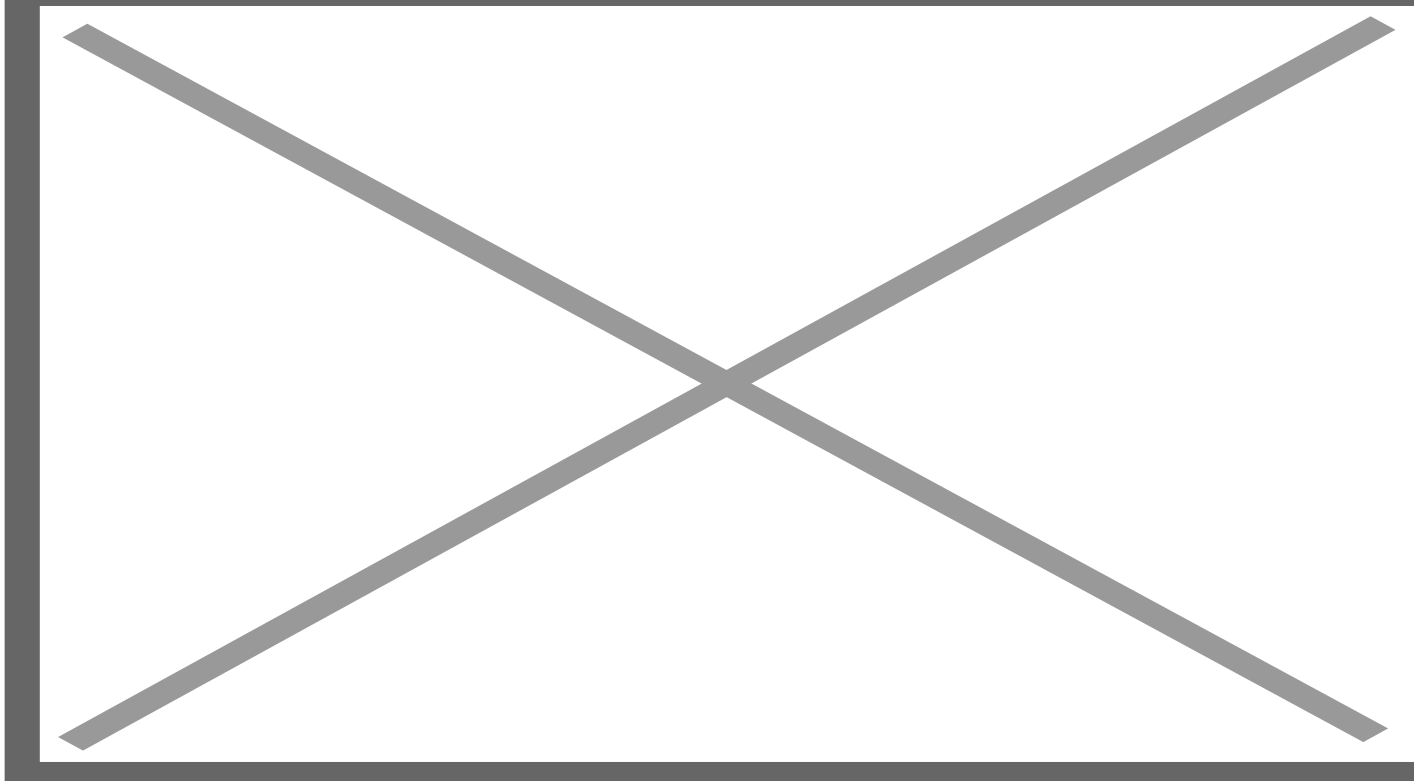


Message to social media ‘prophets of doom’ Drs. Whistle Blower, Anti-Vaxx and Dangerfield: No, COVID vaccines aren’t dangerous and are incredibly effective

It’s hard to ignore the wave of anti-vaccine videos circulating on social media. Curiosity makes us click, and we watch yet another doctor’s emphatic advice—“Do not take the COVID-19 vaccine if you value your life!” They all speak with the confidence and authority of spies planted last year in the Pfizer, Moderna, and Johnson & Johnson labs. Now these self-proclaimed experts—some with acceptable medical backgrounds, but others more questionable—have become whistleblowers predicting horrific outcomes from the vaccines. They look into our eyes and claim to care deeply about our health, urging, “Pass my video on to everyone you know as fast as you can.”

Having viewed several, I asked myself, “Can I find the truth?” My hands-on science training consists of dissecting and drawing a frog in tenth grade. But I can dissect long sentences and draw conclusions, use a dictionary, and apply critical thinking with logic.

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Credit: Shutterstock

So I intensively researched respected sources and found most of the doomsayer doctors’ assertions to be wrong. Here’s what my homework found. (Note: some names are changed but the claims are reproduced accurately.)

“Dr. Whistle Blower” insists the new medication is not a “real” vaccine because it does not fit the [CDC’s own definition](#): “A product that stimulates a person’s immune system to produce immunity to a specific disease, protecting the person from that disease.” The meaning of immunity is the hangup for him.

Dr. Blower wrongly limits his definition of a “real,” immunizing vaccine to the sterilizing type, which kills the pathogen on contact and establishes immunity by preventing any disease from entering the body. This “gold standard” has not been achieved for many diseases which, nevertheless, are no longer a threat, thanks to vaccines.

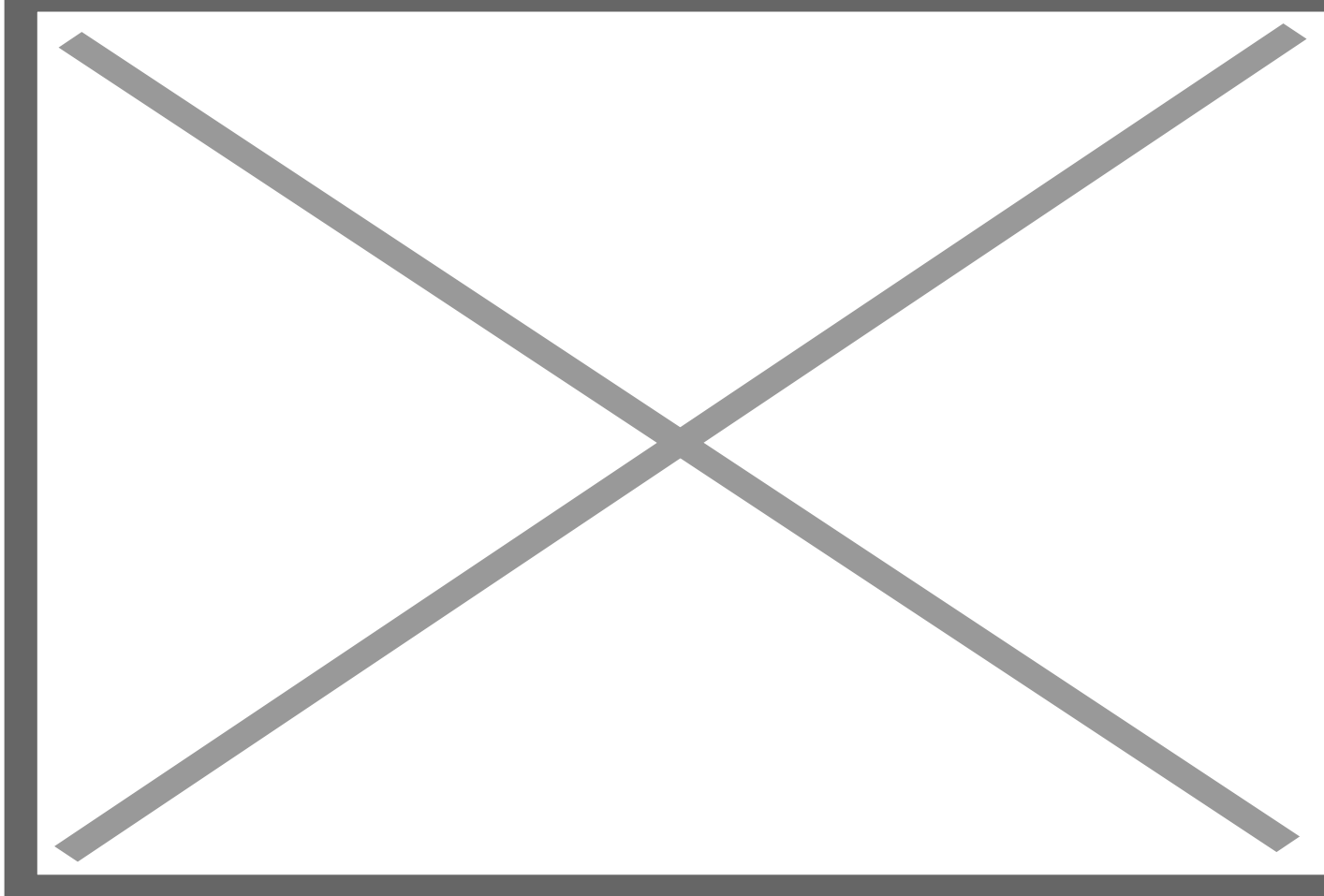
By contrast, the COVID vaccine is prophylactic, meaning the inoculation does not necessarily kill the pathogen but [prevents development of the disease after infection](#). This type, though not blocking the virus from invading the body, stops it in its replicating tracks and provides immunity from everything people fear about COVID-19—pneumonia necessitating oxygen, followed by ventilator support, then possibly death. [New research, however, strongly suggests](#) that the mRNA vaccines block infection entirely in 90% of cases. Most vaccines are the prophylactic type, effectively preventing ravages of the disease in the body, a worthy goal now reached.

Another naysayer, “Dr. Anti-Vaxx,” is disingenuous in calling the vaccines “experimental.” They are not fully CDC and [FDA approved](#) and licensed—that is true. Full licensure would require another two years, allowing thousands of additional deaths. Common sense required a risk-benefit analysis resulting in authorization of emergency-use status. However, the protectors of American health have not conceded to a dangerous experiment, as Dr. A-V claims.

To meet required [CDC standards](#), new medications must be tested on animals and volunteers. Though Dr. A-V insists no animals were tested, he is wrong. Experiments overlapping with Phase 1 trials were conducted on both monkeys and mice, revealing safe results with the animals. Also, more than [73,000 people](#) volunteered for Pfizer’s and Moderna’s Phase 3 tests, with outstanding results. The vaccines were held to all defined requirements in three rigid phases of trials, skipping no steps and proving the product [safe and effective](#). [Not every vaccine was given a quick green light](#); the CDC is requiring a closer look at one company’s trial procedures. Nothing is automatic with the CDC, emergency situation or not.

To comprehend the shots’ safety components, we must understand that the Pfizer and Moderna vaccines are revolutionary [in the way they work](#). The injection does not send a piece of the actual virus into the cell, as do most previous vaccines. Rather, [mRNA medicines](#) travel into the cell (not into the nucleus where the gene resides) in the form of instructions—a “recipe”—causing “the cell’s machinery to produce a harmless piece of the virus...known as a spike protein” to muster the [body’s defense to fight disease](#). Then the benign mRNA is absorbed and quietly leaves.

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Credit: Sanofi

This truth is opposite from the assertion of another alarmist, “Dr. Dire Warning.” She makes a claim that the “foreign” (meaning synthetic) mRNA will remain to harm the body. She also calls the vaccines “experimental gene therapy,” According to [Stanford Medicine](#), no component of the inserted “recipe” even touches the genes in the cell nucleus. Moreover, the doctor neglects to note that [our cells cannot convert RNA into the DNA of our genes](#), thus rendering impossible any gene alteration.

Yet another alarmist, “Dr. Dangerfield,” says the vaccines were rushed. This inaccurate conclusion reveals either willful ignorance or mere assumption. Coronavirus study began in 1962 when it was discovered in humans, and it has continued for over 50 years producing data on the virus’ structure, genome, life cycle, and spike importance, to name a few particulars. Virologists last year resumed COVID-19 vaccine experimentation based on a strong foundation. Complaints about Moderna’s lack of experience are also unfounded: the company [“has focused on mRNA technology”](#) since 2010.”

Most who speak against the vaccine have questioned the length of time its protective antibodies will last. The [Wall Street Journal's April 2](#) edition reports Pfizer's vaccine is still effective after six months.

One doomsday prophet, biologist Dr. Vandan Bossche, recently announced that the vaccination program, if continued, will allow the virus to mutate, with the result of wiping out most of our species. His scientific-sounding terms explain that the COVID vaccination will encourage the production of a '[super-infectious virus](#)' which our overcharged immune systems cannot fight off. (Remember the Y2K prophecy predicting all computer systems would go berserk at the turn of the twenty-first century?) At least seven scientists' analyses explain the lack of solid support for the biologist's contentions. Dr. Robert Verkerk, scientific director of the [Alliance for Natural Health International](#), concludes his article with this: "For me, [Dr. Bossche's] assertions are overly emphatic and insufficiently evidence-based given the uncertainty and complexity of the science involved."

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Are the "danger ahead" prophets correct? The future is not ours to see. But the vaccine disclaimers I heard did not take the time to state, much less debunk, the claims of reputable vaccine proponents as respected researchers must do. Most people are not buying in. Polls at end of March indicate almost 70% of Americans intended to be fully vaccinated. Why so many in favor? Because most Americans have decided to trust the preponderance of scientific evidence about this vaccine proving 90% effective in the real-world trials.

We must ask if the doctors' claims are realistic. Will vitamins and a healthy lifestyle protect us from a disease that has killed worldwide [over 2.3 million people](#)? Are curative medications readily available and will they quickly heal us should we become ill? Will those medications taken at home cause no dangerous side effects? And might the speakers have ulterior motives? These video performers don't mention their incomes from YouTube. One earning COVID platform pulls in [\\$500,000 a month](#) for its star. Whatever motivates the video lecturers, most of their content is light on legitimate studies and substantive proof, but heavy on scare tactics and conspiracy theories.

Millions of intelligent, concerned Americans are searching for answers. Most lack the time necessary to find good sources and then to read and quickly absorb unfamiliar, scientific language. My careful study of the above linked sources persuades me I did the right thing in receiving the vaccine.

Marilyn Quigley is a contributing author to Real Clear Science.

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