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Department of Defense Driving Mass Vaccination While FDA and Vaccine Companies Are Powerless to Stop It

By Dr. Peter McCullough
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In this issue of the Report, we have an exclusive interview with Alexandria (Sasha) Latypova, MBA, a former pharmaceutical executive, and independent analyst. Her prior reports on TrialSite News that deaths reported in VAERS after COVID-19 vaccination are not randomly distributed according to manufacturing lots as they are with influenza vaccines. Instead, they are aggregated in specific "hot lots."

For example, from data on 33 lots of the Pfizer vaccine, 80% of the deaths have arisen from 35% of the lots. For Moderna, only 24% of the lots account for 80% of the deaths. Lot sizes were small initially, and some contaminated the metallic beads used in the manufacturing process. This explains reports and videos of injection site magnetism early in the campaign and why over time, these claims dissipated.

The lot sizes became larger, and the rushed nature of vaccine manufacturing invariable loads specific lots with more viable intact mRNA, while others have considerably less genetic material and or broken fragments of mRNA.Under the existing government contracts, there is no FDA or third-party inspection of the products for safety, quality, or purity. Because the US Department of Defense, under the Emergency Use Authorization countermeasures program, is the "developer" of the vaccines, there is a complex array of biological defense contractors that make the components of the vaccines.

Specifically, private contractors do the fill-and-finish manufacturing, and the DOD or its designees has material possession of the products until delivery at a vaccine center. At this stage, the vaccine companies (Pfizer, Moderna, JNJ, Novavax) are largely marketing shields for the military program. Ms. Latypova makes it clear, by the US EUA regulations, COVID-19 mass vaccination is a DOD operation, and the signal to "go" is given by the US Secretary of Health and Human Services (HHS). Under Trump, it was Alex Azar, and now with Biden, it's Xavier Becerra. Essentially if the HHS Secretary believes a national medical emergency

exists, then DARPA, the branch of the military dealing with biological threats, is activated, and the process starts.

Here is a quote from the DARPA website:

> "As part of the ADEPT program in 2011, DARPA began investing in nucleic acid vaccines. The hypothesis was that rather than delivering antigens to the immune system, we could deliver genes that encode the antigen and allow the human body to produce the antigen from its own cells, triggering a protective immune response. In December 2020, former ADEPT performer Moderna's RNA vaccine received FDA Emergency Use Authorization (EUA) approval for the prevention of COVID-19."[1]

So, it is fully disclosed that the genetic vaccines were not a product of Operation Warp Speed and developed in just a few months, as portrayed by the White House. In truth, DARPA has been working on genetic vaccines with companies such as Moderna since 2011.

What is the role of the FDA?[2] Latypova points out it is largely "theatre". In other words, the FDA is giving sham approvals to versions of the vaccines as they move forward since they are powerless to stop it. This interview is gripping and a must-listen for those trying to comprehend the mild-blowing reality of forced vaccination resulting in record injuries, disabilities, and death. Our music contribution is from John Gouveia Psalm 2 – Why Do the Nations Rage?[3]

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Dr. McCullough is an internist, cardiologist, and epidemiologist managing the cardiovascular complications of both the viral infection and the injuries developing after the COVID-19 vaccine in Dallas, TX, USA.

Notes

[1] https://www.darpa.mil/work-with-us/covid-19

[2] https://www.fda.gov/regulatory-information/search-fda-guidance-documents/emergency-use-authorization-medical-products-and-related-authorities

[3] https://m.youtube.com/watch?v=nXTL5iZDD8k

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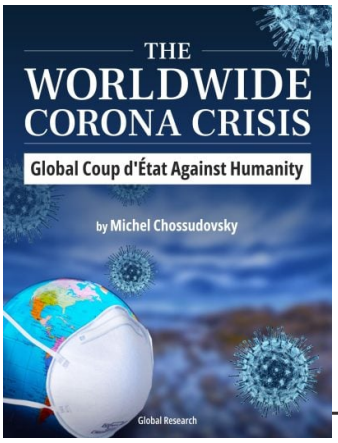

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