

Twice-Censored Landmark Study Links COVID Vaccination to Sudden Deaths



A staggering [38,000 deaths](#) have been reported following COVID-19 vaccination, yet the U.S. government has only acknowledged a handful of deaths connected to the now obsolete Johnson & Johnson shot.

For years, studies suggesting a connection between COVID-19 vaccines and death have been buried, censored, or dismissed as conspiracy theories. But now, a groundbreaking study has broken through the noise—and its findings are impossible to ignore.

A twice-censored peer-reviewed paper, published on Nov. 17 in [Science, Public Health Policy and the Law](#), found that 73.9% of reviewed deaths were determined to be directly caused by or significantly contributed to by the vaccine.

The majority of fatalities were linked to cardiovascular issues, accounting for 49% of cases. Other affected systems

included hematological (17%), respiratory (11%), and multiple organ systems (7%).

Notably, 21 cases involved three or more organ systems. The average time from vaccination to death was a mere 14.3 days, with most deaths occurring within a week of the last vaccine dose.

The research team, led by an international panel of doctors and scientists, systematically reviewed available autopsy data. Their goal was to determine whether post-vaccine deaths could be causally linked to COVID-19 vaccines.

To do this, they meticulously reviewed 325 autopsy and post-mortem reports available in published literature or submitted to public records and one organ-restricted autopsy case (heart). These cases were analyzed to identify pathophysiological mechanisms potentially tied to vaccine-induced injuries.

The analysis categorized each death into one of three groups:

1. **Causal or contributory relationship:** Deaths directly caused by or significantly exacerbated by the vaccine.
2. **Uncertain relationship:** Cases where insufficient evidence was available to draw a definitive link.
3. **Unrelated to vaccination:** Deaths determined to have no causal relationship to the vaccine.

Of the 325 autopsy cases, 240 (73.9%) were classified as causally or contributory to the vaccine, 60 cases (18.5%) were deemed unrelated, and 25 cases (7.7%) were categorized as uncertain.

Among the 240 deaths significantly linked to COVID-19 vaccination, the primary causes of death involved well-documented mechanisms of vaccine-related injury, including:

- **Sudden cardiac death** (35%)
- **Pulmonary embolism** (12.5%)
- **Myocardial infarction** (12%)
- **Vaccine-induced thrombotic thrombocytopenia** (7.9%)
- **Myocarditis** (7.1%)
- **Multisystem inflammatory syndrome** (4.6%)
- **Cerebral hemorrhage** (3.8%)

The mean age of death was 55.8, and the mean number of days from vaccination until death was 11.3, irrespective of dose.

In some cases, deaths involved damage to three or more organ systems, illustrating the systemic impact of adverse vaccine reactions. The study also found significant gaps in the reporting and investigating post-vaccination deaths. The researchers noted that underreporting of adverse events may lead to an incomplete understanding of vaccine safety risks.

Dangerous COVID Vaccine Spike Protein May Trigger Death

Of all of the potential mechanisms that can cause serious adverse events following COVID-19 vaccination, the authors suggest that the “uncontrolled synthesis” of the Spike protein is the basis of the immunological response leading to these deaths.

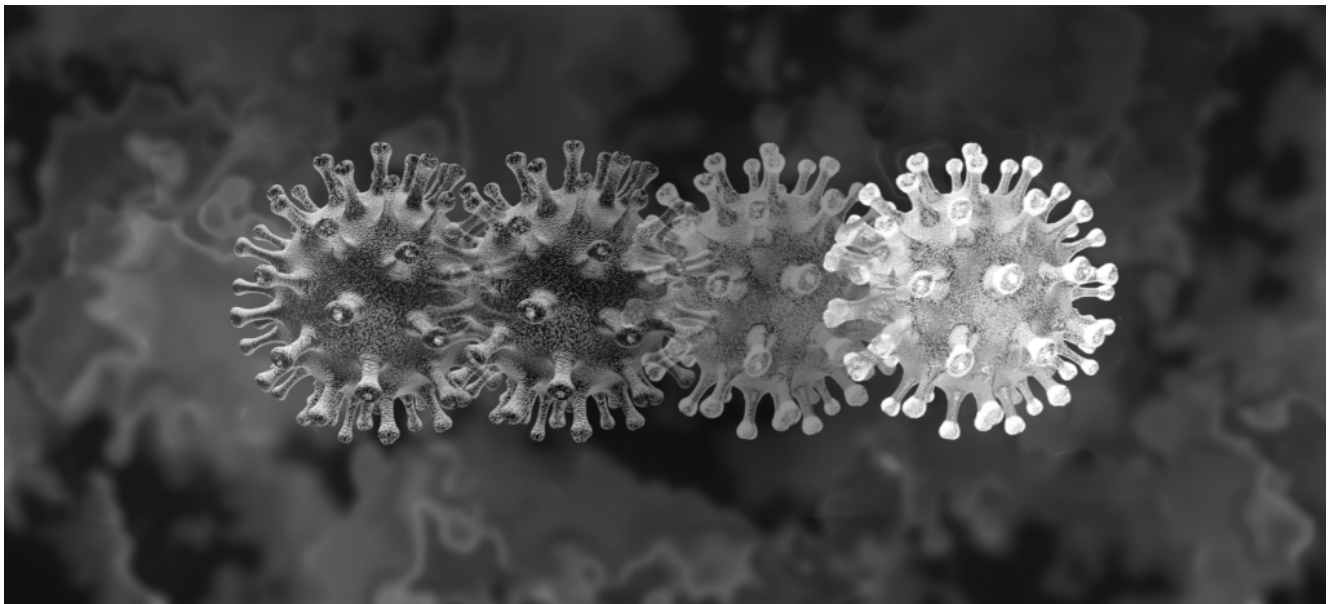
Uncontrolled synthesis refers to a process where the production of something—in this case, the Spike protein—is not properly regulated or contained.

In the context of COVID-19 vaccines, it means the body may produce the Spike protein in unpredictable amounts or for a longer duration than intended. This could lead to the Spike protein traveling to places in the body where it can cause harm, like blood vessels, the heart, or other organs, potentially triggering inflammation, clotting, or other

serious adverse effects.

The Spike protein is like a key that the SARS-CoV-2 virus uses to unlock and enter human cells, allowing the virus to infect the body. COVID-19 vaccines were supposed to teach the body to recognize and defend against this protein by either introducing a “harmless” blueprint for it (in mRNA vaccines) or using a modified version of it (in other vaccines).

The idea was to prepare the immune system to fight the real virus when exposed to it. However, it has become abundantly clear that this protein, especially when made in large or uncontrolled amounts, causes damage to other parts of the body, such as the heart, blood vessels, or other organs.



The Spike protein produced after vaccination can cause damage in several ways. It can disrupt the body’s natural blood pressure and circulation systems, leading to blood clots. The Spike protein also damages blood vessel linings and activates platelets (cells involved in clotting), making dangerous clots more likely. Additionally, the tiny particles used to deliver the vaccine’s instructions, called lipid nanoparticles (LNPs), spread throughout the body and may carry the Spike protein to multiple organs, potentially causing widespread inflammation.

Some researchers are concerned that the vaccines might also

interfere with long-term cancer prevention by disrupting important genes that protect against tumors. They've found potential links between vaccination and several serious conditions, including heart inflammation, neurological disorders, liver disease, autoimmune problems, and even cancer. This is partly because repeated vaccinations may train the immune system to respond in unusual ways, sometimes leading to immune system misfires that could worsen these conditions.

The study also highlights a specific syndrome known as vaccine-induced immune thrombotic thrombocytopenia, tied to viral-vector vaccines like AstraZeneca and Johnson & Johnson. This condition involves severe blood clots in unusual parts of the body along with low platelet counts and can be life-threatening.

For mRNA vaccines, the primary concern is myocarditis, a type of heart inflammation, particularly in young people, although tens of thousands of cases of blood clots have been reported following mRNA vaccination as well.

In cases of myocarditis, researchers detected free Spike protein circulating in the blood of affected individuals—something that wasn't present in vaccinated individuals without symptoms.

The study also points to evidence that vaccine components, including the genetic material used to produce the Spike protein, can linger in the bloodstream and travel to critical organs, such as the liver, heart, brain, and reproductive organs.

This widespread distribution of vaccine particles adds to the growing body of evidence suggesting that COVID-19 vaccines are not safe and raises serious questions about their long-term effects and potential to harm different parts of the body.