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Home › COVID-19 › mRNA 'vaccines' must be banned once and for all

# **mRNA ‘vaccines’ must be banned once and for all**

By **Angus Dalglish** September 29, 2023



THOSE of us who knew from the beginning that the sequence of CoV-SARS-2 contained inserts which could not have possibly occurred naturally, and were similar to ones that had already been published from the Wuhan laboratory, have had to endure unbelievable scorn, scientific ostracism and the ignominy of being ‘cancelled’ by the MSM as well as by professional colleagues for nearly three years now.

In the summer of 2020 a paper I co-authored, describing the findings of an Anglo-Norwegian team of scientists who had demonstrated unique ‘fingerprints’ of laboratory

manipulation in the Covid virus, was suppressed in both the US and UK. This was at the time that the World Health Organization, leading science journals and others were going to huge lengths to persuade us that Covid was a natural occurrence, and that we should spend a lot more money to fight any such future threats.

Only now does the *Telegraph* (uncritically) report that the US government is no longer going to fund the research it denied doing for nearly three years and the MSM sat on. Yet it has been an open secret for anyone who follows primary sources of information (the ones ignored by the MSM and the BBC specifically, reported as misinformation by Ofcom and targeted by the Orwellian Counter-Disinformation Cell of the UK government) that mRNA vaccines did not do what it says on the vial, as it were.

First the ‘vaccine’ did not stay at the site of injection as promised but travelled throughout the body and were found at post-mortems to be everywhere.

Accusations of dramatic variations in batch-to-batch variability – an absolute ‘no no’ in vaccine manufacture

protocols – which could explain why side effects were more common in some batches than others were denied but were borne out by definitive Danish research reported here. <https://www.conservativewoman.co.uk/vaccine-dangers-is-this-the-strongest-evidence-yet/> These alarming concerns seem to have been brushed off by the regulators when they should have immediately begun investigating them in depth.

All the while the regulatory authorities and politicians, parroting their ‘highest standards’ assurances, have repeatedly declared the mounting disturbing UK Yellow Card and US VAERS adverse event reports to be nothing to be worried about.

Last June, whistleblowers led by the scientists Sucharit Bhakdi and Kevin McKernan raised an entirely new issue of concern – [that of serious levels of DNA contamination](#). Once again this was ignored by the MSM. Though quite happy to report the odd side effect from the vaccines as an excuse to point out that they are extremely rare, they have never addressed the increasingly problematic official ‘safe and effective’ mantra.

Finally there was a small breakthrough. An isolated but braver branch of the MSM in the form of the *Spectator Australia* has finally **blown the lid on serious levels of contamination of both Pfizer and Moderna mRNA Covid vaccines**. The article describes how the genomics scientist Kevin McKernan from Boston used Pfizer and Moderna vials as controls in a study only to find that they contained highly significant DNA plasmid contamination. It reports that McKernan was alarmed to find the presence of an SV40 promoter in the Pfizer vaccine vials, a sequence that is ‘used to drive DNA into the nucleus, especially in gene therapies’ and that this is ‘something that regulatory agencies around the world have specifically said is not possible with the mRNA vaccines’. These SV40 promoters are also well recognised as being oncogenic or cancer-inducing.

Others have confirmed these findings. A German biologist whistleblower **has found contamination rates of up to 354 times the recommended limit**. All this has been reported to the US Food and Drug Administration (FDA). It is highly significant.

To put it bluntly, this means that they are not vaccines at all but Genetically Modified Organisms that should have been subject to totally different regulatory conditions and certainly not be classed as vaccines. This has been recognised by the Australian version of the FDA, the TGA, which has changed the picture so much that the Premier of Victoria Dan Andrews, who was the greatest proponent of the vaccine and of its mandatory use, has resigned – though at the time of writing the vaccine has not been mentioned as the reason for his resignation. (Paula Jardine reported in these pages in December 2021 on this [regulatory sleight of hand in granting vaccine Emergency Use Authorisations for what were gene therapies.](#))

All this data, which is slowly breaking through into the public domain, comes hard on the heels of the latest findings that booster vaccines actually increase the chance of getting infected by 3.6 times. This is according to [an in-depth study published by the Cleveland Clinic](#), one of the largest health care organisations in the world, who monitored their staff as well as patients.

It gets worse. Supporters of this technology have claimed that it can be adapted to chase new variants. But it can't. The

results of bivalent vaccines (with components against at least two variants) are seeing the same result. Authors of the Cleveland study say that ‘there is not a single study that has shown that the Covid-19 bivalent vaccine protects against severe disease or death caused by the XBB lineages of the Omicron variant. At least one prior study has failed to find a protective effect of the bivalent vaccine against the XBB lineages of SARS-CoV-2.’

In one [study](#), all bivalent-vaccinated mice which were challenged with Covid became ill.

This was predicted by many of us as the SARS viruses are subject to immunological imprinting: that is, once they have seen a vaccine they will make the same response to any close variant (this is also known as ‘[antigenic sin](#)’) making further vaccines not only useless but more dangerous as they induce antibodies that enhance infection (ADE antibodies), not cross reactivity as has been claimed by the manufacturers.

This is not the end of the issues with the mRNA ‘vaccines’. Several immunology studies have shown that the boosters

induce an antibody switch from neutralising subtypes to tolerising subtypes as well as inducing significant T cell suppression, all of which will encourage new infections and suppress the immune response to cancer.

At the end of last year I reported that I was seeing [melanoma patients](#) who had been stable for years relapse after their first booster (their third injection). I was told it was merely a coincidence and to keep quiet about it, but it became impossible to do so. The number of my patients affected has been rising ever since. I saw two more cases of cancer relapse post booster vaccination in my patients just this last week.

Other oncologists have contacted me from all over the world including from Australia and the US. The consensus is that it is no longer confined to melanoma but that increased incidence of lymphomas, leukaemias and kidney cancers is being seen after booster injections. Additionally my colorectal cancer colleagues report an epidemic of explosive cancers (those presenting with multiple metastatic spread in the liver and elsewhere). All these cancers are occurring (with very few exceptions) in patients who have been forced



to have a Covid booster whether they were keen or not, for many so they could travel.

So why are these cancers occurring? T cell suppression was my first likely explanation given that immunotherapy is so effective in these cancers. However we must also now consider DNA plasmid and SV40 integration in promoting cancer development, a feature made even more concerning by reports that mRNA spike protein binds p53 and other cancer suppressor genes. It is very clear and very frightening that these vaccines have several elements to cause a perfect storm in cancer development in those patients lucky enough to have avoided heart attacks, clots, strokes, autoimmune diseases and other common adverse reactions to the Covid vaccines.

To advise booster vaccines, as is the current case, is no more and no less than medical incompetence; to continue to do so with the above information is medical negligence which can carry a custodial sentence.

No ifs or buts any longer. All mRNA vaccines must be halted and banned now.