

THE MODEL HEALTH SHOW

EPISODE 508

Covid-19 Vaccine Efficacy & Antibody Dependent Enhancement

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SHAWN STEVENSON: Welcome to the Model Health Show. This is fitness and nutrition expert Shawn Stevenson, and I am so grateful for you tuning in with me today. We've got a brand new study hot of the presses analyzing our current vaccine campaign that we need to dive right into, we got a lot to cover, so we're going to dive right in. A study published last week in the Journal of Infection is highlighting a startling scenario that could be contributing to the rampant increase in SARS-CoV-2 infections during our current vaccine campaign. The study titled Infection-Enhancing anti-SARS-CoV-2 antibodies recognize both the original Wuhan strain and Delta variants, a potential risk for mass vaccination, and the study addresses concerns of something called antibody-dependent enhancement or ADE, that has been a potential concern for scientists since the very beginning of this vaccine campaign, and in simple terms, there are antibodies that can neutralize viruses and there are also antibodies that can facilitate viruses and actually help them to be more infectious. This is very important to understand, there are antibodies that can neutralize viruses, and there are also antibodies that can facilitate and help viruses to be more infectious.

This is an important tenet for you to know as we go along. In this study, they state "in the case of the Delta variant, neutralizing antibodies have a decreased affinity for the spike protein, whereas facilitating antibodies display a strikingly increased affinity." Strikingly increased affinity. Now, in a general sense, ADE, again, antibody-dependent enhancement is a phenomenon in which suboptimal antibodies induced by a vaccine, in this instance bind to a virus and actually make the virus better at entering the host cells and replicating. So, in another sense, ADE can signify when virus-neutralizing antibodies are outmatched by virus facilitating antibodies, both activities can be going on, but how are the scales going to be tipped, that's the question. And the researchers' analysis states, "the epitope, which is a part of an antigen that an antibody attaches itself to, the epitope recognized by this antibody on the flat N-terminal domain service is dramatically affected in the N-terminal domain of Delta variants suggesting a significant loss of activity in vaccinated people exposed to the Delta variants, more generally it can be reasonably assumed that the balance between neutralizing and facilitating antibodies may greatly differ according to the virus strain, and the emergence of SARS-CoV-2 variants may tip the scales in favor of infection enhancement.

They then state that "ADE may occur in people receiving vaccines based on the original Wuhan strain spike sequence, either mRNA or viral vectors, and then expose to a Delta variant." They note that this was anticipated but not formally demonstrated, though the ADE of Delta variants has not been specifically assessed until now, and they go on to say "since our data indicate that Delta variants are especially well recognized by infection-enhancing antibodies targeting the NTD, the possibility of ADE, antibody-dependent enhancement should be further

investigated as it may represent a potential risk for mass vaccination during the current Delta variant pandemic." So to recap this analysis, the neutralizing antibodies in vaccinated individuals perform well against the original Wuhan strain of SARS-CoV-2, but... And this is very concerning. In the case of the Delta variant, the neutralizing antibodies in vaccinated persons have diminished neutralizing potential and strikingly increase... They didn't just say increase, they said strikingly, that's a strong word for a peer-reviewed journal, strikingly increased affinity to facilitating antibodies that help the virus infect cells and replicate.

Now, the potential of ADE has been repeatedly dismissed by some guilds of scientists, while others have warned of its potential from the start, from the commencement of this entire campaign, and a primary reason that an opponent... Because I'd like to always look at both sides and look for multiple perspectives, and a primary reason that an opponent of ADE would dismiss this is based on a kind of short-sighted belief that ADE would easily be spotted in clinical trials and in vaccine campaigns because it would make the person sicker, and what they fail to realize is that just because a person doesn't get sicker, it does not mean that they can't get infected easier, and that's precisely what's likely being seen right now with this Delta variant, it's less virulent and deadly, but it's more infectious and transmissible. So, this could be a possible explanation as to why this is going on.

Now, the situation that we're in doesn't happen out of nowhere, many scientists warned of the potential of launching a massive vaccine campaign in the midst of already documented several different variants of a particular virus, being in circulation, in mass circulation, and Delta is just one of them by the way, we've got Iota on the move being tracked, we've got Kappa and several other... There are over 13 that are being tracked right now, and even when this vaccine campaign kicked off, there was already confirmed several variants, and what that can potentially do is when an individual gets inoculated against that original Wuhan strain, and then that individual gets exposed to one of these variants, it can potentially make that variant even more crafty because it's facing up against really sub-optimal antibodies and make it even more crafty and intelligent in a sense at infecting other people, so it's basically giving a little bit of training, a little bit of ninja warrior training to make it more infectious and skillful at surviving and moving on and carrying, jumping around to the next person.

So again, many prestigious scientists have warned of this potential since the very beginning, including virologist, Dr. Geert Vanden Bossche who has worked on a plethora of vaccine projects himself, including his work with one of the largest pharmaceutical companies in the world, GlaxoSmithKline, and working with the Bill and Melinda Gates Foundation as well and also working with the Global Alliance for Vaccines and Immunization as the senior Ebola program manager. He's an advocate of safe vaccinations and somebody who believes in the power of vaccines, and here was his expert assessment when COVID-19 vaccines were being rushed through the clinical trials. He stated, "mass vaccination in the middle of a pandemic is

prone to promoting selection and adaptation of immune escape variants that are featured by increasing infectiousness and resistance to spike protein-directed antibodies, thereby diminishing protection in vaccines and threatening the unvaccinated."

Now again, he's far from an anti-vaccine advocate, but when he shared his perspective from his long and diverse history in vaccine safety, the fact-checkers went nuts, just to look it up, 'cause of course spending a great deal of time in research... And this is something that I had a theory about very early on as well, but I'm looking for and connecting with, and I have the great opportunity, my friends and colleagues are involved in so many different domains of medicine and healthcare. So I get access to these folks and we can discuss these topics, but oftentimes when you go to a Google search, what you're going to find is these fact trackers controlling the narrative, and they were just dragging him through the mud, like attacking his credibility, attacking his character, labeled him as anti-vaccine, and most importantly, ignored his voice of caution, that's the thing that they're doing, which is so crazy. This is not science. Science isn't one vanilla, one-size-fits-all modality, science is open, science is constantly evolving.

And so, to mute certain voices, especially when they have credibility and intelligence in this domain is just incredibly dangerous, and for them to suddenly label him as anti-vaccine is dismissive, that term anti-vaxxer is dismissive. Oh, that crazy anti-vaxxer, it just puts them in this tin foil hat crazy person category, and it completely makes their argument or their concern or their science irrelevant, it doesn't matter because they're in that category.

Instead, again, of having open dialogue and an inquiry and understanding What is that person's perspective? What evidence do they have as to why they're concerned about fill in the blank or as to the effectiveness of fill in the blank. Because the truth is, when you dig deep enough, oftentimes, you're going to find peer-reviewed evidence, hardcore real science to affirm a lot of folks experience and beliefs, but most importantly, we have to honor people's experiences if they've been harmed by these things if they've been harmed by the pharmaceutical paradigm that we exist in because a lot of folks don't realize Johns Hopkins University has affirmed this particular data, but hundreds of thousands of people die each year due to pharmaceutical drugs, and it's just like that doesn't exist, but it's real, it's true. And not to say that pharmaceutical medicines can't be helpful and also life-saving in some instances, and the paradigm that we exist in right now, we've got to understand that there are a lot of casualties of it, and their stories get silenced, and the people's families, if they're speaking out, they're getting silenced, and that's not okay, that's not science, that's not compassion, that's not understanding, and it's making us even more divisive.

Now is Dr. Vanden Bossche the only one sounding the alarm of the potential dangers of ADE with this sudden vaccine campaign? Well, a study published in one of the most prestigious journals in the world, the Journal Nature Microbiology titled antibody-dependent

enhancement in SARS-CoV-2 vaccines and therapies rung the alarm of concern as well. This study published over a year ago now, stated "data from the study of SARS-CoV-1 and other respiratory viruses suggest that anti-SARS-CoV-2 antibodies could exacerbate COVID-19 through antibody-dependent enhancement, ADE, ringing the alarm, ding, ding, ding. Hey, we might want to look at this. We tried this with SARS-CoV-1, it didn't go well. Continuing on in their statement, "Previous respiratory virus vaccine studies revealed human clinical safety risk relating to ADE resulting in failed vaccine trials." But that's when they had room, they had room to take things slowly, to investigate, we didn't have room this time, everything was push, push, push. Let's skip the normal modality of clinical trials, and you could say that it's rushed, we've got this project Light Speed paradigm that we can rush Biology, that we can rush and understand the responses that happen in the human body, the human brain, the most complicated object in the known universe, just within a span of a couple of months of clinical trials, that's not how it works.

In no way was this ever appropriate, but again, we're just trying to figure this stuff out and do the best that we can. But again, seeing that those trials failed, the study in Nature goes on to state, "One potential hurdle for antibody-based vaccines and therapeutics is the risk of exacerbating COVID-19 severity via antibody-dependent enhancement, ADE. ADE can increase the severity of multiple viral infections including other respiratory issues." Now again, this is under the assumption... This is missed by a lot of intelligent people, this isn't just about the person getting sicker, this can also indicate that the person is getting infected more easily, that the person is becoming more transmissible, that the person is enhancing the activity of the virus in some form or fashion. It doesn't have to be this black or white as a person gets sicker, that's a very minute way of analyzing a much, much bigger picture of what nature can do.

This study is demonstrating a credible possibility of this campaign to potentially make things worse, which can be incredibly difficult to rationalize, it just doesn't... It's not going to make sense for a lot of folks, especially if they just bought in full force to the medical paradigm that this is the solution and it's going to fix everything, come what may, It's never going to be the pharmaceutical company's fault, it's never going to be the fault of our perspective in this narrative, it's the fault of other people who aren't listening, so it's going to be even more difficult for folks to rationalize and understand that, Yeah, this could actually be making things worse and we need to talk about it. Is that 100% certain that this campaign can make things worse or be making things worse? Of course not, no.

This recent report, again, in one of the most prestigious medical journals, the Journal of Infection, is an alarming in vitro investigation with human cells and say, Hey, we might have a problem here, we're seeing that these infection-enhancing antibodies are really doing their thing, let's talk about it, but how it plays out in the real world is still yet to be determined, but

we can look for ourselves and we just take a rational moment right now and see how things are going, and we're going to dig deeper on this today. Now the question is, will a continued vaccine campaign and new boosters... And I said this months ago, I was like, it's inevitable, the boosters are going to be coming down the pike very, very soon. Will discontinued vaccine campaign and new boosters ever catch up and reduce the spread? Probably not, because nature is far faster at adapting than our drugs could ever possibly be, especially if we're talking about billions of people... It makes no logical sense. We'll never get out in front of this thing... That's insane to think that. It doesn't make any sense. Now, just take a rational look again, what is transpired thus far, things are not going well, and as we're moving into cold and flu season, it's about to get real hairy.

And as most folks are unaware of, again, there are at least 13 other variants originating from different countries that are being tracked right now, including Lambda, Iota, Eta, Kappa, and several others. It sounds like a Greek fest. I'd rather be a Greek fest, alright. But here's the thing, with COVID being too widespread, transmissible, and adaptable to contain, it's exceedingly futile to try and drug our way out of this and not pay attention to what's actually making us more susceptible with 95% of hospitalized COVID-19 patients having pre-existing chronic diseases. We're not addressing the thing that actually makes us more susceptible, focusing on getting our citizens healthier would likely give us a much better shot than a shot. That's just how it is. And it's okay, the vaccine campaign, pharmaceutical interventions can be a part of it, but it's the only part you're hearing and that's not an accident, it's not. Now, if you're wondering why then, as we're talking about this, why the cases are being highlighted far more in unvaccinated individuals, that's what you're hearing about in the media, it probably has a lot to do with the CDC's decision to suddenly stop counting COVID cases in vaccinated individuals over three months ago, they just stopped. They just said we're done, we're not going to track.

Associate professor of medicine at Harvard Medical School, Robert Shmerling called the CDC's decision to not track all COVID cases in vaccinated individuals, surprising and disappointing. They are tracking some, but about one out of 10. I'll give you more details. Here's what the CDC statement read, "The CDC transitioned from monitoring all reported COVID-19 vaccine breakthrough infections to investigating only those among patients who are hospitalized or die." And that's really funny because around nine out of 10 of the COVID cases are mild or asymptomatic, so since they're not tracking, we have no idea how much our vaccinated citizens are contributing to the new wave in this pandemic? We have no idea. They're just not tracking it. Nine out of 10, it doesn't matter, for some strange reason.

Now again, I can't fully understand why they would do that, or what their perspective is, and what the mission is behind in their decision to not track approximately nine out of 10 cases, breakthrough infections, or folks who are vaccinated who then are infected by the Delta

variant. I can't rationalize why that would be done, what their decision was, but this is the thing about the situation, is that it can always be framed in the domain of making these things rational that are not rational, and they also stated that... And this is very, very important. They stated that "The number of reported COVID-19 vaccine breakthrough cases is likely a substantial under-count of all SARS-CoV-2 infections among fully-vaccinated persons. Why on earth. You're saying that the number of fully vaccinated people carrying this disease is substantially being under-counted, why then would you stop counting? They didn't make it required to actually start testing and reporting the cases of infections in vaccinated individuals. Again, everybody was pushed to get tested early on, but now it's just like, "The vaccinated people, this is not anything to do with you, this is a pandemic of the unvaccinated, that's what it is," and not understanding prior to the vaccines hitting the scenes, about eight to nine out of 10 cases of COVID were mild, this is just totally omitted from the conversation.

Now, the headlines state that in vaccinated people eight to nine out of 10 cases of COVID are mild, it's doublespeak. It's doublespeak, the narrative, the beneficial narrative, the beneficial angle only fits when they want it to, it's always this information without context. And now they're suddenly not counting vaccinated cases anyways, so in the height of the Delta variant spreading, the vast majority of vaccinated individuals who are carrying it and spreading it are not being counted. This could call for an uproar from unvaccinated citizens to demand that vaccinated citizens be confined to their homes, to not go out to public places, so that they can keep themselves and other people safe, they could justifiably demand that action, because even though this is being framed as a pandemic of the unvaccinated, it's omitted who's likely the most dangerous in the scenario, which is the vaccinated people who are unaware of antibody-dependent enhancement and are out spreading the Delta variant and other variants and not being counted by the CDC because of their vaccination status.

This could potentially be the most dangerous person in this scenario, it is a potential, it's not a fact, it's not the only way to look at this, but it is a very concerning potential, and this could be flipped where unvaccinated folks are demanding that vaccinated individuals are unable to participate in family gatherings, large gatherings, getting admitted to public places, because they're potentially the most dangerous type of individual who thinks, "I've got vaccinated, and I'm not a problem." But to demand that of them, to have them confined to their home, to demand that they're not able to access gyms and to go to restaurants and businesses, and to see their families, and to visit dying loved ones to say goodbye, to demand that they're not able to do that, that's not the answer, is it?

You can be vaccinated and unknowingly transmit the virus to someone who does get very sick, even if you are mild, even if you have a mild case or potentially asymptomatic, we don't know for sure, you can be vaccinated and unknowingly transmit the virus to someone who does get very sick, i.e., someone who is immunocompromised. You can factually even lead to someone's

death despite your vaccination status. You won't hear that fact on your favorite major media channel because it doesn't fit the narrative, and it brings the responsibility back to you, which is where the responsibility has always been. Well-meaning citizens have stepped up to get vaccinated to help end this and to get back to some semblance of normalcy but unfortunately, we've been coerced without a full understanding of the vaccines' effectiveness in the first place in clinical trials.

And now because of the information that we're being inundated with, we're pointing the blame at each other, we're demanding that other citizens, other families, can't get access to going to the movies, to go into a restaurant, to participating in sports teams, because they don't have a vaccination when the reverse can be also true. Because if ADE is playing a role in this widespread issue with this Delta variant and other variants that are... You're going to keep hearing more and more about this, mark my words. Potentially here with ADE, this could be a haphazard vaccine campaign getting rolled out in helping a virus to become even more infectious, less virulent but more infectious, and again, potentially landing on someone's immune system, whose immunocompromised, and it's a real thing, it's a real concern, and we need to talk about it. But again, unfortunately, we've been coerced into this situation without a full understanding of the vaccines' effectiveness in clinical trials in the first place.

And we had on Dr. Ron Brown, who has as a peer-reviewed study, analyzing the actual clinical trials of Moderna and Pfizer, the study is available, and we'll put it up for folks to see here on the video, so make sure to check out the video version of this episode. Definitely, you have to check out the video version of this episode because seeing is believing, we're putting up a lot of the different studies and referring to things so you can see them visually to help to understand this because it's just like, "It sounds too crazy to be true, it doesn't fit the narrative." So go to themodelhealthshow.com/ade, themodelhealthshow.com/ade to see the video version of this episode, and this is the ideal place to see it because there's a reason why it's not going to be in its usual channels, and I'll talk about that in a moment.

So this really boils down to education, to informed consent, and so having on somebody who is in the domain of epidemiology like Dr. Ron Brown and being able to really analyze the data in these clinical trials to provide a much bigger perspective about the results that we're seeing early on, that we're enabling these pharmaceutical companies to rush these vaccines to the market, we got a chance to actually dig in and look at what happened in the clinical trials, because what was being touted is this miraculous effectiveness of these mRNA vaccines, it's a new technology.

Well, the technology has been around for quite some time, but it's new in the form of vaccines being used in humans at mass scale, it's a brand-new thing, it's never been done before. And not to say that that doesn't mean that it can't be effective. And what was being touted was a

95% effectiveness of the mRNA vaccines. And for example... And he reported this in the study as well, there was a 95.1% relative risk reduction with the Pfizer vaccine. That sounds amazing. For me, even when I heard, I'm like, That's remarkable. Is that real? That's incredible. With the Moderna vaccine, it was a 94.1% relative risk reduction. Now, what people don't understand is that this is a relative risk reduction, this number is what would be used by clinicians, for example, and research scientists, in analyzing, say, one trial versus another or something under these lab conditions, but this doesn't speak as to what happens in the real world, that number is what's called the absolute risk reduction. The relative risk reduction can, in some instances mean nothing, but in some instances, they could mean something, but they don't mean everything. The absolute risk reduction is what your risk reduction is as an individual in the real world with this vaccine.

That's the absolute risk reduction. When Dr. Brown analyzed the absolute risk reduction, again, we'll put this up for you to see this study. The Pfizer vaccine, it didn't have a 95% absolute risk reduction. It didn't have a 50% absolute risk reduction. It didn't have a 10% absolute risk reduction. It didn't even have a 1% absolute risk reduction; it was a 0.7% risk reduction. A 0.7% absolute risk reduction for you as an individual with the Pfizer vaccine. This is real, but most people have no idea, including experts in their respective fields, physicians who are really doing their best to help and serve their patients, they have no idea about the absolute risk reduction, they don't know that number. They're out here saying, hey guys, 95% risk reduction is not perfect protection, but in reality, it's far from perfect protection. And people have the right to know and be educated on the difference. And this is real, your absolute risk reduction, that's your risk reduction as an individual when taking these vaccines. For the Moderna vaccine, it wasn't 94%, it wasn't 9%. It was a 1.1% absolute risk reduction in their vaccine trials. And numbers like this, they wouldn't have gotten approved if these were the numbers that we're basing things on, but they used the relative risk reduction. And here's the key, this wasn't an absolute risk reduction of 1.1% for severe outcomes or for death, it was a 1.1% absolute risk reduction for mild symptoms.

The protective benefit in the clinical trials were not shown to reduce risk of death, it was not shown to reduce risk of severity, it was shown to reduce risk of mild symptoms, and if you dig even deeper... And I spent a tremendous amount of time actually looking through the clinical trials, it's a... Oh, my goodness. Even the trials themselves, they didn't incorporate people who are at the most risk in this pandemic, people with pre-existing chronic diseases, people of advanced age, they only had to have 30% of those folks in clinical trials. Most of the people in the studies were not people who were really at risk, another way to the curveball and manipulate the data, but hey, a company like Pfizer was convicted of criminal activity in order to pay the largest health care fraud settlement in the history of the Department of Justice. They wouldn't do something like that, they wouldn't accidentally omit the absolute risk reduction. They wouldn't water down the clinical trials to make it favorable for them, they

wouldn't do that. Pfizer was only ordered to pay \$2.3 billion for fraudulent marketing. They wouldn't do it again.

This is when they get caught, this is the small fraction of the time when they get caught. Paying the largest settlement in the history of the Department of Justice. And they're still able. Even convicted of crimes repeatedly, criminal offenses over and over, and over again. And they're just able to keep doing business as usual. Because even that settlement, that's scraps to them. Guess how much they're making for the vaccine campaign? With the COVID vaccine, guess how much they're making? \$34 billion. This is all about our health though, \$34 billion. It doesn't matter if the vaccines are effective or not, Pfizer is making \$34 billion off of this gold rush, but the perspective could be... And I'm a fan, like if you've got a good product, yes, make your money, do your thing. But this is promoted that the vaccine is 95% effective, and it's not the full story because that's true. That's the thing about this manipulation and framing. It is true, it is a 95% relative risk reduction.

But the absolute risk reduction, you as an individual, as crazy as this... I know this sounds crazy; I would not believe it. It's just too far-fetched because it's literally the opposite end of the spectrum. The truth is the absolute risk reduction is less than 1%, and that's from mild symptoms. But then you see it out here in the world and the media say, hey, it's a pandemic of the unvaccinated, the vaccines are working incredibly when people are getting infected, it's mild symptoms. Most people had mild symptoms in the first place prior to the vaccines existing, that is just like... It's omitted, we just forget. But it's real, about eight out of nine people who contracted COVID, mild or asymptomatic prior to the vaccines. Now it's the same thing with the vaccines, but it's just like, Oh, it's the vaccines.

Now, what happens? Because here, the CDC is not tracking the vaccinated individuals. Upwards of nine out of 10 of folks with these breakthrough infections and infected with this Delta variant, making it even more crafty at infecting other people, they're not counting nine out of 10 of these cases, upwards of nine out of 10 of these cases. Alright, so it's hard to get a beat on who's actually getting infected with COVID right now, unless we actually grab a specific cluster of people who are both vaccinated and unvaccinated, and test all of them. And test their status for COVID, then we can actually start getting some adequate data. Well, this very thing was done recently during an outbreak in Massachusetts that were identified due to some large public gatherings, because comprehensive testing and reporting of all people in this cluster was done and reported by the CDC, we got a chance to see something interesting occur. After testing 469 cases of COVID-19 associated with the public gatherings, it was found that 74% of the cases were in vaccinated individuals.

It doesn't make sense. How? Some important things to extrapolate here, they did genomic sequencing of specimens from a large cluster of the vaccinated COVID cases and found that

nearly 90% of them were infected with the Delta variant. Wow. Now, this is very important to note, listen to this, of those 469 cases, only five people had to be hospitalized and four of them were fully vaccinated. Now again, this is the part here, now, this is what I really want you to understand. The point that I'm trying to make is that even in this instance, the vast majority of vaccinated people carrying the Delta variant were potentially infectious, potentially dangerous to others. They were not hospitalized; they didn't have severe symptoms. So, in the new CDC's reporting metrics, they would not be counted, they can be out spreading the Delta variant, getting other people sick, and they're not getting counted because this is a pandemic of the unvaccinated. This is simply utilizing the media and capturing these particular headlines, and these talking points for people who are really uneducated about the bigger picture, and who's looking at things from all sides of this. And for me personally, I would love if the FDA was looking out for us, I would love if pharmaceutical companies were acting in integrity and really operating with informed consent.

I would love if there was a pharmacological agent that could help to protect those who are most susceptible. I'd be all good with that. That's what's different about me. Everything is an option, but unfortunately, the biggest part of this equation, which is people's underlying health is not getting addressed. And we keep trying to drug our way out of things. And again, look at the results. How has this worked out for us in this instance, and as a society in general? We are the sickest nation in the history of the world. Are you kidding me? With this same pharmacological model, 70% of our citizens are already on drugs, legal drugs, that is, legal. Is it working? Are we getting better? Now, are these results in this cluster going to happen everywhere? Of course not. We can at least consider that the vaccines are not as effective as promoted in this instance, and talk about it and not reframe it, but so-called experts continue to just explain it away, explain these things away, instead of acknowledging the potential problem in this happening, they jump to, well, at least the vaccines kept people from being hospitalized. How do you know that? How do you know that?

And in this case, four out of five of those people hospitalized were vaccinated, not the other way around. If it was the other way around, if this was the other way around, you'd have heard a whole lot more about this Massachusetts incident. It would have been everywhere. But if you don't know, it was here today, gone today. If this was the other way around, where it was 74% unvaccinated people testing positive, and four out of five unvaccinated people being hospitalized, the story would have been everywhere. If it was the other way around, it would have been the biggest thing ever to prove the effectiveness of the vaccines, but since it wasn't, since it didn't fit the narrative, you're not going to see it. Or if you do happen to catch a glimpse here today, gone today. Now, that's unless you're tuned in to mediums like this, this is why it's so important right now. Been more important than ever. Another instance of where lots of folks are getting vaccinated and getting tested, that's the thing. Give vaccination, but also let's

test as well, see is this working? An instance where this is happening, where we've got a lot of folks getting vaccinated and getting tested is Israel.

Touted last month as "the world's most vaccinated population". So, you've got Disneyland, was the happiest place on earth and you got Israel, the most vaccinated place on earth. Alright. But as of their recent report, according to Johns Hopkins University data, 57% of Israeli's population was fully vaccinated, but an interesting phenomenon is taking place where nearly 50% of their new COVID cases are happening in vaccinated people. Again, early on, the experts who have their narrative already set in stone that this is impossible, that it's not going to work well, harp on things like, well, it's just because such a high percentage of the population is vaccinated. It provides more opportunity for breakthrough cases. Really? Really? 43% of the population is still unvaccinated. So 50% of the new cases happening in vaccinated people is still an incredibly high percentage, something is off here, we can't just explain it away, that's not okay, it's not okay. And here's one of the headlines in a report of the situation, in the Insider. Israel says the Delta variant is infecting vaccinated people representing as many as 50% of new cases, but they're less severe. They sprinkle on that little spice at the end there to have you ignore the concern.

Israel says the Delta variant is infecting vaccinated people representing as many as 50% of new cases, 50%. But they're less severe. Of course, they're less severe. It's less severe in unvaccinated people too. It always has been. This new variant is more infectious but less virulent and deadly. We know that that's doublespeak, it's not just less severe in vaccinated individuals, it's also in unvaccinated individuals. We have to have some balance here. And it might even be a little bit better in one or the other, it might be better in vaccinated individuals, that's okay. But don't dismiss it, don't act like this is the holy grail. You're acting like it's God-like powers that we're putting it to our veins and... Come on. And health officials say that what's happening in Israel... And again, this is still looking through that same pharmacological lens. What's happening in Israel is a sign that we need to roll out booster shots as soon as possible. Is that the solution? Is it finally going to end this thing? Is it finally going to get us back to normal? But most importantly for me, and many other people in all of this chaos is that as the new variants rage on, again, we've got over 13 that are being tracked right now, the educated and uneducated alike have been bribing, shaming, and attacking their friends, their families, and fellow humans that have been more cautious about getting vaccinated.

The bribery and coercion, I've never seen anything like it, and we've just... Many people don't even realize that it's happening. Where is the education? Where is the empowerment? Instead, come get your shot, and you're going to get yourself a free Big Mac. Come get your shot, you're going to get some free fries, come get your shot, you get some free chicken nuggets. Everybody's seeing the Krispy Kremes, come get your shot you get a free donut. But here in the State of California, is the biggest... Excuse me, incentive ever. They decided to give away

\$100 million, \$100 million in gift cards if you come out and get your vaccine. They promised \$50 gift cards to two million people to roll up their sleeves. Vax for the Win program. Yeah, Vax for the Win program. Gavin Newsom. I don't like to namedrop, I just don't, I don't like to put... I don't like to make people famous in my songs, I don't like to do that. This guy, okay. I don't care about the political affiliation, I don't, I care about character. He mandated, we social distance, we wear a mask and we not go to businesses, he shut businesses down, and yet he was caught at a restaurant, not social distancing, not wearing a mask, breaking the very same laws and rules, the mandates, whatever you want to call them, that he put in place for everybody else in this state.

And then he apologized when he got caught, but he apologized because he got caught. How are we following people like this? He doesn't believe in the that he's telling people to do, that's why he wasn't doing it. This is real. He's talking about the Vax for the Win campaign, roaring back to California. This dude, come on man. This is so unethical. It's so unethical. He said, and he's just talking, he's playing that slick back role, he said, "This is an opportunity to say thank you for getting vaccinated to Californians". And he's speaking to people, low-income families who's like, "Hey, \$50 gift card. You've got four people in your family, five, six, you do the math. He said, you do the math, it's a nice little amount of dollars there if you get everybody vaccinated. Get your team vaccinated. Although all this crazy stuff is going on, although the absolute risk reduction, you have no idea about that, although you have no idea about ADE, although you have no idea about the vaccine side effects, roll up your sleeve. Do the math. Also, you get free tickets to Six Flags here too. I'm telling you. Get vaxed jump on a coaster. Come on. Also, 30 winners get to pocket \$50,000. I can go on and on. That's just a bit of it, it's a lottery. They ponied up for a lottery to win \$50,000 to get vaccinated, 30 winners.

It's not an education program, it's not informed consent, they're not discussing the effectiveness and potential side effects with people who are being coerced into taking a drug that they have no understanding about whatsoever. How on earth is this okay? And how on earth that we're even talking about doing this to our babies? Doing this to our children. We have to stop this madness. Now again, I'm for anything that's effective, but what's happening now, it's shrouded in a lot of misconception, a lot of hypocrisy, and a lot of dangerous things are being implemented that has continued to hurt us again, and again, and again and again. Look at our society, are we doing, okay? We're going on two years now. And most importantly, can these newly invented vaccines lead to harmful side effects that we're not aware of? Absolutely. Can they have some potential benefit? Yes. But what about the other side? You're not hearing anything about that. You're not hearing anything about the risk, they get brushed off to the side as if it's nothing. That's the thing that we don't know, we know the least about is what is the potential long-term side effects? Because this is new. Mass vaccination with mRNA technology has never been done in our species history. We don't know.

It was only a few months of clinical trials and this got approved and fast-tracked, emergency act... They got the public to demand it, bypassing those normal metrics, having no idea about long term... What can happen in a year, two years? Can there potentially be a greater manifestation in the population of a particular type of cancer or heart disease or auto-immune condition? We don't know. We don't know. We don't know. And chances are if that does manifest, it's not going to be tracked back to vaccination because this is so unethical. Now, could it just turn out good? Yes, and that's okay too, but we have to stop acting like these powerful entities, these multi-billion-dollar organizations have our best interest at heart, we have to stop, we have to take back our awareness, our attention... We have to take back control of our minds. Thousands of COVID vaccine-related deaths have now been reported in the VAERS database. Now, I want to be clear, does this confirm causality? No, it does not. But what I just said is true, nonetheless. Does this deserve more attention though? Absolutely.

The VAERS system is managed by the FDA and the CDC. In a report titled Vaccines in The National Vaccine Injury Compensation Program from researchers at Harvard University, it states, "Because VAERS is a passive reporting system, many of the adverse reactions to vaccines may not be reported," and some estimates say it can be as low as 1% getting reported, 10%, 50%, we don't really know because of the way that it's managed, and the report also cites the lack of substantial investigation by regulating bodies like the Department of Health and Human Services to confirm the vast majority of reported vaccine injuries and deaths. There's just not a lot of attention being paid to it. How else can people be informed as to the adverse effects, because when people post their own stories of adverse effects, social media platforms, remove them? In some cases, de-platform the person, censoring conversations. How is this okay? Now you could say this is an independent organization that's... Can do whatever they want, we have the White House press secretary saying with her own mouth, I think it just slipped out that they are working alongside with social media companies, and I'm just... I got to play it for you here just so you know, it's just not me making this up, working alongside with social media platforms to help to block misinformation or what they deem to be misinformation.

We've increased disinformation research and tracking within the Surgeon General's office. We're flagging problematic posts for Facebook that spread disinformation.

SHAWN STEVENSON: Now again, I want to reiterate this point, there's been thousands of deaths associated with the COVID-19 vaccine campaign, alright? And many tens of thousands, potentially much more reported for vaccine-related injuries and adverse events. Now, in comparison, just a few dozen deaths reported from the swine flu vaccine were enough to shut down the entire campaign, just a few dozen. Has anything even been remotely aimed at, Hey, let's slow this thing down, No, it's push more, push more, push more, herd immunity? Most people talking about herd immunity have no concept of what that means. Not even remotely

close. Theoretically, that percentage to reach herd immunity with this new technology could be 10%, could be 50%, could be 100% of the population. You don't know, it's a theory, you don't know. That's just that one aspect of herd immunity, but again, it gets to be... It's not about herd immunity for years, it's never been put in the context like this where it becomes a catchphrase to people who are uneducated in this subject matter, at all. Now they're pushing hard, we've got to get to herd immunity when actuality we... Maybe we want to slow down because some very strange things are happening, and then the negative things are being censored, and that's not okay.

That's my point, with all of this, is to point out that it's not okay to censor science, it's not okay to censor people's stories. It's not okay to have this one-size-fits-all vaccine campaign, this one-size-fits-all pharmaceutical model. What do you think's going to happen? Look what's happened in the past. Have they fixed anything in recent history, like in the last few decades have they... Come on? And so, leaning back into this herd immunity perception in this particular campaign, as the data indicates, we can keep pushing vaccines, we can keep pushing booster shots, but COVID-19 is now endemic. It's endemic. I said this a while ago, it's not epidemic or pandemic, it's endemic, meaning it's essentially integrated itself so deeply and variably into our society that it isn't going anywhere, and this is pretty well established but it's not being talked about. Now, can we do something to ensure that these new variants, again, now this endemic, make sure that it doesn't cause the same severe outcomes that it did... COVID-19 did upon its arrival into our lives going on two years ago. Well, first of all, it's severity, deaths, hospitalizations, etcetera, have already plummeted despite its increased transmissibility, that's simply how viruses like this work in the first place, which also seems to be forgotten by this media-driven unscientific chaos. We got a casedemic going.

Severe outcomes, that's all that stuff have plummeted compared to what they were, that's the natural course of things, even though there's a significant chance that this is not natural in the first place. And so, keeping all this stuff in mind in addition to understanding that one tenet that already we're at that place where, hey, that same severity is not something we're dealing with, let's bring a little bit more rationality, let's bring a little bit more logic, intension, patience into this so we can figure this thing out in a ethical sustainable way. In addition to that, we can finally focus on the one thing that's mattered most and that will always matter most, which... When we're talking about successful disease prevention and mitigation of symptoms, what's most important and the focus right now is to be shifted mightily to the overall health of our communities and reducing our astronomical rates of chronic diseases. They're at astronomical proportions, and it's as if it's not going on. This is the number one susceptibility to death from chronic diseases and infectious diseases. And even in our healthcare workers, for example, severe outcomes from COVID-19 weren't as indiscriminate as many people have been led to believe.

The CDC reported that nine out of 10 healthcare workers hospitalized with COVID-19 had at least one pre-existing chronic disease, diabetes, heart disease, 75% of them were obese. It's a devastating issue that continues to destroy our communities at its core, it's the number one risk factor for death from COVID-19 is obesity, according to a recent CDC report analyzing over 540,000 hospitalized COVID-19 patients from 800 different hospitals, obesity was the number one risk factor for death, and we're not doing about it. What sense does that make? What sense does it make? The number one risk factor. And something that we can do something about. If you hear anybody say, we can't get people healthier overnight, immediately, excuse yourself, not walk, run. Runaway from that conversation, because they're not even here. It's not overnight, we're way past that, going on two years, we could have transformed the health of our society. If they were promoting as they have these physical metrics, these superficial metrics of prevention promoted so heavily the importance of managing our stress right now, and knowing that stress is a leading component, because the second risk factor, the second biggest risk factor noted in that CDC study, the second biggest risk factor for death from COVID-19 is anxiety and fear-related disorders.

I can't make this stuff up. And if you're watching the video, you get to see that study as well. Are we addressing those things? Our immune system is dramatically suppressed, multiple studies on this when we're sleep-deprived, increasing our risk of viral infections and severe outcomes. Your immune system is made from food. What does our nutrition look like? Your immune cells, your macrophages, your NK cells, the neutrophils, the B cells and T-cells, the lymphatic... Everything is made from food. Where is that conversation? If they would have been promoting that along with, hey, make sure that you socially distance, but you got to make sure that you are managing your stress right now, it's very important, it's a protective mechanism. Let's manage... Obesity is the number one risk factor America, let's get America moving, get your 20-minute walk in each day, it's essential. And also, a short walk, Appalachian State University researchers, boost your natural killer cells, just a short 20-minute walk. We can... We can help our communities to get healthier, just have we seen a massive campaign of incentive, "incentive for vaccination", we can put the same intensity into education, into support, and into resources to empower people to actually be healthier.

We've seen it done, if they want to get mobilized, they can get mobilized. But is it really important to them for you to actually be healthy? In that CDC report, obesity number one risk factor for death, fear and anxiety-related disorders, number two risk factor. And then... But for hospitalization from COVID-19, we've got hypertension being at the top of the list, metabolic syndrome being at the top of the list, diabetes. These are things that we can do something about, basic tenets in nutrition, basic stuff, like are you getting your electrolytes for example? Which electrolytes are minerals that carry an electric charge, this is how all of our cells are communicating? Literally, nothing in our bodies can happen without the sodium, potassium pump, for example. This is underlying mechanism that animates the human body. But are we

talking about this? Also, do we have any peer-reviewed evidence that this is important? Well, guess what, we do.

This is published in Annals of Clinical Biochemistry, and they analyze. The study is titled, Electrolyte imbalances in patients with severe coronavirus. And here's what the research has found, this is five studies, this is a meta-analysis with a total sample of almost 1500 COVID-19 patients, and they discover that sodium was significantly lower in patients with severe COVID-19, similarly, potassium was also significantly lower in COVID-19 patients with severe disease. What the hell's going on with the electrolytes? How does that... Now, the question is, we don't know based on this data, whether or not the deficiencies were a causative factor or exacerbating the COVID-19 symptoms, or if your body's experience of managing COVID-19 and in fighting the infection, if that depletes the electrolytes, but we know that it matters, we know that it's important. And this is something super simple, but you got to make sure that you... Even when it comes to electrolytes, we have to start looking towards entities that care about the whole process, that care about the supply chain, that care about not bringing in nefarious items along with their supposed healthy nutrients.

And this is why for me, and I just had this even before recording this show today, the electrolytes that I use is from LMNT, L-M-N-T. None of that crazy, artificial sweeteners and... None of that stuff, nothing but the right formula, because even the balance of the magnesium, the sodium, the potassium needs to be in that right ratio. And so, they got a large database of individuals to track what is the most effective ratio. And people, I've been getting the most amazing stories, and folks who've added LMNT into their life, and you get to try it for free. Go to drinklmnt.com/model. That's drinkL-M-N-T.com/model. You get to try it for free, you just pay for shipping, they're going to send you a sample pack of LMNT. Electrolytes are clearly important, and there's more and more peer-reviewed evidence coming about this in regard to COVID-19, infectious diseases, but also just everyday issues regarding performance, regarding heart health, regarding body composition, electrolytes matter. And so obviously, we can look to number one, food first, let's just be clear, we can get a ton of electrolytes from the right foods, for example. I'm a big proponent of food first, real whole food nutrition, avoiding all the crazy...

I was wondering the other day; I was thinking about Hot Pockets. Where did they get that name from? What kind of experience that they have in life that they wanted to name something Hot Pocket? I don't know. Is that like a real pocket thing on some jeans or some cargo pants, or is it like a sexual thing? I don't know, I don't know what kind of Hot Pockets they're involved with, but where did the name come from? I was just curious about that. But avoiding that stuff, that it depletes the body of health and nourishment, and adds all of these again, artificial things the human body just hasn't had an exposure to in our evolution but shifting over. And even if... It's not about being perfect, but adding in some superfood concentrates, like Green Superfood

concentrates, like Organifi green juice, this is why I'm a huge fan of it. It's simple, it's organic, cold-processed, spirulina, chlorella, ashwagandha, moringa. So, these superfoods with... Literally, there are mountains of peer-reviewed studies on these things, spirulina is the most protein-dense superfood ever discovered, 71% protein by weight, activator, and carrier of something called phycocyanin that activates stem cell genesis, very rare in foods. And source of magnesium and other trace minerals as well. Just... It's amazing and it tastes good and something simple to add-in.

So, if you're interested in that, go to organifi.com/model, that's O-R-G-A-N-I-F-I.com/model, they got the Organifi green juice formula, they got a red juice formula with all these antioxidant rich superfruits, and they've got incredible Gold formula too based on turmeric. So, lots of good stuff there. This the cool thing about today is that it can also be easier to be healthier, not just harder, it just depends on what reality you're living in. And so big fan of that, but this doesn't have to be complicated, but it does require a change in our thinking if we're going to solve this issue. We can just rationally look at what's been going on and see, is this working? Is what our society has been promoted to be a healthcare system, has it worked for our actual health? This pharmaceutical model, has it actually worked for our health? There are instances where pharmaceuticals can be lifesaving, especially in acute circumstances, but coming up with a cure, coming up with something that is powerful enough to stop one of the most deadly things in our generation, and taking it lightly like, what is the long-term ramification? Because it's going to do something powerful, some kind of powerful influence with my immune system.

We simply don't know, but we do have mountains of peer-reviewed evidence on the essential nature of optimizing our sleep, or making sure that we're moving our bodies, or making sure that we have healthy relationships, or making sure that we're eating real food and providing our immune system, again, your immune system is made from food, this is why it's so important. And we have mountains of evidence on how all these things control and modulate our immune system, it's that important. And so again, this does not have to be complicated, but it does require a change in our thinking, and we cannot allow our friends and family to hate and fear each other, and to put unscientific laws in place to marginalize citizens who have been cautious about this vaccine campaign that again, today as we've discovered, it's a much bigger story than what most people realize. Because as you've seen, and this is just a small slice of the peer-reviewed evidence that we have right now, vaccinated individuals cannot only spread the virus but can also make variants that are more infectious. We cannot put the blame on vaccinated or unvaccinated community members, it's not logical, it's not ethical, and we have to take back control of our lives, we have to stand for each other because everyone is just trying to do what they feel is right in this world where competing interests are profiting off of our sickness and our divisiveness. Let's stand for each other.

Let's get back to basic principles of health and love. And let's change our world for the better. I appreciate you so much for tuning in to the show today. If you enjoyed this, please share it out with your friends and family on social media, the audio platforms are going to be everywhere, but I want you to do something special for me today. Because of the nature of the terrain that we're existing in and the censorship, unfortunately, we can't even share this information on many platforms because videos are getting censored, they're getting taken down, they're getting... People are getting de-platformed. And YouTube has engaged in that with me. And so recently, I found out we got the opportunity to work with somebody who works behind the scenes with a lot of YouTube management and some of the biggest shows that are out there, and I had no idea about this, but I was one of the top 10 of these health experts on these various platforms on YouTube. I didn't know, I just thought it was those people's platform, good friends of mine whose shows that I've been on, School of Greatness, Impact Theory, the list goes on and on.

And so, seeing that, I'm in that one... Top 1%, that top half percent with these various channels, when I'm on sharing real science, sharing real integrity and real solutions. And so, this individual reached out and he was like, I want to work with you and help to get you in front of more people because this is so important right now, especially in this time. And so, he can see behind the scenes and see that there are different channels and see the fact that our videos are getting suppressed. Certain videos you can go and search for on YouTube, you won't even find them unless you have a link. So this whole concept of things being hidden, yeah, it's real. And I didn't want to believe that that was true, I just didn't, I just thought, Well, it's this, it's that. But we can see that. And so, this video for this episode will not be on YouTube, it will be at themodelhealthshow.com/ade. So please, I want you to head over there and check out the video version. But also, what I want you to do because we found out a couple of influential points with YouTube, driving our subscribership to a certain place, we get to work directly with YouTube, and we're pretty close. So please, I'm asking this of you from my heart personally, please head over to YouTube today and subscribe to The Model Health Show on YouTube.

Please do that for me as my one request, and definitely check out the video of this episode. We're going to be having this on a multitude of different platforms moving forward. On YouTube, we're going to be continuing to put incredible content and resources there as well, but information like this has this tendency if it's not fitting that popular narrative to be censored and it's not okay. So, the further we can get in, we can be influential, and we can help to change this. So please head over to YouTube and subscribe to The Model Health Show today. I appreciate you so much for tuning in to the show and listen, we're just getting warmed up, we're just getting warmed up, we got some incredible guests and absolutely powerful, master classes coming your way very, very soon. Take care, have an amazing day.

And for more after the show, make sure to head over to themodelhealthshow.com, that's where you can find all of the show notes, you could find transcriptions, videos for each episode, and if you've got a comment, you can leave me a comment there as well. And please make sure to head over to iTunes and leave us a rating to let everybody know that the show is awesome, and I appreciate that so much. And take care, I promise to keep giving you more powerful, empowering, great content to help you transform your life. Thanks for tuning in.