Heart Damage effects of COVID-19 vaccine entering the blood stream

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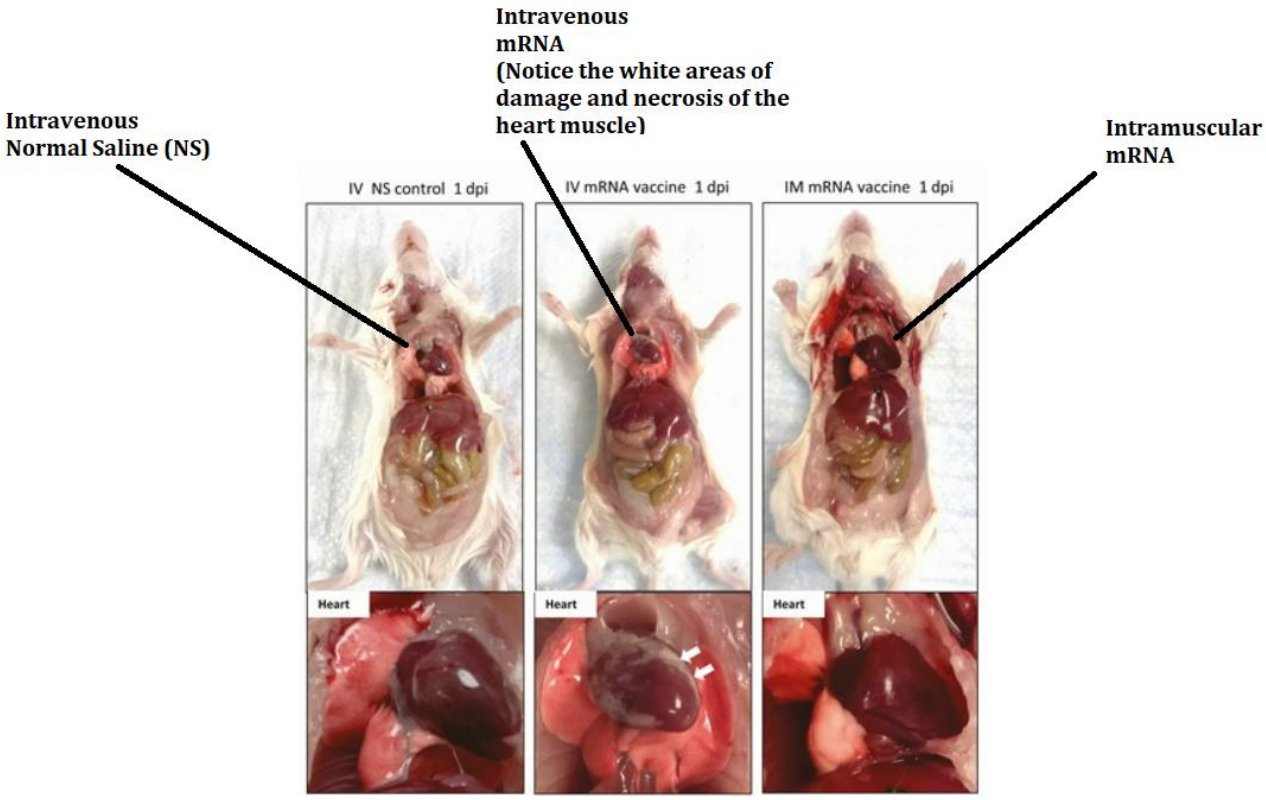
A study out of Hong Kong in 2021 revealed that a second dose into the bloodstream of mice resulted in visibly enlarged hearts with white patches that could be seen with the naked eye, as well as cytokine storms and liver damage.

The study concluded:

> ***"Post-vaccination myopericarditis is reported after immunization with coronavirus disease 2019 (COVID-19) messenger RNA (mRNA) vaccines."***

By injecting mammals with the MRNA vaccine, their hearts were visibly damaged, yet the worldwide injection program kept going.



References:

Intravenous Injection of Coronavirus Disease 2019 (COVID-19) mRNA Vaccine Can Induce Acute Myopericarditis in Mouse Model | Clinical Infectious Diseases | Oxford Academic (oup.com)

Facing the Beast - Outspoken with Dr Naomi Wolf (substack.com)

Here are the figures

IM = Intramuscular

IV = intravenous

A cardiomyocyte = a heart muscle cell.

	Changes (Related Figures)	2 dpi First IV Dose n = 13 (%)	2 dpi First IM Dose n = 6 (%)	NS 2dpi n = 12 (%)	2 dpi Second IV Dose n = 9 (%)	2 dpi Second IMDosen = 6 (%)
Heart	Grossly visible white patches on visceral pericardium (Fig 1C, 1D)	5/13 (38.5%)†	0/6	0/12	3/9 (33.3%)	1/6 (16.7%)
	Pericardial calcific deposit (Fig. 2A, 2D)	5/13 (38.5%)†	0/6	0/12	4/9 (44.4%)†	2/6 (33.3%)
	Pericardial WBC infiltration (Fig. 2C)	9/13 (69.2%)*'†††	0/6	0/12	5/9 (55.6%)††	2/6 (33.3%)
	Myocardial WBC infiltration (Fig. 2C, 2G)	8/13 (61.5%)*'†††	0/6	0/12	9/9 (100%)†††	6/6 (100%)†††
	Cardiomyocytes degeneration Fig. 2E)	8/13 (61.5%)††	2/6 (33.3%)	0/12	9/9 (100%)†††	6/6 (100%)†††
	Cardiomyocytes necrosis (Fig. 2F)	4/13 (30.8%)	0/6	0/12	9/9 (100%)†††	6/6 (100%)†††
	Cardiomyocytes apoptosis (Fig. 3B)	5/13 (38.5%)†	0/6	0/12	ND	ND

Effects of Intravenous Injection of C19 Vaccine

First IV Dose

38.5% of test subjects had white patches on pericardium

38.5% of test subjects had calcific deposits on pericardium

69.2% of test subjects had white blood cell infiltration of pericardium. (Immune cells attacking the pericardium)

62% of test subjects had white blood cell infiltration of the myocardium. (Immune cells attacking the myocardium)

Second IV Dose

100% of the test subjects had white blood cell infiltration of the myocardium. (Immune cells attacking the myocardium)

100% of the test subjects had cardiomyocyte degradation and necrosis.

Conclusion

So, if the C19 vaccine enters the blood stream, then severe damage WILL result (probability = 100%)

So the Big Question is ?

"Does the Vaccine Enter the Bloodstream with Intramuscular Injections?"

Nurses do not aspirate the needle, and consequently may inadvertently inject the vaccine into a vein.

Even if the needle is aspirated and an intramuscular injection does not hit a vein, it will hit blood capillaries. Every tissue in your body is perfused with tiny blood capillaries. That's why you always see a tiny drop of blood when the needle is withdrawn

"Exactly How Much of the Vaccine Enters the Bloodstream?"

Biodistribution studies show that the vaccine does enter the blood stream, since the lipid carriers of the mRNA have been detected in all parts of the body, and the spike proteins produced by this mRNA have been detected in all parts of the body.

"Why Do Some People Have Adverse Reactions Throughout Their Body?"

Adverse reactions to the vaccine show that they are NOT always localized to the injection site, but are often systemic = occurring throughout the body in diverse organs. These reactions are systemic BECAUSE in these cases the vaccine has distributed throughout the body via the bloodstream.

How Long Does the Vaccine Stay in the Bloodstream?

We have seen that the vaccine has a toxic effect if it enters the blood stream. And this toxic effect is prolonged if the vaccine stays in the bloodstream for an extended period of time. The Lipid carriers and the spike proteins have been detected more than 6 months after vaccination

A new vaccine is currently under development called "self-amplifying" mRNA (saRNA). Pfizer's documents reveal that this vaccine can produce a more intense effect over a longer period.

What Can You Do?

If you are forced to take this vaccine, you **must insist** that the needle is aspirated. If the needle enters a vein there is **100% probability** that the vaccine will cause heart damage.

Whilst aspiration will reduce the risk by avoiding intravenous injection, vaccine **will still** enter the blood stream via capillaries (the tiny blood vessels that perfuse all tissues) though to a smaller degree, so **some** heart damage **will always occur**, though will be less obvious.

You must weigh the risk

Obviously the vaccine is not 100% safe

Is the danger from the virus greater than the danger from the vaccine?