

The Sobering Lesson of  
Published Covid Science:  
**Stop Taking mRNA Covid Vaccines Now**

# Hatchard Report

Dr. Guy Hatchard

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Last week [we reported two recently published scientific studies](#). One of these found that COVID-19 vaccination increases susceptibility to bacterial and viral infection among the young—it weakens immune responses. The other found that COVID-19 vaccine-induced myocardial injury is far more common than previously thought—affecting one person in 35–1000 times higher than the rate admitted by our government. Today we highlight two more studies.

You can also [listen to an audio version here](#).

A study available at PubMed entitled “[Detection of recombinant Spike protein in the blood of individuals vaccinated against SARS-CoV-2: Possible molecular mechanisms](#)” employed mass spectrometry to detect the presence of a version of the Covid spike protein known as a *PP type* that specifically results only from mRNA vaccination. The authors report that

*“The specific PP-Spike fragment was found in 50% of the biological samples analysed, and its presence was independent of the SARS CoV-2 IgG antibody titre. The minimum and maximum time at which PP-Spike was detected after vaccination was 69 and 187 days, respectively.”*

In the study conducted in Southern Italy, 20 subjects were mRNA vaccinated, 20 were unvaccinated (this group of subjects did not have Covid or Covid antibodies), another 20 subjects were unvaccinated but tested positive for Covid. **Only the vaccinated group tested positive for the vaccine induced PP-spike protein.**

Early claims were widely publicised that spike protein would only be produced for a few days after vaccination, supposedly sufficient to stimulate an immune response, and then would cease. However, no study supported these claims. The new study proves these claims false. Over half of the vaccinated subjects had the PP-spike protein for up to the 6 month duration of the study. The authors theorised that:

*“It is possible that the mRNA sequences from the vaccine may be integrated or re-transcribed in some cells”.*

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Given the suspected association between myocardial damage and the spike protein, this points to the continuous production of a cardiac toxin by some genetically transformed cells in a high proportion of vaccinated individuals. As the study terminated after six months, it is quite possible, if not probable, that the effect may continue past six months.

This is not isolated speculation, last year we commented on a study entitled [Intracellular Reverse Transcription of Pfizer BioNTech COVID-19 mRNA Vaccine BNT162b2 In Vitro in Human Liver Cell Line](#), which found that reverse transcription of the Pfizer mRNA vaccine occurs in vitro (outside the human body). We now have good reason to suspect it also occurs inside our physiology.

A die-hard vaccine advocate might try to defend Covid vaccination, arguing that it increases some risks but on the plus side reduces the rate and risks of Covid infections. Yet a year ago a study was published in the journal of Clinical Infectious Diseases entitled [Severe Acute Respiratory Syndrome Coronavirus 2 \(SARS-CoV-2\) Naturally Acquired Immunity versus Vaccine-induced Immunity, Reinfections versus Breakthrough Infections: A Retrospective Cohort Study](#) which found that the opposite is the case. The authors reported that vaccinated individuals have a 13-fold increased risk of a breakthrough Covid infection when compared to unvaccinated individuals who have acquired natural immunity through prior infection. Moreover, the vaccinated group had a 7-fold increased risk of symptomatic Covid infection involving hospitalisation when compared to the unvaccinated.

This doesn't seem to have prevented health authorities from rushing to hand out more Covid jabs the minute new variants are reported, without stopping to investigate. The newly detected Pirola (BA.2.86), a variant of Omicron, is a case in point. The UK government is [speeding up Covid vaccination programmes](#) and widening availability before anything reliable is known about its severity or transmissibility.

In a message for the public, UK Health Security Agency chief executive Dame Jenny Harries falsely asserted:

*"Thanks to the success [???] of our vaccine programme, we have built strong, broad immune defences against new variants throughout the population."*

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And followed up with the non-sequitur—**you need to get yet another shot**—saying *“In the meantime, please come forward for the vaccine when you are called.”*

Dr. Trisha Greenhalgh, a so-called internationally renowned expert and UK government adviser based at the formerly prestigious University of Oxford urged the government: *“It might be a good idea to vaccinate everyone”*

It makes me wonder if our health tsars are thinking before speaking, or are they stuck on auto-pilot? This all reminds me of people standing on street corners with signs saying *“the end is nigh”* or rather *“the golden age is just around the next corner if only you will take one more dose of my marvellous medicines”*. It doesn't make any sense when you compare these statements to health data and published science.

There are occasional flashes of realism creeping in. Dyed in the wool vaccine supporter Stuff newspaper admitted last week, *“We lack quality evidence about how effective different interventions are.”* In other words, we have been feeding you a lot of balderdash. You can say that again.

Two weeks ago, [we reported official NZ government figures](#) recording that the number of people unable to work because of disability had increased by 37.5% since 2020. Recently it was reported that [the number of people of working age with a disability in the USA rose by 857,000 in June](#). The media comment on such alarming figures is often tied up with vague talk of Long Covid, which only serves to confuse the issue and pump the fear factor. The effect of mRNA vaccination is simply not mentioned. The four studies we have cited in this and our previous release reveal a completely different story.

The authors of these papers went to great lengths to separate the effect of Covid infection from the effect of mRNA Covid vaccination. In each case, the effect Covid vaccination alone was to blame for adverse effects or poor immune responses. It is notable that other data we have previously reported indicates that each subsequent Covid vaccination dose further increases the risks of adverse effects.

There is a lesson here. I am reporting the above studies with a blanket recommendation, ***don't take any more doses of mRNA Covid vaccines***. The risks are verified to be substantial and serious. But let's ask a more probing question: Why are mRNA vaccines so dangerous?

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*mRNA vaccines are designed to breach the cell membrane which protects the genetic intelligence of the body.*

An analogy might make the significance of this process clear. Imagine a castle which houses the wise ruler of a territory. Safe in his castle, the ruler exercises his power and is able to manage the whole territory. An enemy army approaches. Using cannons, they breach the castle walls and create havoc, deposing the ruler and his administration. The system of wise rule breaks down, and everyone in the territory is now at risk. The invaders thought they would take over the territory and benefit from its riches. Instead, chaos rules.

The genetic intelligence operating inside our cells is completely different from the linear intelligence used to design mRNA vaccines. Linear or limited human intelligence makes one decision at a time that unfolds a chain of events. Genetic intelligence makes multiple decisions simultaneously and manages multiple interlocking functions in the trillions of cells in the human body, like the ruler in the castle who manages the whole territory. The mRNA vaccine is the invading army, it is not designed to protect the myriad functions of genetic intelligence, in fact, it undermines them.

The studies we have looked at in this, and our last release illustrate how immune function is compromised by mRNA vaccines. They illustrate the dangers which surface when multi-purpose genetic intelligence is replaced by a single focus on one particular type of activity to the exclusion of general immunity. Finally, they show how natural immunity is better placed to handle viral threats.

This points to a general principle—natural laws take multiple decisions simultaneously at all places, man-made laws are limited to specific circumstances and places. Uncountable trillions of physiological functions are automatically and precisely taken care of by our cells functioning under genetic intelligence every hour of the day. Replacing this kind of intelligence with crude fragments of genetic material invented in a lab is dangerous in the extreme, it is potentially terminal.

Just look around at the state of the world after the pandemic. We have emerged damaged. Resetting our medical, administrative, justice and economic systems is proving hard indeed. Chaos is threatening to rule.

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There are time-honoured systems of protecting immunity. The traditional systems of Indian Ayurveda, Chinese medicine, and Western herbal lore utilise the genetic intelligence of plants to enhance immune function. Spiritual well being supported by prayer is revered. Systems of meditation known to multiple cultures provide very deep rest aiding recovery. Exercise, dietary, and breathing regimes are also proven to aid recovery. Fresh air, sunshine and family time are necessary. These provide major benefits. Studies confirm considerable improvements in health across a range of multiple conditions. I discuss and reference these in my book [Your DNA Diet](#).

Discovering  
& Defending

## Your DNA Diet



As we move into the election, we have to ask what are the health perspectives of the candidates and potential new political leaders? As the pandemic unfolded, government health policy, media comment and medical advice became highly integrated, but it was integrated around a false paradigm of health that was heavily promoted by pharmaceutical interests focused on profit. New science findings have revealed some very hard truths about safety. The establishment has found these very difficult to face. Before voting, we need to know who among our future politicians are capable of assimilating the new perspective on health and protecting us from falling victim to ever more invasive genetic experimentation.

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