

Red Alert: Renowned Cardiac Surgeon Steven Gundry Warns mRNA COVID-19 Vaccines More Than Double The Risk of Heart Attack

The 5-Year Risk For Acute Rupture Of A Coronary Artery With A Potential Fatal Outcome!

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Using more sensitive and predictive biomarkers of heart function, cardiologists have produced startling data which suggests all Covid-19 vaccination should come to a halt.

Steven Gundry MD, [renowned cardiac surgeon](#), known more by the public for his dietary advice to [avoid toxic lectins in foods](#) and his book entitled [THE PLANT PARADOX](#), has issued a precautionary red flag for Covid-19-vaccinated patients and those still considering vaccination, given that a sophisticated prognostic test used by his medical group indicates Covid-19 RNA vaccines increase the 5-year risk of the most feared type of acute heart attack from 11% to 25%! The report is published in a [recent edition of CIRCULATION](#), a publication of the [American Heart Association](#).

The data

Dr. Gundry reports his medical group has conducted the highly predictive PULS biomarker test on 566 patients. The PULS test generates a score predicting the 5-year risk (percentage of chance) of a new [Acute Coronary Syndrome](#), defined as a range of conditions that are associated with sudden, reduced blood flow to the heart most often caused by a plaque rupture or clot formation in the heart’s arteries.

The PULS cardiac test assesses parameters such as inflammation (interleukin-16 or IL-16), cell death (Fas cell apoptosis), HGF (Hepatocyte Growth Factor or HGF that gauges the movement of T-cells—a type of white blood cells generated by the thymus gland). This score is usually assessed every 3-6 months among at-risk patients. This data may explain the observed heart problems following Covid-19 vaccination.

PULS TEST: Increase in cardiac risks with RNA Covid—19 Vaccination

- Inflammation (IL-16): rose from 35 to 82
- Cell death (apoptosis Fas): rose from 22 to 46
- HGF (T-cell movement): rose from 42 to 86

The overall PULS score rose from 11% five-year risk to 25% five-year risk!

Dr. Gundry indicates an ominous change in these PULS scores was first noted with the advent of RNA Covid-19 vaccines. These changes were seen in most vaccinated subjects, his report notes.

The biomarkers

The [PULS test](#) ([Global Discovery Biosciences](#), Irvine, CA) is widely used by cardiologists.

The PULS test actually measures nine different parameters, in particular the immune response which is activated in response to coronary artery injury.

Unstable cardiac lesions are reported to cause 75% of all heart attacks. A rupture is the most common cause of acute heart attacks. These unstable lesions in a coronary artery may also lead to heart failure and blood clotting (thrombosis) and may account for these very same problems noted among vaccinated individuals.

Denials by public health authorities

The Centers for Disease Control (CDC) concedes inflammation (myocarditis) of the heart muscle and inflammation of the lining that surrounds the heart (pericarditis) occur after Covid-19 vaccination. According to the CDC these adverse events occur more often after the 2nd dose and within a week of vaccination. Chest pain, shortness of breath and feeling the heart is beating overly fast are symptoms. The CDC maintains the known risks of Covid-19 illness “[far outweigh](#)” the potential risk of having a “[rare adverse reaction](#)” like myocarditis/pericarditis.

According to a review of 2.5 million mRNA vaccinated subjects age 16 and older in Israel, 54 cases of myocarditis ([2.13 cases per 100,000 vaccinated persons](#)) were reported. Reviewers claim most cases of carditis are mild and rare, and “[benefits of Covid-19 vaccine greatly outweigh the risks](#).” The [Myocarditis Foundation](#) also [brushes off cases of myocarditis following vaccination, classifying them as “rare.”](#)

These denials were issued prior to publication of Dr. Gundry’s report.

Contrary data; why vaccinate at all?

Contrary data reveals [99% of Covid-19 infected individuals developed antibodies on their own without the need for vaccination](#). According to a report published at MedPageToday.com, health authorities continue to ignore natural Covid-19 immunity as 90-99% of people who recover from Covid-19 infection “[astonishingly have a low frequency or repeat infection, disease or death](#).”

Covid-19 is not the mutated virus that public health authorities said humans have no immunity towards. School-age children (over age 5) have received so many immunizations that they have [developed what is called trained immunity](#) and exhibit no or few symptoms

upon infection with Covid-19.

Vaccine mandates are threatened and Americans coerced by employers to vaccinate when an authoritative study published in Science magazine concludes: "[the majority of people infected with the coronavirus that causes COVID-19 will produce robust protective antibodies, which will likely protect from reinfection.](#)"

[The CDC does not collect data on natural immunity.](#)

The director of the National Institute of Infectious Disease concedes, upon direct questioning, that the Covid-19 RNA vaccine do not reliably protect their recipients from serious Covid or death ("[seeing a waning of immunity not only against infection but against hospitalization and some extent death which is starting to now involve all age groups.](#)")

[Even vaccinated doctors are reported to be dying,](#) not just having relapses.

What to do

Given that millions of Americans have been vaccinated for Covid-19 who are not likely to go to a cardiologist for the PULS test, or have no access to the test in their geographical area, and many vaccinated individuals may not even have a cardiologist; and considering 200 million vaccinated Americans may over-run the offices of the nation's 33,000 cardiologists, which would amount to ~6000 patients per cardiologist which would backlog their office appointment books by over a year, other preventive measures may need to be taken.

Given that vaccinated patients may not desire or may not be able to undergo the PULS test, this journalist calls attention to the work of Dr. Linus Pauling and Dr. Matthias Rath, who showed vitamin C is required to heal coronary arteries that feed the heart with oxygenated blood, and that a [deficiency of vitamin C allows a blood protein known as lipoprotein\(a\) to serve as a sticky bandage for damaged coronary arteries.](#) However, lipoprotein(a) [may then induce blood clots due to its stickiness and may close off oxygenated blood altogether](#) (the so-called widow-maker heart attack).

[Elevated lipoprotein\(a\) blood levels are found among patients with acute coronary syndrome,](#) which the PULS test assesses.

Dr. Matthias Rath went a step further and showed animals that produce vitamin C internally do not develop these rupture-type heart attacks. Dr. Rath authored a book [WHY ANIMALS DON'T GET HEART ATTACKS BUT PEOPLE DO.](#)

Despite a new drug to lower lipoprotein(a) now being available, it is futile to attempt to lower lipoprotein(a) levels. Maintaining vitamin C blood levels is the most efficacious way to prevent lipoprotein(a) induced heart attacks.

Dr. Steve Hickey of Manchester England and author of the book [THE VITAMIN CURE FOR HEART DISEASE,](#) suggests [500 milligrams of vitamin C taken 5 times throughout the day,](#) given that vitamin C is rapidly excreted in urine.

Another novel way to maintain vitamin C levels is to restore internal synthesis in the liver which the human species lost many centuries ago. A gene mutation blocks production of an enzyme that converts blood sugar to vitamin C. A novel dietary supplement has been demonstrated to correct this problem and [doubles 24-hour vitamin C levels without vitamin](#)

[C itself.](#)

A second-level preventive would be to inhibit blood clots from forming. Both fibrin and platelet clots are formed following vaccination. A blood test called [D-dimer indicates whether fresh blood clots are forming](#) following vaccination. Covid-19 vaccinated patients may want to ask their doctor about this test.

Until a cardiologist can assess risk, natural blood thinners may be employed, such as the long-acting enzyme [nattokinase](#), available at health shops. [More information is also available.](#)

The red wine molecule [resveratrol is a natural blood thinner and lower D-dimer levels.](#)

A third tier of protection is to [utilize resveratrol to produce what is called cardiac preconditioning](#). Resveratrol has been demonstrated to avert heart muscle damage following a heart attack (blockage of oxygenated blood to the heart) by [pre-activating internal enzymatic antioxidants](#). The result is the heart can withstand periods of low or no oxygenation without sustaining damage. Even one brand of resveratrol in a matrix of other natural molecules has demonstrated this pre-heart attack protection in an animal study, [protecting the heart in a superior manner to resveratrol alone](#). The [proper dosage is critical to produce the protective effect](#).

Resveratrol naturally [lowers lipoprotein\(a\) levels](#). [Resveratrol also blocks all manner of Covid-19 pathology](#).

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