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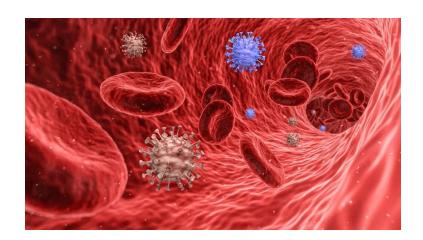
September 2, 2023

Health

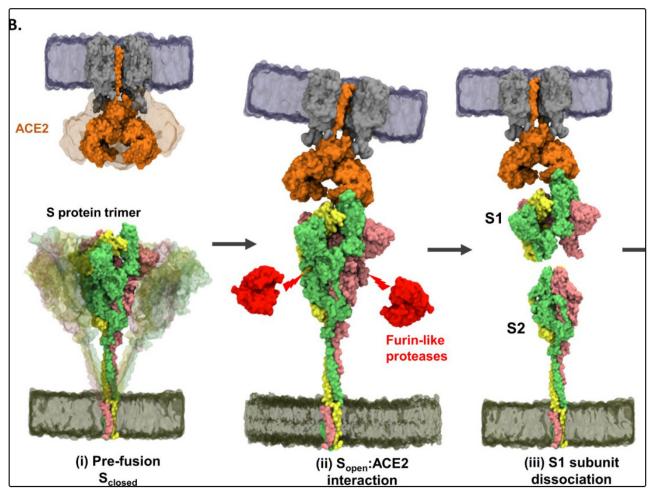
Do 50% of Pfizer & Moderna-Vaccinated People Produce Spike Protein Forever?

Dr. William Makis reviews five studies on Spike protein in the blood.

By Influencers



Originally Published on Dr. Makis' Substack



This graphic demonstrates viral entry into a host cell mediated by Spike protein-ACE2 interactions. Click on the image for more detailed information. **Credit: Ganesh Anand, Penn State. All Rights Reserved.**

Several recent studies deal with spike protein in the blood and I will briefly review the following:

- Sep.2, 2022 Zoe Swank et al. (spike in blood of long COVID patients at 12 mo)
- Sep.12, 2022 Cosentino et al. (does vaxx spike get into blood & cause injury?)
- Jan.4, 2023 Yonker et al. (vaxxed w myocarditis had full spike in blood)

- Jan.17, 2023 Castruita et al. (vaxx mRNA detected in blood of 10% at 28 days)
- Aug.15, 2023 Brogna et al. (spike detected in blood of 50% vaxxed at 6 months!)

Aug.15, 2023 - Brogna et al - Detection of recombinant Spike protein in the blood of individuals vaccinated against SARS-CoV-2: Possible molecular mechanisms

- Spike protein is one of 4 major proteins of SARS-CoV2, it enables recognition of host cell receptor and entry into the host cell
- Both Pfizer and Moderna COVID-19 mRNA vaccines use a modified spike protein - all uridine bases were replaced with methyl pseudouridine (less immunogenic, more stable)
- Both Pfizer and Moderna COVID-19 mRNA vaccines also use a stabilized spike (different from natural spike) that differs by a double amino acid change at position 986 and 987, K986P and V987P the amino acids lysine and valine are both replaced by two proline amino acids in order to stabilize the spike confirmation in an inactive prefusion state (PP-Spike).
- researchers can differentiate natural SARS-CoV-2 spike which can be broken down by tryptic digestion, from Pfizer/Moderna vaccine spike (PP-spike) which can't be digested (because the double amino acid change eliminated the tryptic digestion site).

- Study: 20 were vaccinated with mRNA vaccine, 20 were unvaccinated and uninfected with COVID-19, 20 were unvaccinated but positive for COVID-19.
- Results: 50% of the mRNA vaccinated still have spike protein in the
 blood 6 months after vaccination (and will continue, possibly indefinitely)
- Theories:
- 1. mRNA integrates into some blood cells and spike is continuously produced
- 2. mRNA integrates into bacterial cells in the blood and spike is continuously produced

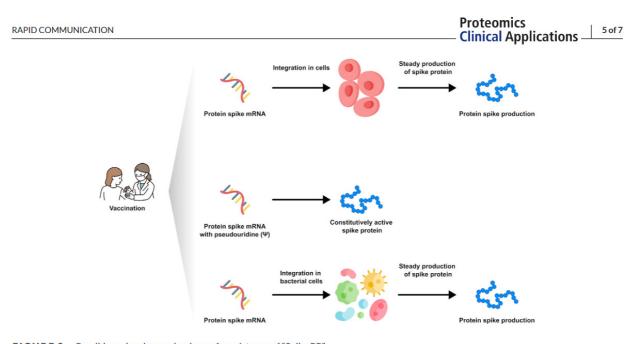


FIGURE 3 Possible molecular mechanisms of persistence of "Spike PP".

Jan.17, 2023 - Castruita et al. - SARS-CoV-2 spike mRNA vaccine sequences circulate in

blood up to 28 days after COVID-19 vaccination

- In Denmark, Hepatitis C patients were monitored for HCV infection
- Study: They extracted RNA from patient plasma in 108 Hepatitis C patients who were COVID-19 mRNA vaccinated
- Results: 10% had full length or traces of COVID-19 vaccine mRNA sequences in the blood up to 28 days after vaccination
- Theory: authors suspect this mRNA is in LNPs which are being slowly released into the blood from the injection site for up to 28 days!

Jan.4, 2023 - Yonker et al. - Circulating Spike Protein Detected in Post-COVID-19 mRNA Vaccine Myocarditis

- Study: looked at 16 adolescents ages 12-21 (13 men, 3 women) with
 COVID-19 mRNA vaccine induced myocarditis vs 45 mRNA vaxxed control subjects
- Results: full length spike protein (unbound by antibodies) was found in plasma of individuals with vaxx induced myocarditis, but none was found in mRNA vaxxed controls.
- elevated spike was seen equally in affected females and males(!!!)
- circulating free spike remained detectable at 3 weeks after vaccination

Sep.2, 2022 - Zoe Swank et al. - Persistent Circulating Severe Acute Respiratory Syndrome Coronavirus 2 Spike Is Associated With Post-acute Coronavirus Disease 2019 Sequelae

- Study: looked at 63 long COVID patients and took blood samples up to 12 months after their 1st positive result
- Results: 60% Long COVID patients had detectable spike protein in plasma up to 12 months.
- In contrast, COVID-19 patients who did not go on to develop Long COVID
 had no spike detectable. They only had detectable S1 within 1st week
 after diagnosis.
- Theory: authors theorize that "SARS-CoV-2 viral reservoirs may persist in the body"
- Problem: some of these patients were COVID-19 vaccinated and they didn't account for the vaccine status and its effects.

Sep.12, 2022 - Cosentino et al. - Does the S protein leak into the circulation, at what concentration, and for how long?

After COVID-19 mRNA vaccination, circulating spike protein originates
 from endogenous production and its concentration will be much higher

in tissues where production occurs(!)

- Roltgen et al. detected vaxx mRNA and spike in axillary lymph nodes up to 60 days after 2nd dose of Pfizer or Moderna vaccines.
- circulating S1 subunit levels from those with severe COVID-19 infection are similar to post mRNA vaccine circulating S1 levels.
- Theory: severe COVID-19 infection and mRNA vaccination could result in similar total systemic amounts of S protein (about 72 billion spikes estimated)
- most virus spike protein remains in respiratory tract while mRNA vaccine induced spike protein production occurs in internal organs and tissues, which can exert more systemic effects (!!!)
- Conclusion: COVID-19 mRNA vaccines under some circumstances induce high and possibly toxic amounts of S protein in organs and tissues, in turn leaking into the circulation.

My Take...

There is a very concerning picture emerging.

Potentially **50% of COVID-19 mRNA vaccinated people** have spike protein in the blood at least 6 months after vaccination or longer, maybe indefinitely!

Potentially **60% of Long COVID-19 patients have spike** protein in the blood at least 12 months after infection,

or longer, maybe indefinitely!

Almost all Long COVID-19 patients are also COVID-19 mRNA vaccinated - is the spike protein in their blood coming from a viral reservoir (hiding in the gut or testes) or is it coming from the mRNA vaccine?!

The 50% of COVID-19 mRNA vaccinated who have spike in the blood (possibly indefinitely), are getting spillover of spike into the blood due to much higher concentrations of spike being produced in organs and tissues (causing local damage) - how did the spike get into those organs and tissues?

COVID-19 vaccine Lipid Nanoparticles with mRNA leak into the blood circulation for up to 28 days after vaccination - their circulation allows the vaccine mRNA to get delivered into various organs and tissues where spike gets produced.

COVID-19 mRNA vaccinated with myocarditis have spike circulating in the blood, while those without myocarditis don't have any!

The vaccine spike is causing the injuries!

This means that spike detoxing is more important than ever for many people (those

suffering from Long COVID, possibly 50% of all vaccinated individuals, those who react to external shedding, etc).

In the coming days, I will write a separate Substack on the latest on spike protein detoxing.

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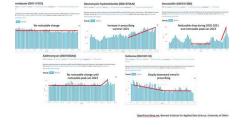
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