

HIV mRNA Vaccine Has Failed Phase I Trials: Dr. William Makis

It has "puzzling skin side effects" in up to 20% of vaccine recipients, according to a new article in "Science". But they are pushing forward anyways.

By [Dr. William Makis](#)

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[COVID Intel](#)

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I started reading this propaganda piece in complete disbelief, it's stunning that anyone would be willing to lend their name to this kind of utter garbage:

"The effectiveness and safety of the vaccines sent clear signals about the promise of the technology, spurring new investment and interest."

"The obvious impact has been the acceptance in the scientific community of the benefits of mRNA vaccine technology, which existed before the pandemic but hadn't proved itself on the scale of Phase 3 clinical trials and beyond," said Cornell virologist John Moore."

"By next year, it's possible [Pfizer](#) and [Moderna](#) will both have approved combination flu-COVID vaccines"

"Just this week, Moderna and Merck launched a late-stage study of an experimental skin cancer vaccine after the companies reported in an earlier trial it [cut the risk of melanoma death](#) in half."

"From a scientific point of view, we are entering the golden age of vaccines ... that is phenomenal and something we should be very excited about," said former Biden administration COVID response coordinator Ashish Jha.

“And yet, we’re also entering a time where people are more skeptical about vaccines than any time in the last 50 years. That contrast — that contradiction, almost — is very odd and we have a lot of work to do.”

“The technology is still tricky and will be deployed differently depending on the disease.”

“Development of a closely watched HIV mRNA vaccine candidate, for example, recently hit a speed bump when skin problems arose in small, early-stage studies”

What?

[Mar. 1, 2024](#) - *SCIENCE* - *Puzzling skin side effects stymie advance of promising HIV vaccine*

“One of the most promising attempts to reinvigorate the stalled quest for an HIV vaccine has hit a snag”

“In small safety and immune tests of the innovative vaccine strategy, which relies on a series of messenger RNA (mRNA) shots, an unusually high percentage of recipients developed rashes, welts, or other skin irritations.”

“recent phase 1 trial of the vaccine....researchers want to understand the cause of the skin problems”

The complex vaccine strategy involves injections of different mRNAs, encoding various pieces of HIV’s surface protein or the entire molecule, over the course of several months.

The goal is to gradually guide the immune system’s B cells to produce so-called broadly neutralizing antibodies, or bnAbs, [capable of stopping many different variants of the AIDS virus](#).

“skin problems—including urticaria (hives), pruritus (itching), and dermatographism (welts after scratching)—occurred at a noticeably high level in all of the studies, [affecting 11 out 60 people in one of them](#).”

“These HIV vaccines deliver a relatively high dose of mRNA, which Moderna scientists and others think could explain the skin issues. The company’s original COVID-19 mRNA vaccine used the same dose and has also been linked to skin problems, although at much lower frequencies, of 1% to 3%”

“the side effect issue needs studying, but is also concerned that people who are vaccine opponents might misrepresent the scope of the problem”

“We’ve hit this rather miserable bump in the road”

How the HIV mRNA Vaccine Works

“Moderna’s effort grew out of a project led by biophysicist William Schief, who developed it at Scripps Research and then brought the strategy to the company, where he is now a vice president.”

“It exploits the fact that B cells begin as naïve, or germline, cells and then during an

infection undergo a series of mutations that, in effect, hone the ability of the antibodies they produce to bind to specific parts of viruses and “neutralize” their ability to infect cells.”

The “germline targeting” [vaccine strategy relies on several shots to take B cells through this maturation process](#), eventually leading them to produce bnAbs against viruses.

“We call it priming, shepherding, and polishing,” explains Dennis Burton, an immunologist at Scripps who works with Schief. Initially the group did not use mRNA.

Schief switched to mRNA because it provides far more flexibility, allowing the researchers to readily fine-tune the HIV component of the vaccine. Because of the enormous diversity of HIVs in circulation, he contends that an effective vaccine likely will have to trigger production of up to five different bnAbs.

That would mean priming, shepherding, and polishing multiple B cell lineages. Without the easy-to-modify mRNA, Schief says, “good luck—that is a daunting, daunting task.”

NIAID now plans to repeat the phase 1 trials of some of these Moderna/IAVI HIV vaccines with a lower dose.

“Last year, the world had 1.3 million infections of HIV. I think it remains an urgent requirement to find a good solution.”

Mar. 2, 2024 - IAVI statement on mRNA HIV vaccine candidate trials

“IAVI, Moderna, the HIV Vaccine Trials Network (HVTN), the National Institutes of Health (NIH), and the Bill & Melinda Gates Foundation — all partners in trials of mRNA-based HIV immunogens — are committed to the safety of trial participants”

“IAVI and partners have observed that skin events occurred in 7%-18% of the volunteers who received the investigational products” (HIV mRNA Vaccines)

“The affected volunteers in the trials had skin events that were described as hives, itchiness, or hives caused by scratching. Most of these events were mild or moderate, and managed with simple allergy medications. There were no serious adverse events reported.”

“IAVI and partners are actively working to investigate the potential causes of these skin events. We have brought in an interdisciplinary team of external experts, including allergists and immunologists, to further assess the skin events”

“We look forward to continuing our pursuit of proof-of-concept for the elicitation of broadly neutralizing antibodies against HIV via the defined sequential germline-targeting immunization strategy, while working to better understand this safety signal and identify approaches to mitigate it.”

My Take...

The entire LNP/mRNA Vaccine field is a fraud. It's a failed technology with a terrible side effect profile.

The entire field now depends on the suppression of COVID-19 mRNA Vaccine injuries & deaths, which are now in the millions (5.3 million in WHO VigiAccess alone), so we are no longer dealing with scientists but con artists.

One has to read these articles from the perspective of MARKETING.

They are trying to find “novel” ways to market a failed technology and get failed products on the market.

With this HIV mRNA Vaccine, the new marketing gimmicks are: “broadly neutralizing antibodies” and “priming, shepherding, and polishing of multiple B cell lineages”.

Having 20% of your vaccine victims break out in rashes and hives is considered a “snag”, “speed bump”, “bump in the road”. That’s quite a bump.

So they’ll just repeat the Phase I trials again, but with a lower dose of poison this time.

It’s fascinating to watch yet another vaccine fraud, this time in its early stages.

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Dr. William Makis is a Canadian physician with expertise in Radiology, Oncology and Immunology. Governor General’s Medal, University of Toronto Scholar. Author of 100+ peer-reviewed medical publications.

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