 0.15 for vaccinated Covid-19-cases compared to 0.71 for placebo recipient Covid-19 cases," the study continues. "This may be due to a difference in the live virus replication between vaccine and placebo recipients, which cannot be differentiated by the RT-PCR test. Another potential explanation is that the vaccine has much larger effects on reducing replication outside the nose, as was shown in a study evaluating the mRNA-1273 vaccine against SARS-CoV-2 challenge in a non-human primate model. There may be other features of the initial course of infection that influence anti-N Ab seroconversion and that are affected by vaccination. Interestingly, the average viral copy number across post-Covid-19 illness visits was found to be a worse predictor of PDV seroconversion."



The researchers also added that the natural immunity rate stemming from prior infection is not tested at 100%.

"Our study has shown that anti-N seropositivity as evidence of previous SARS-CoV-2 infection is complex and may be subject to large vaccine effects," the study added. Multiple studies have reported that some fraction of PCR-confirmed SARS-CoV-2 infections are not accompanied by seroconversion; estimates range from 5% to 36%. While low rates of anti-N seroconversion in fully vaccinated (BNT162b2) hospital healthcare workers were observed in a large seroprevalence study in Ireland, our study provides the first evidence from a randomized, placebo-controlled trial with systematic surveillance for infection. This effect has consequences for interpretation of endpoints in vaccine trials, observational studies, serosurveys, and for monitoring and responding to the ongoing pandemic."

The seroconversion rates were also affected by viral loads, the study found.

"Approximately 60% of participants from the placebo cohort who experienced very mild infection, with low viral loads, were found to have anti-nucleocapsid antibodies, compared to roughly 10% of vaccinated subjects," one analysis of the study notes. "Among those with higher viral loads – qualifying as mild cases, rather than very mild – 71% of the unvaccinated developed anti-nucleocapsid antibodies, compared to just 15% of those in the vaccine group."

However, a Johns Hopkins study showed that 99% of unvaccinated people known to have Covid infections had robust “natural immunity” that did not diminish for at least 650 days. The rate for anti-nucleocapsid antibodies was 96% seroconversion still detected at 650 days.

**Table. Population Characteristics and Antibody Result Stratified by COVID-19 Diagnosis, Confirmed or Suspected**

| | | No. (%) | | | |
|---|---|---|---|---|---|
| | | COVID-19 infection | | Believes never had COVID-19 | |
| | Total, No. (%) | Confirmed | Unconfirmed | | *P* value[a] |
| No. | 816 | 295 | 275 | 246 | |
| Age, median (IQR), y | 48 (37-59) | 47 (37-59) | 48 (37-58) | 49 (38-62) | .49 |
| Men | 395 (48) | 140 (47) | 132 (48) | 123 (50) | .83 |
| Women | 421 (52) | 155 (53) | 143 (52) | 123 (50) | |
| Race[b] | | | | | |
| African American/Black | 12 (2) | 4 (1) | 7 (3) | 1 (0.4) | .01 |
| Asian | 35 (4) | 16 (5) | 12 (4) | 7 (3) | |
| White | 669 (82) | 228 (77) | 221 (80) | 220 (89) | |
| Other | 100 (12) | 47 (16) | 35 (13) | 18 (7) | |
| Hispanic[b] | 106 (13) | 43 (15) | 39 (14) | 24 (10) | .40 |
| Attended college | 518 (64) | 179 (61) | 162 (59) | 177 (72) | .004 |
| Mask use | | | | | |
| Routinely | 114 (14) | 53 (18) | 28 (10) | 33 (13) | <.001 |
| Sometimes | 214 (30) | 103 (35) | 76 (28) | 68 (28) | |
| Rarely | 355 (44) | 117 (40) | 122 (44) | 116 (47) | |
| Never | 100 (12) | 22 (8) | 49 (18) | 29 (12) | |
| Nucleocapsid-positive[c] | 440 (54) | 280 (95) | 138 (50) | 22 (9) | <.001 |
| Anti-RBD-positive | 471 (58) | 293 (99) | 152 (55) | 26 (11) | <.001 |
| Antinucleocapsid/anti-RBD agreement | 779 (95) | 248 (96) | 219 (92) | 215 (98) | <.001 |
| Anti-RBD, U/mL[c] | | | | | |
| Median (IQR) | 158 (52-499) | 205 (61-535) | 131 (35-402) | 82 (19-172) | .005 |
| ≥250 | 185 (23) | 129 (44) | 50 (18) | 6 (2) | <.001 |
| ≥500 | 117 (14) | 79 (27) | 33 (12) | 5 (2) | <.001 |
| ≥1000 | 63 (8) | 43 (15) | 16 (6) | 4 (2) | <.001 |
| Days since COVID-19 diagnosis, median (IQR)[c] | | 261 (56-387) | | | |

Abbreviation: RBD, receptor-binding domain.

[a] $\chi^2$ test was used for categorical variables (Fisher exact test for rare outcomes), and Wilcoxon rank-sum test for continuous variables.

[b] Race and ethnicity data were collected to perform weighted random sampling among the 3 groups for antibody testing. Participants could select from predefined categories African American/Black, Asian, White, or other. Ethnicity was self-reported. Participants could select among predefined categories Hispanic/Latino yes/no.

[c] Among participants with positive titers.

The authors provided further discussion on why breakthrough infections (BTIs) appear to seroconvert at lower rates than unvaccinated prior infections.

"We found that participants with infection detected prior to vaccination, and those with infections diagnosed via serology prior to full vaccination, remained seropositive for the period of observation (to the PDV)," the authors stated. "Reductions in seroconversion rates were most evident in those who met primary endpoint Covid-19 case criteria, i.e. became ill 14 or more days after full vaccination. Whether PCR positive, asymptomatic breakthrough infections seroconvert at reduced rates will require study in cohorts with systematic asymptomatic testing."



In late March, the Director for the Centers for Disease Control and Prevention Rochelle Walensky testified that 95% of Americans have some protection to Covid-19.

"We also know that in this country because of vaccines because of boosters and because of protection from prior disease, infection-induced immunity (natural immunity) that about 95% of people in this country have some level of protection," she said.

The CDC released a study in January called "COVID-19 Cases and Hospitalizations by COVID-19 Vaccination Status and Previous COVID-19 Diagnosis — California and New York, May–November 2021." The findings that natural immunity provided protection superior to vaccinated immunity were reported by Agence France-Presse.

"During America's last surge of the coronavirus driven by the Delta variant, people who were unvaccinated but survived Covid were better protected than those who were vaccinated and not previously infected," AFP reported.

The CDC claimed there were 146.6 million prior infections in the United States as of September 2020. Based on its calculation of four infections for every reported case, and the currently reported 80 million "cases," this would put prior infections and natural immunity potentially as high as 320 million people.



As Becker News earlier reported, a CDC-sponsored database in partnership with Yale, Harvard, and Stanford universities showed that the overwhelming majority of Americans had natural immunity from prior infections.

The great majority of U.S. states had prior infections ranging between 70% and 94%. Only Hawaii had prior infections data that fell below 50%. The prior infections average for all U.S. states was 78%. After the Omicron and BA.2 variant waves, that percentage is sure to be much higher.

The medical study's preliminary conclusions are pending peer-review; however, the test results are sure to fuel even more controversy over the ongoing 'booster' shot push. The current Covid-19 variants are entering an endemic phase and can now be safely compared to the seasonal flu.



Nostradamus May 28

We are also aware that there have been SARS-Cov-2 reverse zoonotic jumps to your pets but don't worry.

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https://librti.com/page/view-video?id=1515

At Schizer, we care about your kids and your pets (1 minute video):

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Please renew your Monthly booster subscriptions to protect yourself, your pets and your family from the upcoming iMicron variant.

We apologize for running out of the alphabet letters for the new variants - quackcines are breeding more variants than originally thought.

We care,

CEOs of Murderna and Schizer

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Dr. Red Pill Fact Checker: They make sh$t!

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https://librti.com/page/view-video?id=1438

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Devvormer May 31

The study shows that vaccinated people seroconvert less than unvaccinated people. That's actually what vaccines are meant to do. That's a good thing. You are a freaking idiot you can't even understand this study.

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