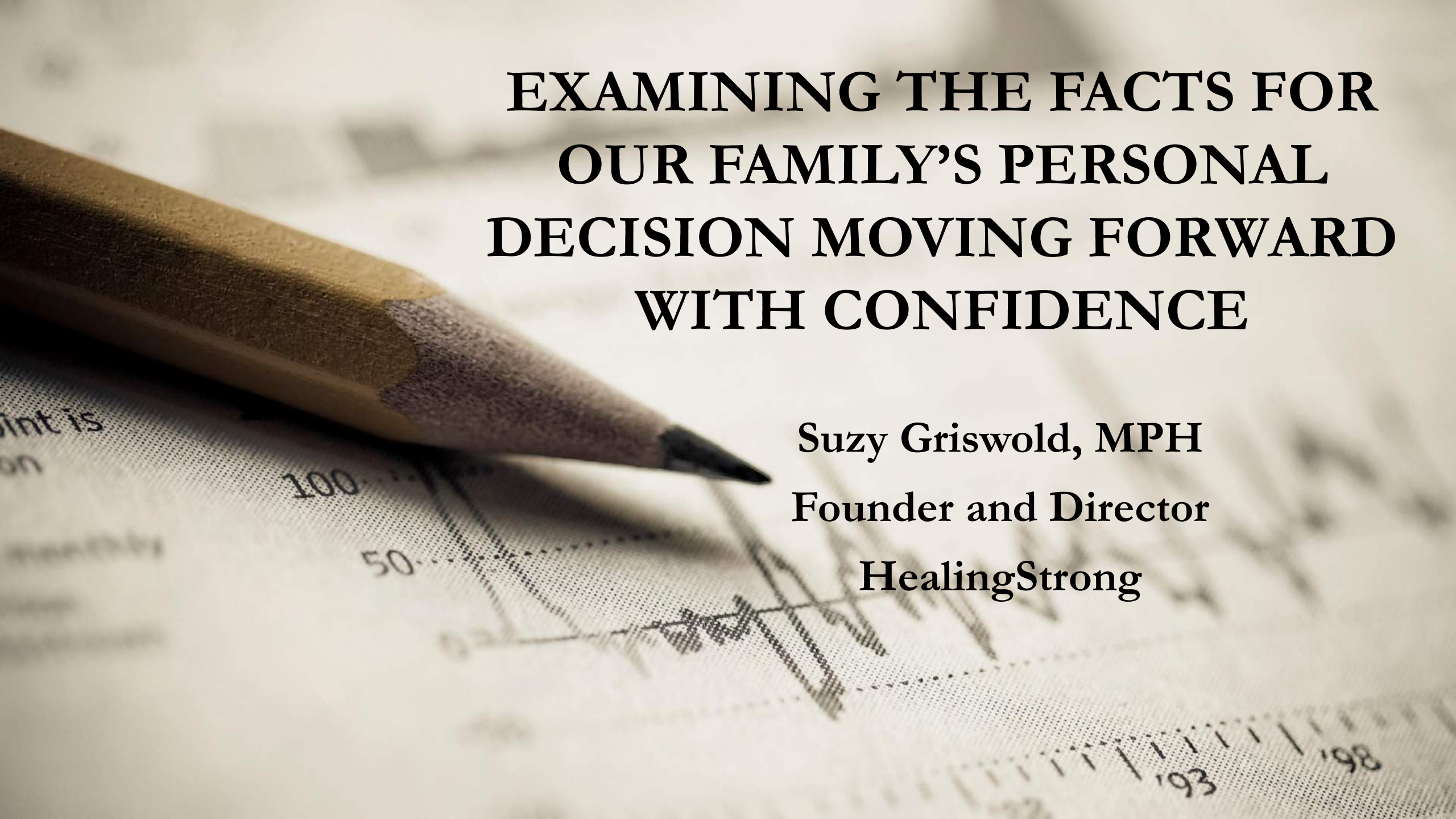




Faith
FEAR

INFORMATION, HOPE and PRACTICAL TOOLS IN A
C0V1D WORLD by HealingStrong

A close-up photograph of a wooden pencil with a sharpened lead tip, resting diagonally across a piece of paper. The paper features a line graph with a grid. The y-axis has labels for 100 and 50. The x-axis has labels for '93 and '98. The pencil is positioned over the graph, with its tip pointing towards the bottom right. The background is slightly blurred, emphasizing the pencil and the graph.

EXAMINING THE FACTS FOR OUR FAMILY'S PERSONAL DECISION MOVING FORWARD WITH CONFIDENCE

**Suzy Griswold, MPH
Founder and Director
HealingStrong**

Disclaimer

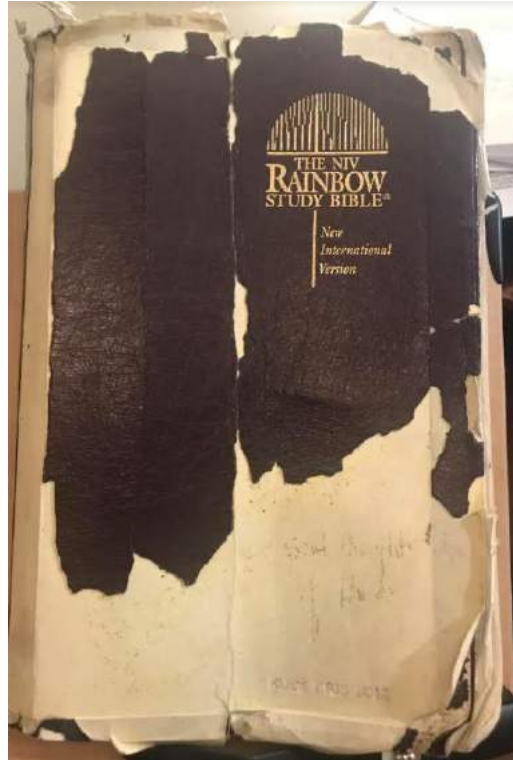
We have learned that our doctors are limited by the American Medical Association and Federal Drug Administration of what they can do to treat cancer or other diseases or illnesses. We are here to tell you what we have learned in our own journey to healing as patients ourselves – with information that was not readily available to us in our doctor's offices. We want you to be empowered when you are making decisions about how best to treat YOUR body, soul and spirit.

Healing Strong is not licensed to provide medical advice, nor should it be a substitute for medical advice. This presentation is for educational purposes only, provided by other patients who have a passion to share vital health information. The information presented has not been approved by the FDA, AMA or any Federal or State agency. While you should consult a licensed, qualified medical physician for any issues concerning your health, we encourage you to also be a **well-informed self-advocate**.

In the end, the route you choose to heal is your choice. Heal Strong!



Disclaimer Info



One thing we know to be true.

The world has changed, and there is *no going back*.

How do we live out our faith for our whole being – body, soul and spirit, in light of the problem at hand?

For our family....everything is filtered through one book.

Why a presentation on C0V1D Now?

This presentation is not to offer any medical advice or presented to change anyone's mind that oppose our views.

Simply sharing our story.

Our hope is to offer our “why” we have made our choice during this time of great uncertainty to not vaccinate or give into the pressures around us. I hope to help give any insight into our FAITH, and what we have learned in our own personal experience and research.

(For me, this is not the first-time family and friends believe we are on our own island; however, it is the very first time that they are calling us things like: selfish, ignorant, misinformed, anti-....., etc.)

So...this is presented out of love for our family, our community, and our sincere hope is we can agree to move forward in a spirit of LOVE and not HATE.

“Wisdom is the principal thing; therefore
get wisdom; and with all thy getting get
understanding.” Proverbs 4:7

1. Ask God to help you **KNOW** truth.

2. Take notes today.

3. Consider joining us nightly at aroundthewordin80days.org
(*More on that later.*)

Do the best you can until
you know better.
Then when you know better,
do better.

-Maya Angelou



Know Better then Do Better

*“So for one who
knows the right thing to do
and does not do it, for him it is
sin.”* James 4:17

Outline:

- Summary of Fear Based Decision Making turned Faith
- Understanding the Problem
- Knowing the Main Characters
- Gathering Evidence based on Science
- Evidence based on case reports
- Weigh it against history, the law and God's Word

If we were in a court of law, there would be things admissible to a judge to review and make a decision. Because we are people of faith, our ultimate judge is God.

1

Understand the big problem

2

Know the main players. We don't just accept it as status quo, especially when our health is concerned.

3

Gather evidence-based on science

4

Gather evidence based on eye-witness and testimonies

5

Weigh it against history, the law, God's Word

Examining the Risk/Benefit Analysis

Facing our biggest fear?



When it comes to death, we all fear the unknown:

- What will happen to us when we die? Where will we go?
- Will we be separated or with God forever?

Romans 15:4 For everything that was written in the past was written to teach us, so that through the endurance taught in the Scriptures and the encouragement they provide we might have hope.

Hebrews 11:6 And without faith it is impossible to please God, because anyone who comes to him must believe that he exists and that he rewards those who earnestly seek him.

Why is Faith is important to this discussion?

- To make a decision out of faith and not fear, we have to KNOW faith.
- To know Jesus is to receive the faith OF Jesus that allows us to LIVE.
- Without faith, it is impossible to please God. *Hebrews 11:6*
- Faith comes by hearing and hearing by the Word of God. *Romans 10:17*
- As the body without the spirit is dead, so faith without deeds (works) is dead. *James 2:26*

Here's a walk through our family's personal
decision to **NOT VACCINATE.**

Proverbs 4:23-27

- Be very careful about what you think. Your thoughts run your life. Don't use your mouth to tell lies. Don't ever say things that are not true. Keep your eyes focused on what is right. Keep looking straight ahead to what is good. Be careful what you do. Always do what is right. Do not do anything unless it is right. Stay away from evil. (ICB)

- Another version: "Above all else, guard your heart, for everything you do flows from it." (NIV)



What seems to be driving much of
the FEAR around C0v1d is this....
Conflicting Sources of Info.

Research THIS LAST YEAR took me many places, to many people, countless websites, sleepless nights, and in the end, yielded great anxiety?

What is deception? What is useful or helpful?

Millions will die.

Govt. Corruption is rampant around the world.

Great world reset
Event 201

5G Was the Reason
Behind it All

Govt takeover /
Corruption on both
sides

Hospitals have
shortage of supplies,
beds and medicine.

Schools must
close or choose to
operate online.

Businesses and
churches are closed
or closing. No
singing aloud.

Riots are rampant.
Curfews are in place.
There is great corruption
in the media (on both
sides of the political isle).

UFO's Coming
Cabal
Etc. etc.

Making an informed decision

It's been a LONG journey



**RISK VS. BENEFIT
ANALYSIS**



**SEEK HIS PEACE IN ALL
DECISIONS.**



**STEP INTO OUR DECISION
WITH COMMITMENT AND
FAITH**

Encourage you to make a decision based on truth, but most of all seeking God in His wisdom and gaining understanding. We love because God loved us first. No matter how you feel on this topic, respond in love.

1 Corinthians 13: 1-3

1 If I speak in the tongues of men and of angels, but have not love, I am only a ringing gong or a clanging cymbal. **2** If I have the gift of prophecy and can fathom all mysteries and all knowledge, and if I have absolute faith so as to move mountains, but have not love, I am nothing. **3** If I give all I possess to the poor and exult in the surrender of my body, but have not love, I gain nothing.

If we were in a court of law, there would be things admissible to a judge to review and make a decision. Because we are people of faith, our ultimate judge is God.

1

Understand the big problem

2

Know the main players. We don't just accept it as status quo, especially when our health is concerned.

3

Gather evidence-based on science

4

Gather evidence based on eye-witness and testimonies

5

Weigh it against history, the law, God's Word

Examining the Risk/Benefit Analysis

1 Understand the problem.



What is it? The COVID-19 pandemic, also known as the coronavirus pandemic, is an ongoing pandemic of coronavirus disease 2019 (COVID-19) caused by an acute respiratory syndrome coronavirus 2 (SARS-CoV-2). It was first identified in December 2019 in Wuhan China. It spread all around the world.

Data changes daily.

What's Happening AROUND THE WORLD

*(examples of cases, not % of
total population...that's
MUCH LESS!)*

04/14/21

In the United States, 2% death rate of all positive cases.
(25 million positive tests, 579,000*** deaths)

In South Korea, there are less than 500 deaths. They sent out dosing packs with hydroxychloroquine, zinc and arithromycin for their most vulnerable population.

1% death rate in Sub Saharan Africa

In Israel, death rate is .8% of all cases. (827,7845 cases and 6,315 deaths)

***<https://www.cdc.gov/nchs/data/nvss/coronavirus/Alert-2-New-ICD-code-introduced-for-COVID-19-deaths.pdf>

Highlights of what we have learned around the world that made the most impact in our decision

Death rate is not as high as they predicted. Let's Learn From Others.

Prevention is KEY
– Things You Can Do Now

At Home Treatment Yields Best Outcomes

There are Drugs that Have Shown to be Very Effective to Minimize Symptoms

Artificial Breathing Machines / Ventilator's have High Death Rate

Testing kits and masks are not being used for the reason they were created.

2

Know the main players.

CDC
Bill Gates
World Health Organization
Pharmaceutical Companies
News organizations
Anthony Fauci / NIH /
NIAID

People
blindly
follow the
leaders of
the pack.
Who Are
they?

Find those
who
investigate
truths
without
fear.



Source:

<https://podcasts.apple.com/us/podcast/breaking-faucis-niaid-could-make-millions-off-vaccine/id1227863378?i=1000474912882>

2 Know the main players.



Source: <https://childrenshealthdefense.org/>



Source: <https://www.bitchute.com/video/EBwER0ki1ZNr/>



Interesting schematic with funding sources directly tied to main players.

<https://revisesociology.com/2021/02/12/critcisms-covid-vaccine/>

Editorial

CDC: Bias and Disturbing Conflicts of Interest

Lawrence R. Huntoon, M.D., Ph.D.

Founded in 1946 by Dr. Joseph Mountin as the Communicable Disease Center, CDC's primary mission was to stop the national spread of malaria.¹ The main tools then available to combat malaria were trucks with sprayers and shovels.¹ Over the years, the name changed a number of times to reflect a change in focus to Typhus Fever Control and other communicable diseases.² It was renamed the Centers for Disease Control in 1980 and in 1992 was redesignated as the Centers for Disease Control and Prevention (CDC).²

According to the CDC website, "Today, CDC is one of the major operating components of the Department of Health and Human Services and is recognized as the nation's premiere health promotion, prevention and preparedness agency."¹

CDC Foundation, a Public-Private Partnership

In 1983, the CDC became authorized to accept "gifts" from industry and other private parties.³ In 1992, Congress created the non-profit CDC Foundation (a 501(c)(3) organization), which greatly expanded the CDC's ability to accept private funding. It began operations in 1995.³ As donations to the CDC Foundation started pouring in, the door to conflicts of interest and corruption was opened wide. The CDC Foundation awards grants, forms "collaborative alliances" between the CDC and single private-sector organizations, and engages in "research collaborations" with industry and other entities.⁴ A 16 percent administrative fee is built into each grant or other agreement.⁴

Ineffective, Non-Uniform Ethics and Disclosure Requirements

Ethics and disclosure requirements vary widely depending on how the government classifies the worker or participant. The CDC has a number of Federal Advisory Committees (FACs). Some members are classified as special government employees (SGEs), some as initial review groups (IRGs), and some are fulltime federal employees. Here is how the CDC describes the differing requirements for each type of employee/participant:

Most members of federal advisory committees are appointed as special government employees (SGEs) and serve as federal employees for up to 130 days in any given year. SGEs, like all Executive Branch employees, are subject to the Standards of Ethical Conduct issued under the Ethics Reform Act of 1989....

confidential financial disclosure, to ensure their personal financial interests and outside activities do not conflict with their official duties.⁵

The CDC employs a Committee Management Officer to oversee ethics-related issues for CDC advisory committee members, "including the rigorous review and conflict of interest analysis process for advisory committee members' financial disclosure reports."⁵

The CDC's doublespeak policy on "prohibited sources" (of donors) acts in favor of the CDC accepting donations even when the source is classified as "prohibited" by its own definition. According to the CDC Foundation website:

CDC must evaluate when a gift offered by a private entity, e.g., company, foundation, enterprise, etc., may create conflict of interest or may be from a prohibited source. A prohibited source is any individual or entity that is seeking official action by CDC; does business or seeks to do business with CDC; conducts activities regulated by CDC; has interests that may be substantially affected by performance or nonperformance of an employee's official duties; benefits from work performed by CDC, such that they can use it to promote their business; or is an organization where a majority of its members are described in Section VI. I. 2 (C.F.R. Section 2635.203(d)). The fact that a potential donor is a prohibited source does not necessarily mean that a proposed gift may not be accepted; only that it must be carefully evaluated for possible conflicts of interest.⁴

Conditional Funding Invites Conflicts of Interest

The CDC accepts millions of dollars in "conditional funding" from entities, including pharmaceutical corporations. Conditional donations are donations that are specifically earmarked for specific projects.³

In 2012, for example,

Genentech earmarked \$600,000 in donations to the CDC Foundation for CDC's efforts to promote expanded testing and treatment of viral hepatitis. Genentech and its parent company, Roche, manufacture test kits and treatments for hepatitis C.... The CDC issued guidelines in August 2012 recommending expanded (cohort) screening of everyone born from 1945 to 1965 for hepatitis C virus.... Industry has donated [more than \$26 million] to the coalition [CDC's Viral Hepatitis

Download CDC – Source:
<https://jpands.org/vol25no3/huntoon.pdf>

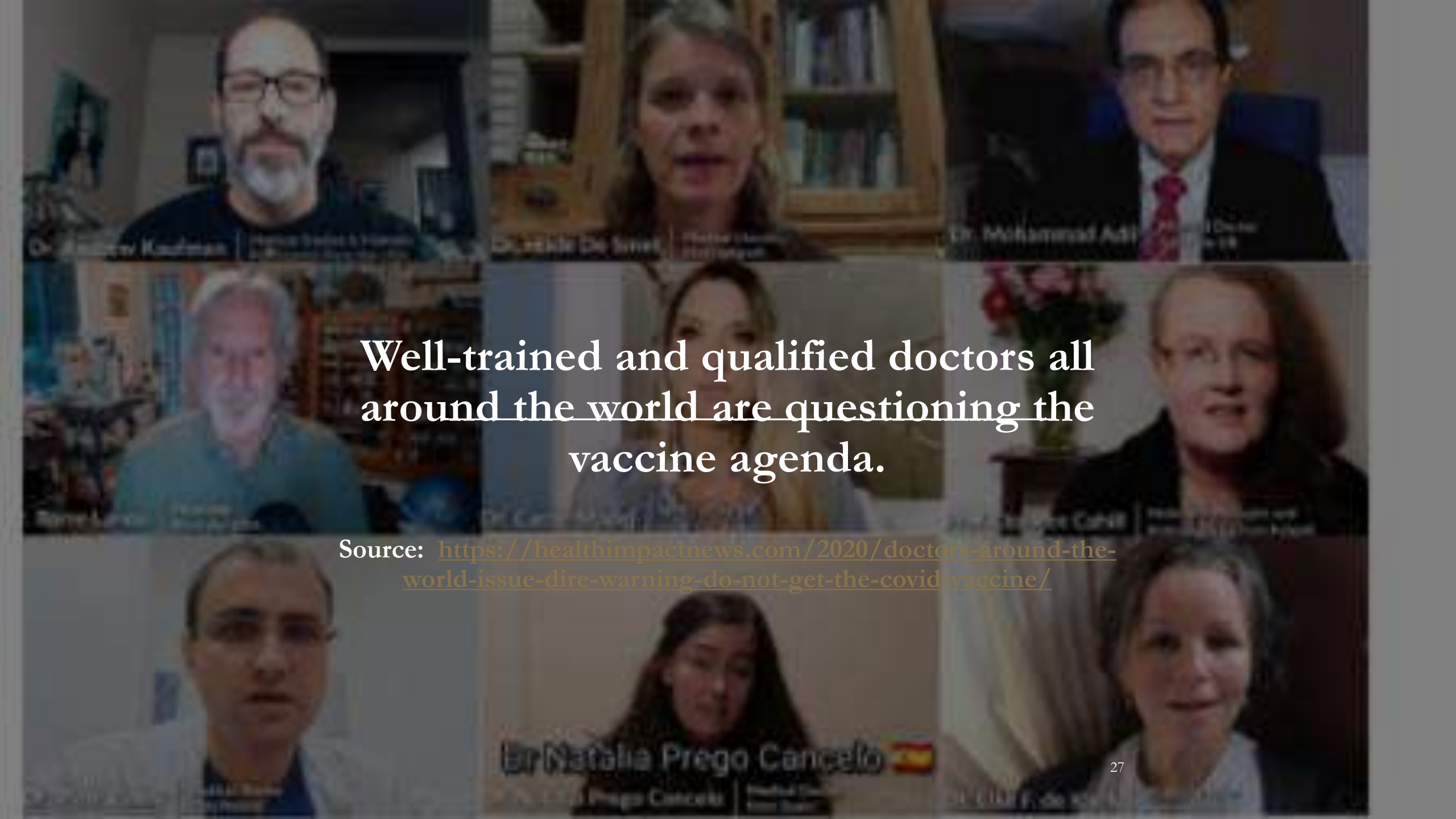
3

Gather evidence-based on science.



Who are our sources of information?

Why is it important you question --
main-stream “experts”, “celebrities”, and
“committees”?



Well-trained and qualified doctors all
around the world are questioning the
vaccine agenda.

Source: <https://healthimpactnews.com/2020/doctors-around-the-world-issue-dire-warning-do-not-get-the-covid-vaccine/>



TALK ABOUT COVID-19, MRNA BIOWEAPON, IVERMECTIN, & THE IMPORTANCE OF VITAMIN D - DR. RYAN COLE

WATCH



537542 971 12

First published at 15:32 UTC on March 28th, 2021.



PLAYING NEXT



Dr. Cole is expert in immunology and medical doctor who has treated 100,000 patients this year.

Source: <https://www.bitchute.com/video/InH89amCpy7S/>

**Founder,
Sherri Tenpenny, DO,
AOBNMM, ABIHM**

Dr. Sherri J. Tenpenny opened her integrative medical practice in Strongsville, Ohio in 1996 to provide the best of integrative medicine in Cleveland, Ohio. The original name, OsteoMed II, was changed to Tenpenny Integrative Medical Center in 2008 when the clinic was moved to Middleburg Heights.



Shot In The Dark - Dr Sherry Tenpenny

Jimmy1106

Published on Mar 11, 2021

Dr. Sherri Tenpenny reveals how the new COVID-19 vaccines work and what you're not being told.

This clip was taken from "Ministry Now" with Dr. Sherri Tenpenny. You can see the whole episode here: <https://www.daystar.tv/ministry-now/s>

1 month, 3 weeks ago

Source: <https://www.bitchute.com/video/5hltCZa8lDqr/>



Source:

<https://www.bitchute.com/video/Dxjp6nkwhWn8/?fbclid=IwAR0RVH5kjj-WIETkVLYEeDM4UR4HTL4xH658C6ESNxxkSlzOAtrhiW4L312g>

Source:

<https://tv.gab.com/channel/constitution1a/view/dr-lee-merritt-w-alex-newman-6019a0441119f8e09c4a5232>

Another great one to watch of Dr. Merritt

Source:

https://www.youtube.com/watch?time_continue=96&v=euRwlrWV-0o&feature=emb_logo



Source: [https://www.amjmed.com/article/S0002-9343\(20\)30673-2/fulltext](https://www.amjmed.com/article/S0002-9343(20)30673-2/fulltext)

- Dr. Peter McCullough is a consultant cardiologist and Vice Chief of Medicine at Baylor University Medical Center in Dallas, TX. He is a Principal Faculty in internal medicine for the Texas A & M University Health Sciences Center.
- Dr. McCullough is an internationally recognized authority on the role of chronic kidney disease as a cardiovascular risk state with over 1000 publications and over 500 citations in the National Library of Medicine.
- He is the most published scientist in the history of his field.
- When the COVID crisis hit, Dr. McCullough began studying the medical literature to find treatments, and began to treat his patients with current drugs “off label,” because his patients who were testing positive for COVID were sent home from the hospitals and told to wait two weeks, with no treatment options.
- Dr. McCullough was then the lead author in a study published in the American Journal of Medicine that summarized existing drugs already approved and in the market that had success in treating COVID-19 patients.
- At that time, according to Dr. McCullough, there were over 50,000 papers on COVID in the peer-reviewed literature, and none of them dealt with how doctors are supposed to treat COVID.
- After publication, it became the most cited study dealing with COVID, and people were contacting Dr. McCullough from all over the world seeking help in treating COVID patients.
- He took a few slides from his presentation and decided to publish a YouTube video on it, to help spread the word that there were effective treatments for COVID.
- It soon went viral, as could be expected when one of the most respected doctors in the world was presenting effective treatments of COVID, and within about a week YouTube took it down, stating that it violated the terms of their community.
- Senator Johnson from Wisconsin then got involved, and arranged for Dr. McCullough and others to give expert testimony in Senate hearings in November of 2020, explaining that people did not have to die from COVID because effective treatments existed.
- This life-saving information was being censored in the corporate media, and was being removed by Big Tech in social media.



"Nobody Needs to Die" – Frontline Doctors Storm D.C. Claiming "Thousands of Doctors" are Being Silenced on Facts and Treatments for COVID

Available on [Bitchute](#) and [Rumble](#).



Source:

<https://www.breitbart.com/tech/2020/07/27/facebook-censors-viral-video-of-doctors-capitol-hill-coronavirus-press-conference/>

Go to: [AFLDS.com](https://afllds.com) for more great videos and information.

Former Pfizer Vice President Dr. Yeadon: COVID Variants NOT More Dangerous – Booster Shots Not Needed but Could be Used for Mass Murder

Source:

<https://healthimpactnews.com/2021/former-pfizer-vice-president-dr-yeadon-covid-variants-not-more-dangerous-booster-shots-not-needed-but-could-be-used-for-mass-murder/>

557 24 27 30 2 1K
Facebook Share YouTube Share Twitter Share Email LinkedIn Total Views : 28,57



Comments by Brian Shihavy
Editor, Health Impact News

Like a fireman tasked with helping to get as many people as possible out of a burning building that is about to collapse, Dr. Michael Yeadon, Pfizer's former Vice President and Chief Scientist for Allergy and Respiratory, has been granting interviews to as many people in the Alternative Media as possible in recent days to sound the alarm on the evil intentions behind the new COVID-19 experimental injections that have now preceded thousands of deaths and hundreds of thousands of injuries worldwide.

He was interviewed today by Independent Journalist Taylor Hudak and published by The Last American Vagabond.

Dr. Yeadon repeats some things in this interview that he has been saying for months now, including the fact that for people under the age of 70, the risk of getting sick from COVID-19 is less of a risk factor than getting sick from the annual flu virus.

The variants are what some people call "scary-ants", that they're being used as a psychological operation, and I think there is something in that.

I sarcastically call them the "staymiants" – because they're really the same. All of the variants are so similar to the original, there's no chance what-so-ever that you're body will see them as anything new.

So with that as a back drop, isn't it scary that politicians keep telling us about variants, and how we need to close borders and stop them moving around the world. And don't worry, because we are going to make modified vaccines that will address these new variants.

And some of the pharmaceutical companies are actually now developing "top-up," or variant vaccines.

But if Mike Yeadon is correct, and I am confident that I am, this is my strength, immunology, and what I have just told you is absolutely true.

They (variants) are so similar to the original, it is not just implausible, it is impossible, we would need new vaccines.

And yet we are being told they're necessary, we're being told they are manufacturing them.

I am quite furious because I have this open question. What is in these bottles of "variant vaccines"?

The world's regulators have said they are so similar to the vaccines that are already being used, but they are forgetting to tell us that they are only emergency use authorized anyway.

But the regulators have said "we don't need any clinical safety testing done on these variants."

So if you combine my talk about vaccine passports, and how you'll be compelled to or not to, whatever the operatives tell you, if you combine that with an opportunity to be told "go and get your variant vaccine," and the pharmaceutical industry can go and make whatever the hell they want, put it in a vial, and you'll go along and be injected with it.

My significant fear is, if somebody wanted to arrange a situation where mass depopulation could be accomplished, this would probably be a perfect way of doing it.

What About the



Based on data, do we need an emergency vaccine?

Is this a true vaccine?

Is it FDA Approved?

How long from lab to market?

Do we know long term side effects?

Who is held responsible for adverse effects or deaths?

T raditional V accine vs. mR N A V accine

- Conventional vaccines contain viral proteins or disabled forms of the virus itself, which can stimulate the body's immune defenses against infection. **Traditional vaccine stops transmission.**
- **The mRNA technology is different.** When you are administered an RNA vaccine, this RNA (non-genetic material) will enter a small portion of your cells, and these cells will start churning out a replica of the viral Spike protein. It's important to realize that **your cells are not producing the entire virus, just a portion of the virus**— the Spike protein. Therefore, in theory... **any coronavirus type infection will create an immune response.** *In past mRNA vaccines, the immune response to the live virus created an extreme respiratory response that resulted in disability and even death.*
- Never has an mRNA vaccine been allowed to be released to the general public before because the **RISK outweighed the benefit.** **No mRNA vaccine has ever been licensed for human use before.** We have little to no understanding if long-term effective or safe.

By using mRNA as a drug, Moderna takes advantage of this normal biological process to express proteins and create a desired therapeutic effect. **mRNA is the software of life – so the very essence of our medicines is digital.** For each mRNA medicine, we are encoding for one or more mRNA molecules, which we then deliver to cells.

The software-like, digital nature of mRNA is the distinctive and foundational characteristic upon which we have fashioned our platform, business strategy, preclinical and clinical manufacturing efforts, and propelled our need for digitization.

For Moderna, digital is not a 'nice to have' but a 'must have.'

the Moderna website indicates as
"Our Operating System".



"Once inside the nucleus, DNA vaccines have a risk of permanently changing a person's DNA." – Moderna White Paper

Bombshell: Moderna Chief Medical Officer Admits MRNA Alters DNA

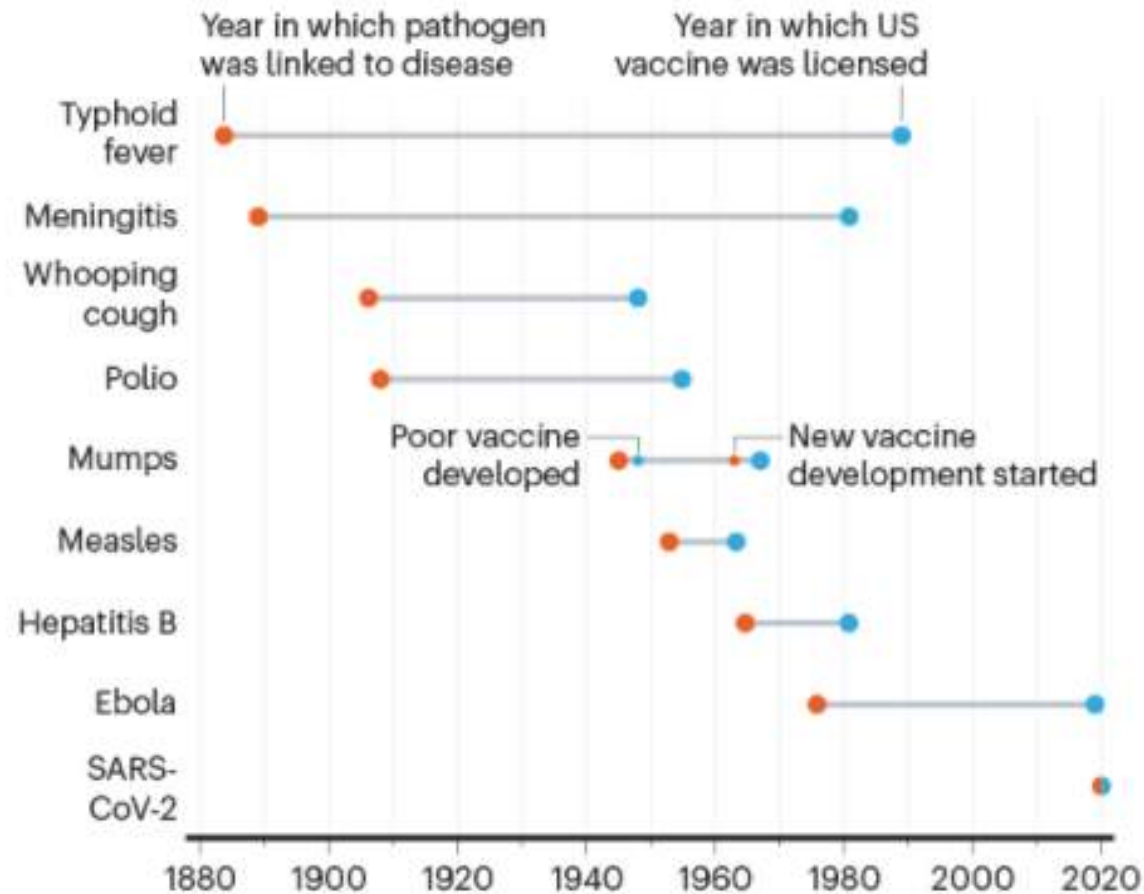
Suzanne Hamner - April 5, 2021 5 minutes read



https://dcdirtylaundry.com/bombshell-moderna-chief-medical-officer-admits-mrna-alters-dna/?fbclid=IwAR1tLs_DxvF_0vdTg4IYyE4eBLSrospa_ORnNZh3LfBwSkRUJM3MbDgyDPo

VACCINE INNOVATION

Most vaccines take years to develop, but scientists created multiple vaccines for SARS-CoV-2 within a year.



Vaccine development timeline

No animal studies have been done on this SARS CoV-2 vaccine series.

For CoV-2 Vaccine:
First humans receiving the vaccines are the “guinea pigs.”

Source: <https://www.nature.com/articles/d41586-020-03626-1>

How Effective Are The Covid-19 Vaccines?

Estimated effectiveness at Covid-19 prevention based on interim data from late-stage clinical trials*



NIAID, which operates under the National Institutes of Health (NIH) and is directed by Dr. Anthony Fauci, is a joint patent holder with Moderna on its COVID vaccine. Through royalties, Fauci's agency and employees stand to profit immensely.

Source:

<https://childrenshealthdefense.org/defender/new-york-times-explains-lack-covid-treatments/>



<https://childrenshealthdefense.org/defender/gates-vaccines-phenomenal-profit-makers/>

According to Gates, “vaccines are phenomenal profit makers, with more than a 20-to-1 return”³⁶

Power to produce an effect. What effect did they study? FIND OUT!



* Some trials are ongoing and findings have not been peer-reviewed. Efficacy may differ with new Covid-19 variants.

** ChAdOx1 nCoV-2019 efficacy climbs to 90% with a second dose. JNJ's U.S. efficacy was 72%. Coronavac data based on Brazil trials.

Sources: Respective companies, The Lancet, Butantan Institute



statista

Vaccine Expert and Insider: “Mass Vaccinations will be catastrophic.”



As a dedicated virologist and vaccine expert I only make an exception when health authorities allow vaccines to be administered in ways that threaten public health, most certainly when scientific evidence is being ignored. The present extremely critical situation forces me to spread this emergency call. As the unprecedented extent of human intervention in the Covid-19-pandemic is now at risk of resulting in a global catastrophe without equal, this call cannot sound loudly and strongly enough.

More than time to replace the word ‘vaccine’

- Term ‘vaccine’ to be banned from the medical vocabulary
- Proposal to replace it by:
‘CONDITIONAL immune protection-inducing formulation (**CIPIF**)

Why?

Because the efficiency of conventional vaccines (i.e., mimicking immunity elicited by natural infection) can only work provided certain conditions are fulfilled!

- No vaccination with live vectors during incubation time (cfr. Ebola)
- No mass vaccination in the heat of a pandemic!

<https://m.youtube.com/watch?v=K8lrXTyDEfM>



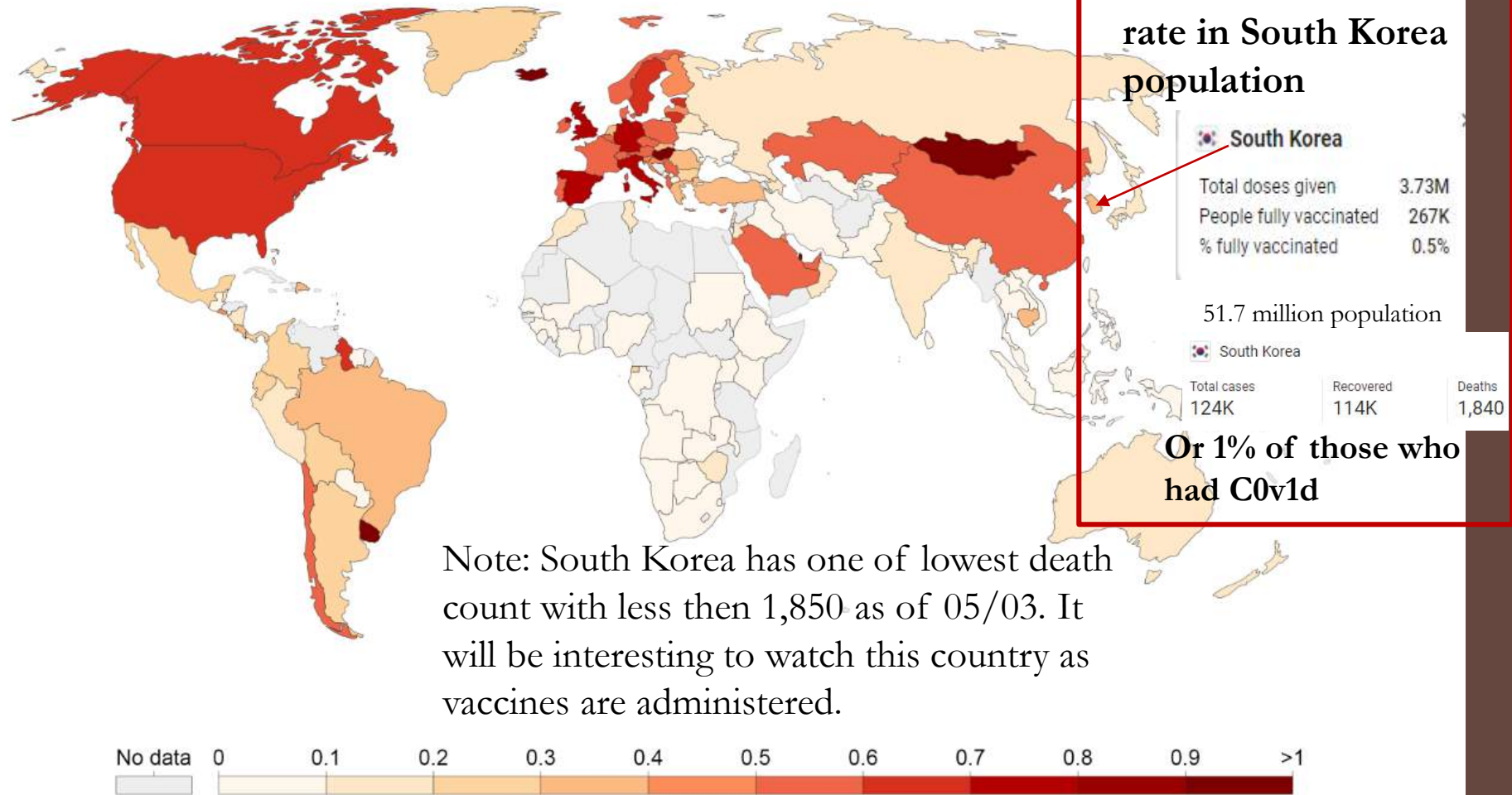
F irst F ew M onths R eported O utcomes:

- VAERS data in U.S. (approximately 10% of all adverse effects are reported to VAERS). Data released this last month showed 44,606 reports of adverse events following COVID vaccines, including 2,050 deaths and 7,095 serious injuries between Dec. 14, 2020 and March 19, 2021.
- Tens of Thousands of reports through VAERS (US Vaccine Damage Site), Social Media and Case Studies of:
 - Neurological Damage
 - Miscarriage/ Breast fed babies
 - Blindness
 - Mental Instability
 - Auto-immune diseases
 - Death
- Risk Assessment

Daily COVID-19 vaccine doses administered per 100 people, May 3, 2021

Our World
in Data

Shown is the rolling 7-day average per 100 people in the total population. This is counted as a single dose, and may not equal the total number of people vaccinated, depending on the specific dose regime (e.g. people receive multiple doses).



Note: South Korea has one of lowest death count with less then 1,850 as of 05/03. It will be interesting to watch this country as vaccines are administered.

Daily New Cases in India

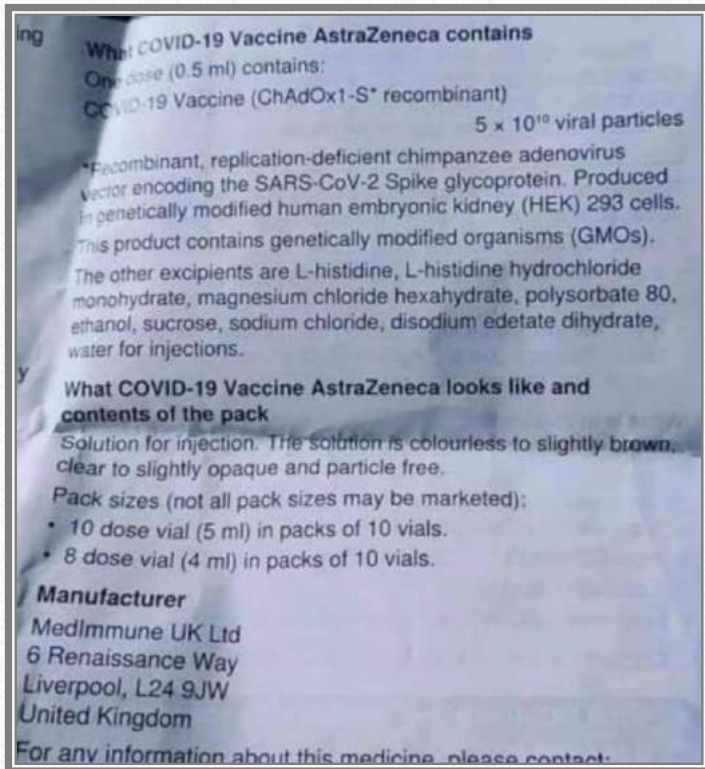


Source: <https://www.bitchute.com/video/EBwER0ki1ZNr/>

Vaccine Ingredients – Aborted Fetal Cell Line of Live Aborted Fetuses



Many of the manufacturers have used aborted fetal tissue cells as part of the production process.



Commonly Used Fetal Cell Lines

There are several cell lines commonly used in vaccine development that originate from aborted fetuses, including:⁶

- HEK293^{7,8,9,10,11} – human embryonic cell line originally derived from kidney tissue obtained from a female fetus aborted in the Netherlands in 1972
- MRC5¹² – human embryonic cell line originally derived from the lung tissue of a 14-week-old male fetus aborted in 1966
- PER.C6¹³ – human embryonic cell line originally derived from the retina of an 18-week-old male fetus aborted in the Netherlands in 1985
- WI38¹⁴ – human embryonic cell line originally derived from the lung tissue of a 12-week-old female fetus aborted in 1961

Vaccine makers using at least one of these fetal cell lines in the development of their COVID-19 vaccines include:^{15,16,17}

AstraZeneca (HEK293)	Jansen Research and Development (owned by Johnson & Johnson), (PER.C6)
CanSino Biologics (HEK293)	University of Pittsburgh (HEK293)
ImmunityBio (HEK293)	Altimmune (PER.C6)

***This accounts for DEATHS REPORTED FROM BILLIONS OF ALL VACCINES ADMINISTERED

***This accounts for DEATHS REPORTED FROM MILLIONS OF THE COVID VACCINE ADMINISTERED

15.5 Year Period 6/04 - 12/20

519,919 Vaccine Injuries with 3,566 Deaths

Event Outcome	Count	Percent
Death	3,566	0.69%
Permanent Disability	10,743	2.07%
Office Visit	36,153	6.95%
Emergency Room	115,277	22.17%
Emergency Doctor/Room	12,929	2.49%
Hospitalized	47,437	9.12%
Hospitalized, Prolonged	1,603	0.31%
Recovered	221,781	42.66%
Birth Defect	88	0.02%
Life Threatening	8,538	1.64%
Not Serious	185,655	35.71%

.006
Deaths
in 15.5
years

Source: CDC

4 Month Period 2020-2021

118,902 COVID Shot Injuries with 3,848 Deaths

Event Outcome	Count	Percent
Death	3,848	2.98%
Permanent Disability	1,595	1.34%
Office Visit	19,213	16.16%
Emergency Room	33	0.03%
Emergency Doctor/Room	16,521	13.89%
Hospitalized	8,149	6.85%
Hospitalized, Prolonged	16	0.01%
Recovered	45,575	38.33%
Birth Defect	88	0.07%
Life Threatening	2,438	2.05%
Not Serious	45,375	38.16%

.03
Deaths
in 4
months

Source: CDC

NVIC Vaers Data mined by <https://healthimpactnews.com/about-health-impact-news/>

IMPORTANT NOTE: This doesn't even account for the number of vaccines. In 4 months, we have a 3 x higher death count for 1 vaccine that equals to the deaths reported of total vaccines that are given over a 15.5 year period. *Think about that!*

August 17, 2015

Neonatal Thrombocytopenia Associated with Breast Milk

David Green, MD, PhD, reviewing Hauschner H et al. *Blood* 2015 Jul 30

Persistence of thrombocytopenia in newborns of mothers with active immune thrombocytopenia might be an indication to discontinue breastfeeding.

Immune-mediated thrombocytopenia in newborns can result from the placental transfer of autoantibodies, generally of the immunoglobulin-G type, from mothers with primary immune thrombocytopenia (ITP). The condition usually persists in infants for less than 2 months.

To determine why some neonates have persistent thrombocytopenia, investigators examined the breast milk from seven women with ITP for the presence of antibodies directed against platelet antigens; these women were thrombocytopenic at the time of delivery. The researchers also studied the breast milk from nine healthy controls and from six women with ITP who were in remission and had normal platelet counts on the day of delivery.

Milk samples from four of the seven women with active ITP were positive for IgA antibodies that were directed against platelet glycoprotein $\alpha\text{IIb}\beta_3$. In addition, the frequency of positive results for IgA antibodies was significantly higher in women with active disease than in healthy controls ($P < 0.01$) or those with ITP in remission ($P < 0.05$). The platelet count of an infant who had been thrombocytopenic for 3 months recovered within a month of discontinuing breast-feeding of milk with a high level of antiplatelet antibodies.

COMMENT

The transplacental passage of maternal antibodies has long been recognized as a cause of neonatal disease, but breast milk has usually been considered safe. This study shows that IgA antibodies specific for platelet glycoproteins can be found in breast milk, but concluding that these antibodies are the cause of neonatal thrombocytopenia would require demonstrating their presence in the blood of newborns. The authors suggest that persistence of thrombocytopenia in the offspring of mothers with ITP might be an indication to discontinue breastfeeding.



7,766 DEAD
330,218 Injuries:
European
Database of
Adverse Drug
Reactions for
COVID-19
"Vaccines"



6000% Increase Deaths After Vaccines

The United States of America

Source: CDC



36 deaths

1/1/20 - 3/31/20

2,213 deaths

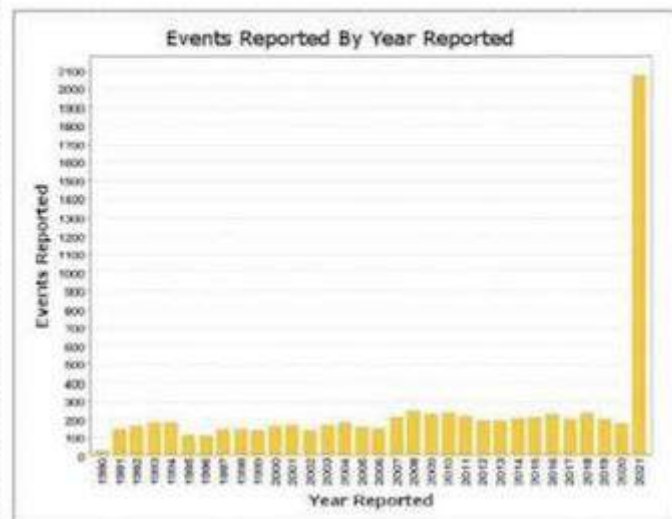
1/1/21 - 3/31/21

**Vaccine-related
deaths reported to
VAERS by year.
2021 is the last
column/bar.**

ie Vaccine Adverse Event Reporting System (VAERS) Charts

report About

Printed Page



Number of COVID Vaccine Injuries Reported to VAERS Surpasses 50,000, CDC Data Show

VAERS data released today showed 50,861 reports of adverse events following COVID vaccines, including 2,249 deaths and 7,726 serious injuries between Dec. 14, 2020 and March 26, 2021.

4

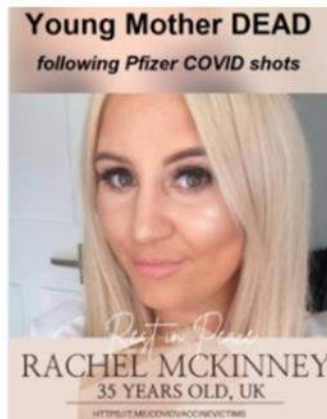
Gather evidence-based on testimonials.

For an extensive list of people, their stories, faces, details of injury and deaths, VaccineImpact.com keeps a very extensive collection of data and stories.

59-Year-Old Israeli Fashion Icon Alber Elbaz DEAD After Being "Fully Vaccinated" for COVID-19



35-Year-Old Nurse and Mother of 2 DEAD Following Pfizer Experimental COVID Injections in UK



Boxing Champion Marvin Hagler DEAD at Age 66 After Receiving a Experimental COVID "Vaccine"



Midwin Charles: 47-Year-Old MSNBC Legal Analyst DEAD After Experimental mRNA COVID Shot



Old Israeli Girl DEAD Following Experimental Pfizer mRNA Injection

https://vaccineimpact.com/2021/another-jewish-holocaust-local-talk-radio-reports-many-dying-in-israel-following-pfizer-experimental-mrna-injections/?fbclid=IwAR3jM-CNf6YuN19QuncUehcYp2JgVHBBVww_QAymD0r9HsCRSu_tPuT6O6s

Reporter Dave Jordan (@DJNYC1), a friend of Larry King's son, Larry King Jr., tweeted on January 15, 2021:

I just wrapped an interview with my friend Larry King Jr. He tells me his dad @kingsthings is expected to fully recover from #Covid19 & will receive the vaccine before he is released from the hospital.



Dave Jordan then published an interview with Larry King Jr. on [Spectrum News](#) on January 20, 2021, where he reported:



Larry King Jr. with his father Larry King Sr. [Image source](#).

Trigger Warning:

Next Slide is Graphic, so please turn away if you need to. These are personal reports of side-effects of post vaccination reactions and many of them led to death.

Eye Witness Testimonials

Featured
**Shocking Photos: Man's Skin Peels Off
Extreme Adverse Reaction To COVID V**
By Sarah K. Williams
March 2021, 15 min read

I had my first Pfizer vaccine on 24/2/21. For 14 days after I was absolutely fine. However, on day 15 I became covered in a horrendous itchy rash. I was hospitalised, had skin biopsies taken and given various IV medications. I am still very fatigued, sleeping on and off all day, night sweats, pain everywhere and feel very unwell. I will not be having my 2nd Pfizer in May. 🙄😓



Thus far, mainstream media reporting has focused and railed against the following statement made by Leila Centner, co-founder and CEO of Centner Academy, to her employees (in an internal email later leaked to the press) as being the most controversial and contestable:

"Tens of thousands of women all over the world have recently been reporting adverse reproductive issues simply from being in close proximity with those who have received any one of the COVID-19 injections, e.g., irregular menses, bleeding, miscarriages, post-

Nursing home deaths 2021



It has been brought to our attention that there has been a sudden and dramatic rise in deaths of nursing home residents since approximately mid January. Having looked at the data further we believe this

It has been brought to our attention that there has been a sudden and dramatic rise in deaths of nursing home residents since approximately mid January. Having looked at the data further we believe this needs to be investigated by the relevant authorities urgently.

On Tuesday 9th March 2021 we notified this situation by email and registered letter to the Taoiseach, Minister for Health, HSE, HIQA and HPRA.

As we did not receive an appropriate response we sent the following letter to all of the TDs and senators on Thursday 11th March: <https://healthfreedomireland.com/letter-sent-to-government-re-dramatic-rise-in-excess-nursing-home-deaths/>

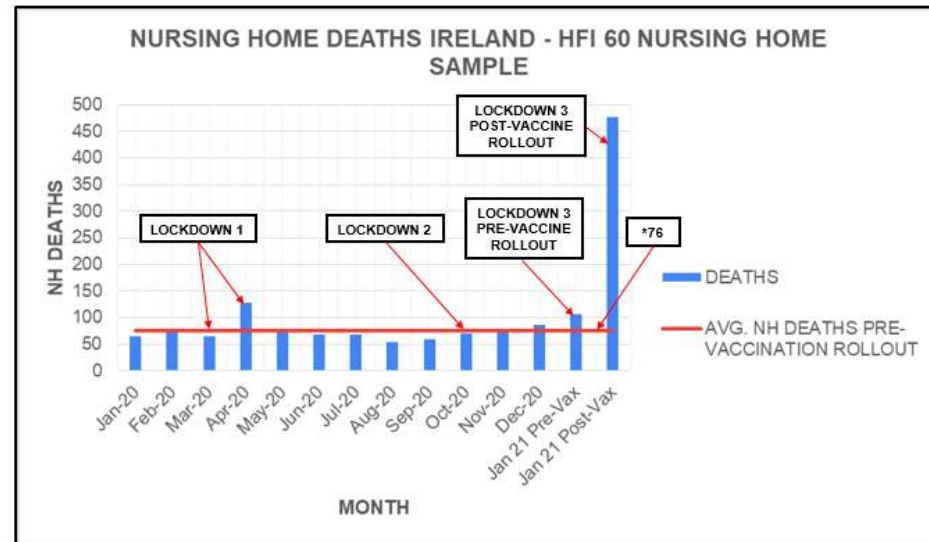
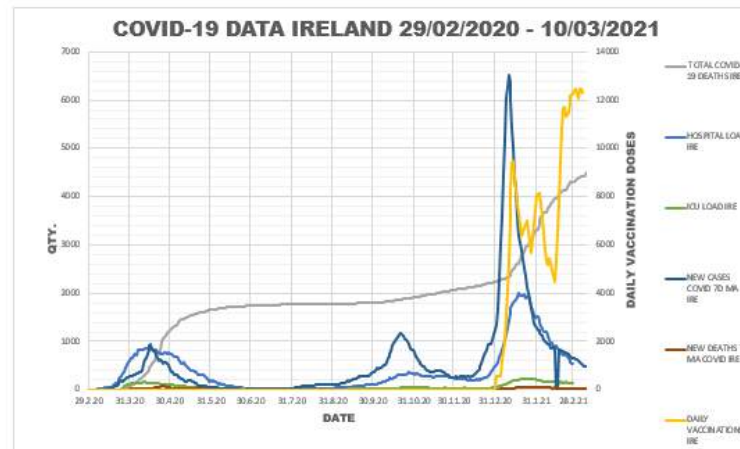


Figure 1: Deaths in HFI nursing homes study January 2020 – January 2021





Vaccine Rollout Coincides With Outbreak

Whether or not the vaccine is helpful or harmful in people who either had COVID-19 before, or are currently positive for SARS-CoV-2 or ill with COVID-19 symptoms, is an important question now that these vaccines are being rolled out.

Case in point: In Auburn, New York, a COVID-19 outbreak began December 21, 2020, in a Cayuga County nursing home.^{23,24} Before this outbreak, no one in the nursing home had died from COVID-19.



the nursing home had died from COVID-19.

The next day, December 22, they started vaccinating residents and staff. The first death was reported December 29, 2020. Between December 22, 2020, and January 9, 2021, 193 residents (80%) received the vaccine, as did 113 staff members.

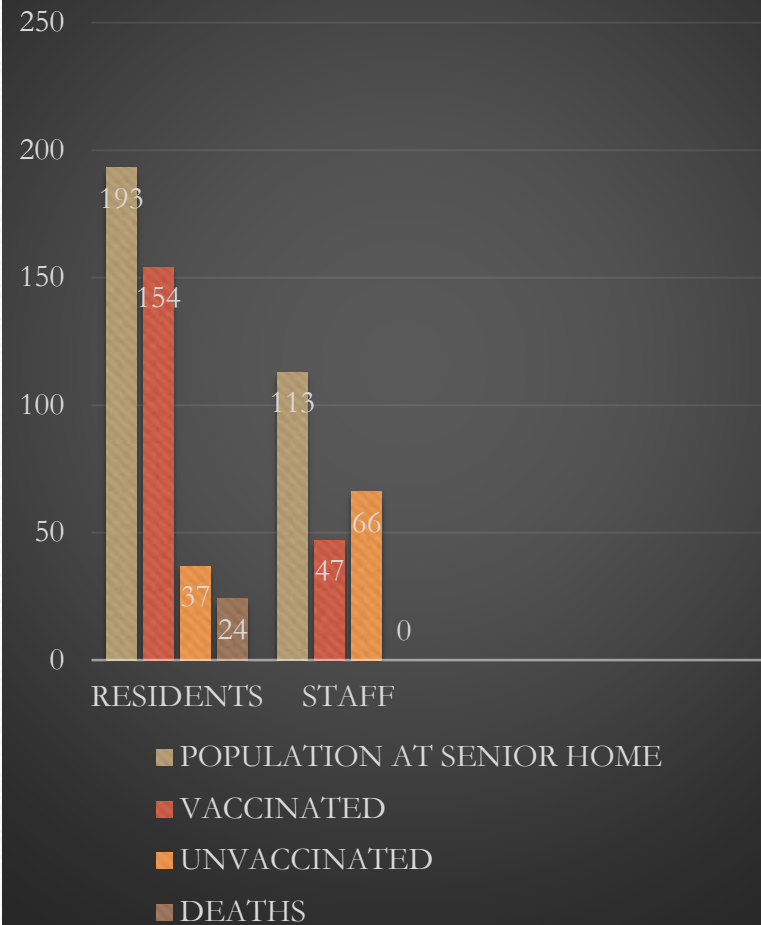
As of January 9, 2021, 137 residents had been infected and 24 had died. Forty-seven staff members had also tested positive for SARS-CoV-2 and one was on life-support. Considering we're seeing cases in which healthy young and middle-aged individuals die within days of receiving the vaccine, it's not



receiving the vaccine, it's not inconceivable that the vaccine might have something to do with this dramatic rise in deaths among the elderly. In fact, I'd expect it.

You can rest assured that the public health authorities and media will never report on these observations. Anything that conflicts with vaccine safety and effectiveness will be intentionally and universally buried. This is precisely their modus operandi of the past three decades. If anything, the suppression of the facts will only be amplified.

Case Study: Senior Home in Auburn NY

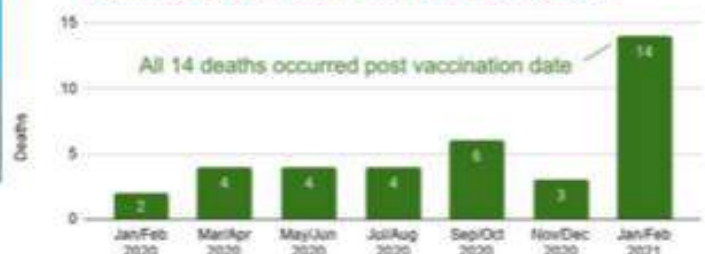




Fact checkers now are trying to explain this away. This is a very important observation to draw your own conclusions.

Millbrae Lodge Nursing Home Deaths

Scheduled Vaccination Date 18th January 2021

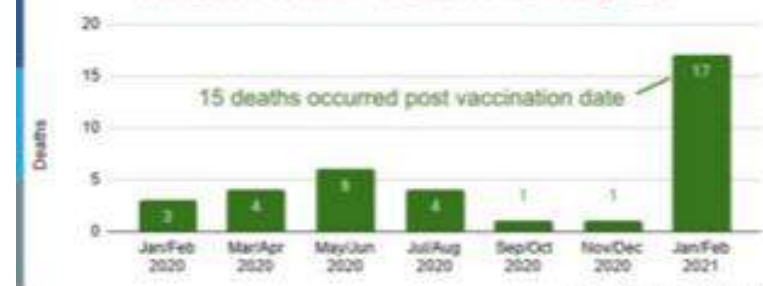


Data source: RIP.ie
RIP.ie is not an official source of mortality statistics

HEALTHFREEDOMIRELAND.COM
@healthfreedomie
info@healthfreedomireland.com

Blackrock Abbey Nursing Home Deaths

Scheduled Vaccination Date 19th January 2021



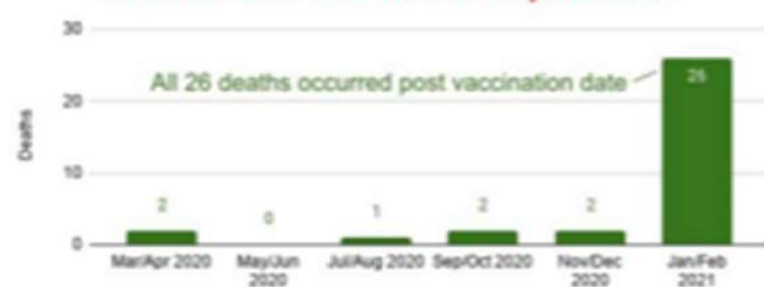
Data source: RIP.ie
RIP.ie is not an official source of mortality statistics

HEALTHFREEDOMIRELAND.COM
@healthfreedomie
info@healthfreedomireland.com

Javan

Carehoice Ballynoe Nursing Home Deaths

Scheduled Vaccination Date January 22nd 2021

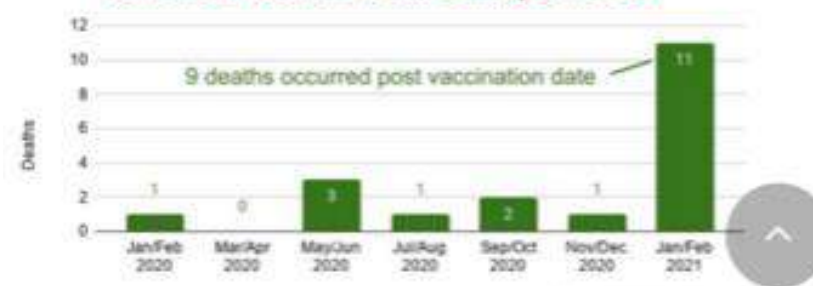


Data source: RIP.ie

HEALTHFREEDOMIRELAND.COM
@healthfreedomie

Beaufort House Nursing Home Deaths

Scheduled Vaccination Date January 24th 2021



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@healthfreedomie

Coronavirus South Korea

On the impact of a new strain of coronavirus on South Korea. The virus, which was first reported in Wuhan in China, has killed hundreds of people and many in Korea. Many of the initial cases were linked to a branch of the Shincheonji church in the eastern city of Daegu.



PROPAGANDA AT
IT's FINEST

Why?

To shape public opinion.



UK GOVERNMENT INTRODUCING NEW RULES - HILARIOUS!

WATCH



A video to keep
your humor. 😊

<https://www.bitchute.com/video/LaghQCKLv5Sv/>

Is Propaganda New? How about setup Riots?

•The most infamous riot in the Bible occurred during Jesus' trial before Pilate. The governor had found no fault in Him (**Luke 23:4; John 19:4**). However, the chief scribes and religious leaders were determined to kill Jesus, so they stirred up the crowd (**Matthew 27:20; Mark 15:11**). Here we have a clue as to the nature of most riots.

•**Acts 17:5** The Jews, however, became jealous. So they brought in some troublemakers from the marketplace, formed a mob, and sent the city into an uproar. They raided Jason's house in search of Paul and Silas, hoping to bring them out to the people.

The Riot in Ephesus (Acts 19: 23-27)

²³ About that time there arose a great disturbance about the Way. ²⁴ A silversmith named Demetrius, who made silver shrines of Artemis, brought in a lot of business for the craftsmen there. ²⁵ He called them together, along with the workers in related trades, and said: "You know, my friends, that we receive a good income from this business. ²⁶ And you see and hear how this fellow Paul has convinced and led astray large numbers of people here in Ephesus and in practically the whole province of Asia. He says that gods made by human hands are no gods at all. ²⁷ There is danger not only that our trade will lose its good name, but also that the temple of the great goddess Artemis will be discredited; and the goddess herself, who is worshiped throughout the province of Asia and the world, will be robbed of her divine majesty."

Matthew 24:12
And because lawlessness will be increased, the love of many will grow cold.



DRIVING
DATA

Positive PCR Tests



<https://articles.mercola.com/sites/articles/archive/2021/01/13/coronavirus-pcr-testing.aspx> -- Mercola

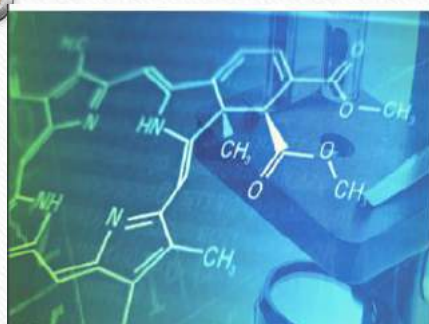
<https://www.bitchute.com/video/fdC0EcxdYBwG/> -- Sherri Tenpenny

<https://www.drnorthrup.com/when-should-you-use-home-medical-testing-kits/>

The video explains how the PCR test works and how we are interpreting results incorrectly. In summary, the PCR swab collects RNA from your nasal cavity. This RNA is then reverse transcribed into DNA. Due to its tiny size, it must be amplified to become discernible. Each round of amplification is called a cycle, and the number of amplification cycles used by any given test or lab is called a cycle threshold (CT).

The higher the CT, the greater the risk that insignificant sequences of viral DNA end up being magnified to the point that the test reads positive even if your viral load is extremely low or the virus is inactive and poses no threat to you or anyone else. (FALSE POSITIVES). Guess when the CT was changed?

Many scientists have noted that anything over 35 cycles is scientifically indefensible.^{2,3,4} A September 28, 2020, study⁵ in Clinical Infectious Diseases revealed that when you run a PCR test at a CT of 35 or higher, the accuracy drops to 3%, resulting in a 97% false positive rate. In September 2020, According to Dr. Birx and the CDC, at the time Dr. Northrup wrote a blog about PCR testing, 50 percent of the positive tests were false positives.



PCR Tests are sterilized with ethylene Oxide....a poison. Known to cause brain bleeds, memory loss, and many other side effects.

GO TO: Juiceladycherie.com

<https://analyteguru.com/fighting-covid-19-the-double-face-of-ethylene-oxide-eo/>

****Download her free book with protocol information and how to detox.**

*** HealingStrong is not benefitting in anyway from sharing these resources.*

If you must test for travel, etc., use the saliva test (just as accurate) or use the short nose test. It is recommended by my friend Cherie Calbom (Juiceladycherie.com) to use Vitamin E in your nose before hand to protect and then rinse out your nose with salt water. Get a complete booklet about the EO in nasal swabs for free at her website.

The Washington State Department of Labor & Industries issued a warning stating that EO sterilization is not approved by federal OSHA for use on personal protective equipment and should not be used to sterilize filtering facepiece respirators for reuse because this extremely hazardous toxic chemical poses a severe risk to human health.

**Will you ask more questions,
and think more critically?**



Association of American Physicians and Surgeons

AAPS

DOWNLOAD THIS FOR YOURSELVES:

<https://aapsonline.org/CovidPatientTreatmentGuide.pdf>

Guide to Home-Based COVID Treatment

Step-By-Step Doctors' Plan That Could Save Your Life

Table of Contents

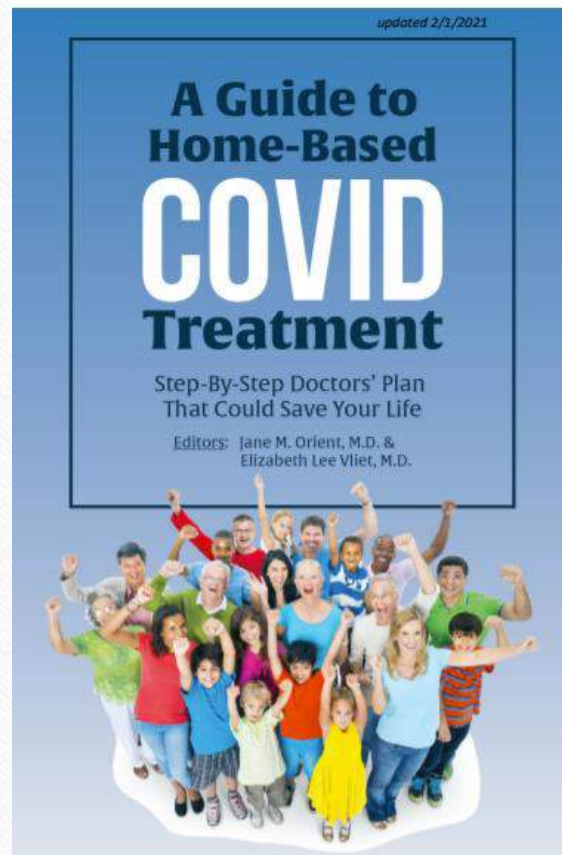
Chapter 1: Overview: SARS-CoV-2 Coronavirus and COVID-19 Illness
What is a Coronavirus?
How Deadly is COVID?

Chapter 2: I Have Flu-Like Symptoms: What Should I Do?
What Should I Do First?
Symptoms of COVID
Immediate Home Care Recommendations
Should I Get A COVID Test?
Early Treatment Is Key to Success
What to Expect At Your Physician Consultation

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Anti-Inflammatories - Corticosteroids: Oral and Nebulized
Prescription Anticoagulants ("Blood Thinners"): Why Crucial in COVID
Vitamins, Supplements, and Oxygen

Chapter 4: Emerging Prevention and Treatment Options
Monoclonal Antibodies
Convalescent Plasma
Prevention Options: Prophylaxis and Vaccines

educational resource from The Association of American Physicians and Surgeons (AAPSonline.org)



educational resource from The Association of American Physicians and Surgeons (AAPSonline.org)

Guide to Home-Based COVID Treatment

Step-By-Step Doctors' Plan That Could Save Your Life

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Association of American Physicians and Surgeons

Disclaimer: This booklet does not provide individual medical advice or prescribe treatment but is provided as informational service for patients and their families to know what options are available and widely used under current conditions. Patients should consult the physicians of their choice for individual medical evaluations and recommendations for treatment tailored to individual needs.

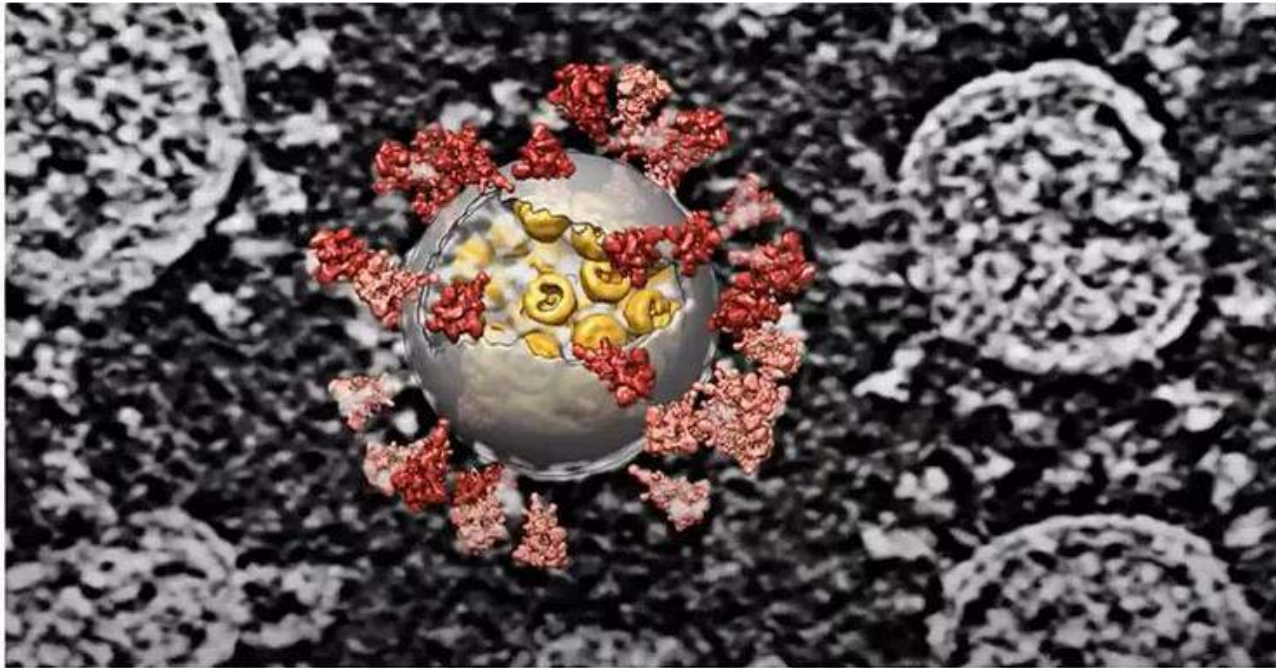
educational resource from The Association of American Physicians and Surgeons (AAPSonline.org)

Directory of Doctors Prescribing Effective Outpatient COVID-19 Therapy

Updated: 5 May 2021

[Scroll down for Directory below](#)

INFORMATION ONLY - NOT GUARANTEED ACCURATE
NOT MEDICAL ADVICE - CONSULT A MEDICAL PROFESSIONAL
(See TERMS below)



Cryogenic electron microscope image of SARS-CoV-2 coronavirus cross sections (with computer enhancement of one virus image)
Dr. Sai Li, Tsinghua University School of Life Sciences

<https://www.exstnc.com/>

1 Weigh it against history, the law and God's Word

Vaccines are in direct violation of The Nuremberg Code

Forced, coerced, and mandated vaccination are in violation of these principals.

A VIOLATION OF ARTICLE 6 OF THE UNESCO 2005 STATEMENT ON BIOETHICS AND HUMAN RIGHTS

Article 6, section 1:

Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned, based on adequate information. The consent should, where appropriate, be express and may be withdrawn by the person concerned at any time and for any reason WITHOUT DISADVANTAGE or prejudice. (caps Jack)

Jack be nimble...

Article 6, section 3:

In no case should a collective community agreement or the consent of a community leader or other authority substitute for an individual's informed consent.

Source:

https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

The judgment by the war crimes tribunal at **Nuremberg** laid down 10 standards to which physicians must conform when carrying out experiments on human subjects in a **new code** that is now **accepted worldwide**.

This judgment established a new standard of ethical medical behaviour for the post World War II human rights era.

ICAN

LEGAL
UPDATE



EMPLOYERS RETRACT COVID-19 VACCINE REQUIREMENTS!

ICAN's legal team, led by Aaron Siri, has taken legal action to challenge employers/schools that require their employees/students to receive a COVID-19 vaccine. Employers and schools that previously required the COVID-19 vaccine have dropped those requirements! This includes an employer that did so on the heels of ICAN's legal team challenging the mandate in court.

If you or anyone you know is being **required** by an employer or school to receive a COVID-19 vaccine, ICAN is pleased to offer to support legal action on your behalf to challenge the requirement. In order to obtain this potential assistance, please email us at freedom@icandecide.org and provide a copy of the **written notice** from your school or employer stating that the COVID-19 vaccine is **required**.

Without your support, our ability to fight these illegal COVID-19 vaccine requirements would not be happening. Thank you for making our work possible!

Please note that while we hope to help everyone, and hope to have sufficient resources to do so, depending on the volume of individuals that contact us and the amount of support we receive, we cannot guarantee we will have the sources to assist everyone that contacts us.

Here is a letter describing all the reasons for a Religious exemption although they are not supposed to ask detail. I thought it was excellent.

RELIGIOUS EXEMPTION

This letter is to serve as notification that _____ and _____, the parents of _____, born _____, 20____, are exercising our right to a religious waiver on all future childhood vaccinations because we find them to be in extreme violations of our personal religious beliefs.

The following are ways in which these violations manifest themselves in the vaccinations recommended by the Center for Disease Control.

The use of cells, cellular debris, protein, and DNA from willfully aborted human children found in Adenovirus, Polio, Dtap/Polio/HiB Combo, Hep A, Hep A/Hep B Combo, MMR, MMRV Pro Quad, Rabies, Varicella, and the Shingles vaccines violate the very basic commands found in Exodus 20:13 and Deuteronomy 5:15 which instructs us to not murder. The following ingredients were derived from no fewer than 107 human souls who were sacrificed for social reasons and then used in past and ongoing vaccine research: PER C6, HEK293, WI-38 (RA 27/3), WI-1, WI-2, WI-3, WI-4, WI-5, WI-6, WI-7, WI-8, WI-9, WI-10, WI-11, WI-12, WI-13, WI-

WI-3, WI-4, WI-5, WI-6, WI-7, WI-8, WI-9, WI-10, WI-11, WI-12, WI-13, WI-14, WI-15, WI-16, WI-17, WI-18, WI-19, WI-20, WI-21, WI-22, WI-23, WI-24, WI-25, WI-26, WI-27, WI-38, WI-44, and MCR-5 plus many other ingredients obtained from human children not required to be listed by FDA guidelines. Supporting vaccinations and vaccination developments is an endorsement of the sacrifice of those and the continuing sacrifice of other human souls.

Genesis 4:1, 17 and Jeremiah 1:5 demonstrate that the deceased children used in the aforementioned vaccinations were recognized by God as human souls from the point of conception in the same way that we, as parents, recognized our child as a human from the moment we were aware of his/her presence in his/her mother's wombs.

Genesis 1:27 - 28, 4:1, 2 Kings 17:17-18, Psalm 22:10-11, 106: 35, 37-38, 113:7-9, 127:3, 139:13-16, Amos 1:13, Matthew 18:1-4, and Matthew 19:13-15 are just a few verses that illustrate the aforementioned children as blessings from God that are valued and loved by him, their Creator, in whose image they were created and that their killing is condemned and causes God's destructive anger to burn against their murderers and those complicit in those murders.

Exodus 20:13, Leviticus 18:21 & 20:2-5,

Exodus 20:13, Leviticus 18:21 & 20:2-5, Deuteronomy 5:13, 12:30-32, 18:10, 2 Kings 16:3, and Psalm 106:38 illustrate that all child sacrifice is condemned with no exception clauses allowing for the greater good or public exception clauses found anywhere in the sacred scriptures.

1 Corinthians 6:19-20 and 10:31 remind us that we are to regard our bodies a temples of God's Holy Spirit and that we are to honor God, our Creator and possessor of our very bodies by not defiling them. Notwithstanding the presence of socially sacrificed human cells and debris in vaccinations, we firmly believe that the presence of neurotoxins, hazardous substances, attenuated viruses, animal cells, foreign DNA, albumin from human blood, carcinogens, and chemical wastes is in strict violation of our imperative to treat our bodies as holy temples of the very Spirit of God.

Genesis 9:4, Leviticus 17:10-11, 17:14, Deuteronomy 12:23, Acts 15:20 and 29 informs us that blood represents the life force of human and animal species and that human blood was to be kept pure under all circumstances and free from contaminants such as animal cells, parts, and blood.

We thank you for respectfully adhering to our first amendment rights guaranteed as citizens of the United

We thank you for respectfully adhering to our first amendment rights guaranteed as citizens of the United States of America by her great Constitution and reinforced on a state level by the fourteenth amendment without prejudice.

Maternal Parent printed name: _____

Maternal Parent signature: _____

Date signed: _____

Paternal Parent printed name: _____

Paternal Parent signature: _____

Date signed: _____

Notary public witness:

State of _____ County _____

I, _____, a Notary Public for said County and State, do hereby certify that _____ and _____

personally appeared before me this _____

How does this apply to our lives in real-life?

When we are fearful in crisis and facing seemingly impossible “Big Problems”, God’s Word encourages us!

Deuteronomy 31:6 (Moses encouraged the Israelites preparing to enter the promised land) Be strong and courageous. Do not be afraid or terrified because of them, for the LORD your God goes with you; He will never leave you nor forsake you.”

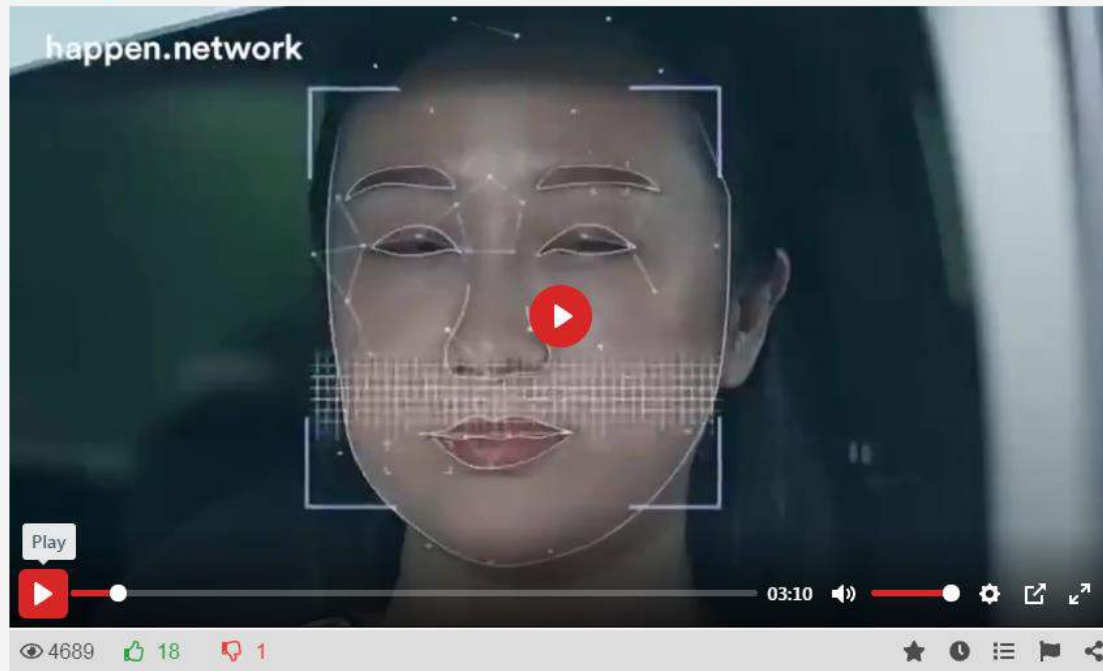
Isaiah 41:10

So do **not fear**, for I am with you; do **not** be dismayed, for I am your God. I will strengthen you and help you; I will uphold you with my righteous right hand.

John 3:16 “For God so loved the world, that He gave His only begotten Son, that whoever, believes in Him should not perish, but have eternal life.”

THE NEW NORMAL - HAPPEN.NETWORK (DOCUMENTARY: BANNED ON YOUTUBE)

WATCH



New Normal? Unknown. We do know that the world leaders seem to be working together. Pharmaceuticals, digital age, and so much of what we read in scriptures seem to be lining up.

Do you know God's Word enough to recognize His truths vs. falsehoods, or even truths that are the worlds and how He would want us to respond?

<https://www.bitchute.com/video/W0vrdIaZ3LT2/>

2 Tim. 3:16 – The Message

But don't let it faze you. Stick with what you learned and believed, sure of the integrity of your teachers—why, you took in the sacred Scriptures with your mother's milk! There's nothing like the written Word of God for showing you the way to salvation through faith in Christ Jesus. Every part of Scripture is God-breathed and useful one way or another—showing us truth, exposing our rebellion, correcting our mistakes, training us to live God's way. Through the Word we are put together and shaped up for the tasks God has for us.

We put our lives in God's hands, and not in man's hands. Trusting HIM for our future, our provision, and direction. He can also change our hearts, giving us peace about anything...for now, **WE STAND FIRM IN THE FAITH.**

Join in with us any night of the week: www.aroundthewordin80days.org



Around the Word in 80 Days

A special offering from the HealingStrong organization

An 80-day commitment to reading God's Word out loud

TAKE THE 80 DAY CHALLENGE WITH US!

Around the Word in 80 Days first reading began on August 1, 2020 with a group of individuals from the organization. They came together during a difficult year when connections with each other and God was on the forefront of everyone's mind. Their desire was simple – to read the Bible in its entirety from Genesis to Revelation, and to do so together, every night. What they discovered is the power of God's Word being read out loud with each other made a powerful impact on every single person involved. It was simply reading **God's Word** out loud and watching Him work. The group grew and people were signing up from all over the world. *It was that simple – An opportunity to join together to read God's Word. Since then other groups have started their*

Do you know
God's Word
enough to
recognize
truth?

M ost Important: W hat C an Y ou D o A t H ome?

G O O D N E W S :
P ersonal R esponsibility



HEALINGSTRONG.ORG/GROUPS

FIND A *group*

We are in the United States, Canada and several countries around the WORLD!

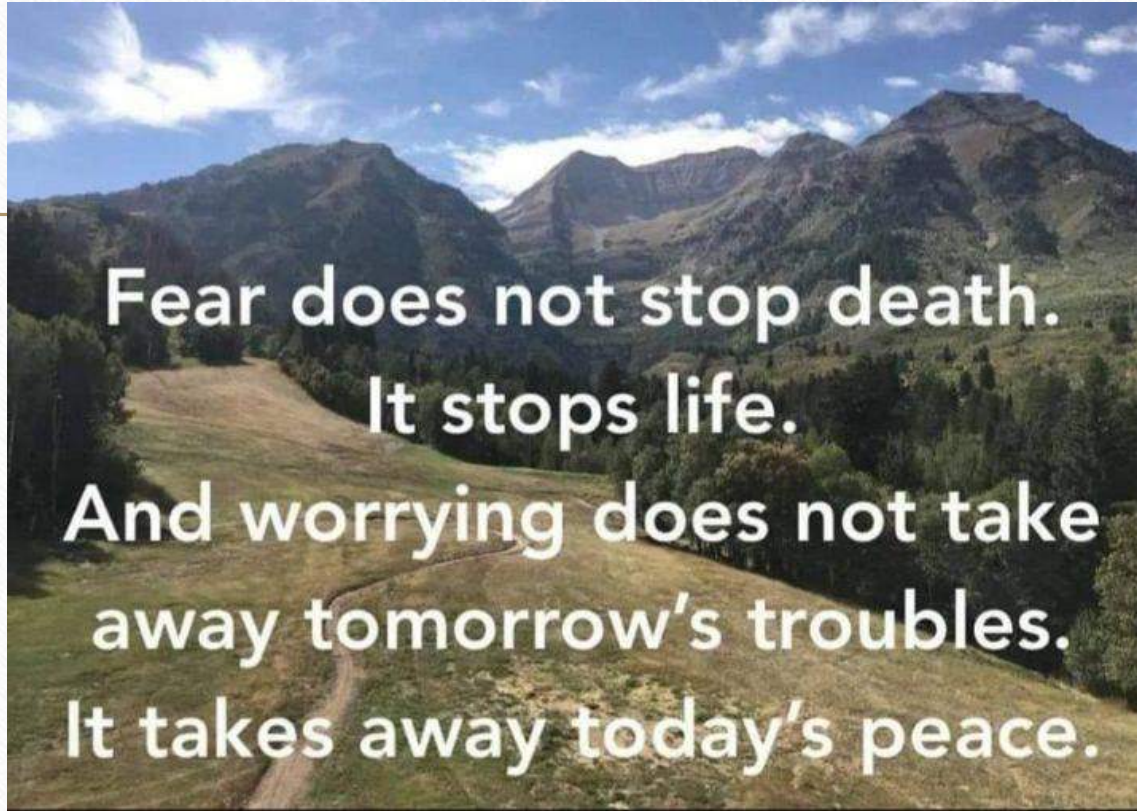
HealingStrong Groups are volunteer-led community groups to help educate, encourage and support people who are healing from cancer and other chronic diseases, or those who just want to live a vibrant, healthy life.

Healingstrong.org/groups

HealingStrong offers hope, a place where people can find others who believe like them, are like-minded and want to live each other up. Listen to this video with other thrivers who know first hand what it means to be part of HealingStrong.



Video Source: <https://vimeo.com/manage/videos/233323781>



The best prevention is personal responsibility

“For we have not be given a spirit of fear, but of power and love and of a sound mind.” - 2 Timothy 1:7

H e a l i n g S T R O N G i n B O D Y :

- CHANGE YOUR DIET: Rich in WHOLE FOODS.
- DETOX Your Body
- FASTING
- JUICING from juicer
- WATER
- SUPPLEMENTATION
- SAFE EXERCISE
- YOU CAN PREVENT DISEASE and RECOVER!

Fasting, Water and Hydration

- Fasting helps to weaken unhealthy cells and strengthen healthy cells
- Water fasting is cheap / use clean water
- Helps us to Draw Closer to God and Meditate on His Word
- In general, you should try to **drink between half an ounce and an ounce of water for each pound you weigh**, every day

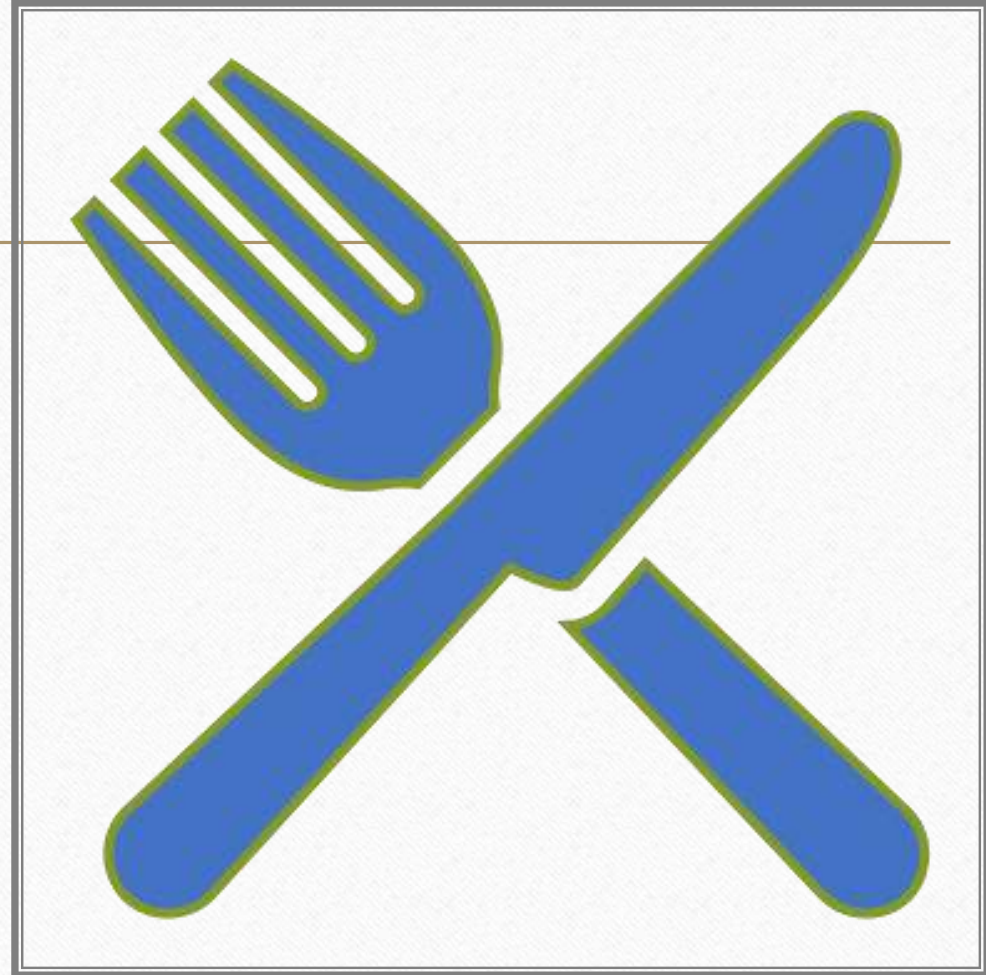


Whole Foods & Plant Based Nutrition

Minimizing protein from meat sources can be very helpful to healing.

Cut out all sugar and dairy. Both of these cause inflammation.

Try to get source of nutrition from fresh fruits and vegetables. If you can't, then frozen, and if that's not available then cans but limit sodium.





Detox and Supplements:

• Detoxification

- Remove Sugar, dairy, processed foods
- Jump on trampoline or up and down in your place to help your lymph drain
- Take Epsom salt baths / Soak your feet in Epsom salt
- Drink 3 Tablespoons Apple Cider Vinegar in morning water
- Drink lemon in water in morning

Detox and Supplements:



• Supplements

- Vitamin C (high dosing 5,000-10,000 a day)
- Vitamin D3 (Studies show that those with adequate D3 levels respond better to Covid infection.) In a study of hospitalized patients with SARS Covid-19, 25OHD levels are lower in hospitalized COVID-19 patients than in population-based controls and these patients had a higher prevalence of deficiency.
- Zinc (Antiviral)

Herbs

- **Oregano:** Helps with stomach viruses, herpes simplex virus, RSV/Respiratory
- **Sage:** Antiviral due to compounds called safficinolide, found in the leaves and the stem
- **Basil:** Holy basil is known to increase immunity, which may help fight viral infections. In A 4 week study in 24 healthy adults, supplementing with 300 mg Holy Basil increased the Helper tcells and natural killer cells.
- **Fennel:** Has shown to be effective in parainfluenza type-3 (PI-3) which causes respiratory infections in cattle. According to animal studies, fennel may boost your immune system and decrease inflammation.

[Source Jillian Kubala, MS, RD / Adda Bjarnadottir, MD, RDN]



“He causeth the grass to grow for the cattle and herb for the service of man; that he may bring forth food out of the earth.” Psalm 104:14

Herbs continued...

- ***Peppermint Leaf Extract:*** Potent against respiratory virus
- ***Garlic:*** shown to have antiviral activity against Flu, viral pneumonia, rhinovirus
- ***Echinacea:*** Widely used for colds and found in many conventional medications
- ***Elderberries:*** Found to substantially reduce upper respiratory infections
- ***Licorice:*** Studies have shown it to be effective against serious types of pneumonia.
- ***Maca:*** Excellent potent herb found with medicinal benefits

Journal of American Physicians and Surgeons

“Unfortunately, governments, politicians, media, medical organizations, hospital health systems, pharmaceutical, and other industry interests ***have worked to hamper early treatment*** and block access to repurposed generic medications like hydroxychloroquine and ivermectin,” he concludes. - Dr. Craig Max, D.O., Board of Directors

DOWNLOAD THIS: <https://aapsonline.org/CovidPatientTreatmentGuide.pdf>

C O V I D -1 9 T herapeutics and Protocols

I. Antiviral Agents: These must be started quickly at STAGE I (Days 1-5):

Symptoms include sore throat, nasal stuffiness, fatigue, headaches, body aches, loss of taste and/or smell, loss of appetite, nausea, diarrhea, fever. These medicines stop the virus from (1) entering the cells and (2) from multiplying once inside the cells, and they reduce bacterial invasion in the sinuses and lung:

*Hydroxychloroquine (HCQ) with azithromycin (AZM) or doxycycline OR ☐ Ivermectin with azithromycin (AZM) or doxycycline

Either combination above must also include zinc sulfate or gluconate, plus supplemental vitamin D, and vitamin C.
Some doctors also recommend adding a B complex vitamin

C O V I D -1 9 T herapeutics and Protocols

II. STAGE II (Days 3-14) Anti-inflammatory Agents - Corticosteroids (“steroids”): Oral and Nebulized.

These are started at **STAGE II (Days 3-14)** to reduce inflammation, the cause of added damage to the lungs and critical organs. Symptoms include worsening cough, difficulty breathing, chest heaviness/tightness or chest pain. As inflammation damages the airways interfering with normal oxygen-carbon dioxide exchange, blood oxygen levels drop and people experience loss of focus, drowsiness, confusion, difficulty concentrating, low energy and severe fatigue. The exaggerated Inflammation response in COVID further increases the risk of blood clots.

Prescription medicines and other support added now to Stage I medicines are:

- ☐ nebulized budesonide to help penetrate the lungs and reduce inflammation
 - ☐ oral prednisone, methylprednisolone, dexamethasone
 - ☐ colchicine – may also be added to reduce inflammation
- ☐ full strength adult aspirin 325 mg to reduce inflammation and risk of blood clots
- ☐ home oxygen concentrator may be needed to improve oxygen levels (requires physician prescription)

C O V I D -1 9 T herapeutics and Protocols

Prescription Anticoagulants (“blood thinners”): STAGE III (Day 7 and beyond):

Symptoms seen in Stage II intensify. Difficulty breathing becomes extreme, oxygen levels drop sharply, risk of heart attack or stroke increases. At this point, people are critically ill.

The medicines to be added to Stage I and II medicines now include:

- ☐ Aspirin 325 mg unless told not to take by your doctors
- ☐ And/or low molecular weight heparin injections (e.g. enoxaparin [Lovenox]) OR
- ☐ apixaban (Eliquis), or rivaroxaban (Xarelto), or dabigatran (Pradaxa) or edoxaban (Savaysa) in standard doses for 5 to 30 days

If these added steps do not lead to improvement, or the patient becomes unstable, a 911 call is warranted for ER evaluation and hospital admission so that more aggressive IV medications (such as remdesivir, Regeneron, and others) may be considered, and more intensive ventilation regimens are possible in ICU settings.

American Journal of Medicine Jan. 2021

At HOME Approach:

- 1) reduction of reinoculation, (Stay Home When You Are Sick. Abide by Govt. Rules)
- 2) combination antiviral therapy, (Two Examples Showing Great effect: Hydroxychloroquin and Ivermectin, Vitamin C and Zinc)
- 3) immunomodulation, (Do What You Can to Do To Improve Your Immune Response)
- 4) antiplatelet/antithrombotic therapy, and (Examples: Aspirin, turmeric, cayenne pepper)
- 5) administration of oxygen, monitoring, and telemedicine. (Oxygen if available, Ozone) Also, hydrogen peroxide breaks down on contact to water and oxygen – food grade in bath water is an example)

COVID-19 Therapeutics and Protocol

AM Dose:

- Vitamin C (ester-C or liposomal C) 2000 mg – 5,000 mg
- Vitamin D3 5000-10,000 iu**
- Quercetin 250 mg
- B-50 Complex
- Zinc 25 mg

PM Dose:

- Vitamin C 2000 mg -5,000 mg
- Quercetin 250 mg
- B-50 Complex
- Zinc 25 mg
- Melatonin (slow release) 2 mg → take prior to bedtime as tolerated

The supplements above are based upon observations and recommendations by Paul Marik, MD of Eastern Virginia Medical School—⁸⁹ see “Marik Protocol”.

MATH+ HOSPITAL TREATMENT PROTOCOL FOR COVID-19

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2021-04-28

MEDICATION	INDICATION/INITIATION	RECOMMENDED DOSING	TITRATION/DURATION
METHYLPREDNISOLONE	A. Upon oxygen requirement or abnormal chest X-ray	Preferred: 80 mg IV bolus, then 40 mg IV twice daily Alternate: 80 mg / 240 ml normal saline IV infusion at 10 ml/hr Follow COVID-19 Respiratory Failure protocol (see flccc.net/respiratory-support-c19/)	A1. If no improvement in oxygenation in 2–4 days, double dose to 160 mg/daily. A2. Upon need for $\text{FiO}_2 > 0.6$ or ICU, escalate to "Pulse Dose" below (B) A3. Once off IMV, NPPV, or High flow O_2 , decrease to 20 mg twice daily. Once off O_2 , then taper with 20 mg/day \times 5 days then 10 mg/day \times 5 days
	B. Refractory Illness/ Cytokine Storm	"Pulse" dose with 125–250 mg IV every 6 hours	Continue \times 3 days then decrease to 160 mg IV/daily dose above, taper according to oxygen requirement (A). If no response or CRP/Ferritin high/rising, consider mega-dose IV ascorbic acid and/or "Therapeutic Plasma Exchange" below
ASCORBIC ACID	$\text{O}_2 < 4 \text{ L}$ on hospital ward	500–1000 mg oral every 6 hours	Until discharge
	$\text{O}_2 > 4 \text{ L}$ or in ICU	50 mg/kg IV every 6 hours	Up to 7 days or until discharge from ICU, then switch to oral dose above
	If in ICU and not improving	Consider mega-doses: 25 grams IV twice daily for 3 days	Completion of 3 days of therapy
THIAMINE	ICU patients	200 mg IV twice daily	Up to 7 days or until discharge from ICU
HEPARIN (LMWH)	Upon admission to hospital	1 mg/kg twice daily — Monitor anti-Xa levels, target 0.6–1.1 IU/ml	Until discharge then start DOAC at half dose \times 4 weeks
IVERMECTIN* (a core medication)	Upon admission to hospital and/or ICU	0.4–0.6 mg/kg per dose — daily (Take with or after meals)	For 5 days or until recovered
Fluvoxamine	Hospitalized patients	50 mg PO twice daily	10–14 days
Cyproheptadine	If any of: 1) on fluvoxamine, 8 mg — 3 x daily 2) hypoxemic, 3) tachypneic/respiratory distress, 4) oliguric/kidney injury		until discharge, slow taper once sustained improvements noted
Anti-Androgen Therapy	Hospitalized patients (Men only)	Dutasteride 0.5 mg daily or Finasteride 5 mg daily	until fully recovered
Vitamin D	Hospitalized patients	Calcifediol preferred: 0.5 mg PO day 1, then 0.2 mg PO day 2 and weekly thereafter Cholecalciferol: 20,000–60,000 IU single dose PO then 20,000 IU weekly	Until discharge
Atorvastatin	ICU Patients	80 mg PO daily	Until discharge
Melatonin	Hospitalized patients	6–12 mg PO at night	Until discharge
Zinc	Hospitalized patients	75–100 mg PO daily	Until discharge
Famotidine	Hospitalized Patients	40–80 mg PO twice daily	Until discharge
Therapeutic Plasma Exchange	Patients refractory to pulse dose steroids	5 sessions, every other day	Completion of 5 exchanges

Legend: CRP = C-Reactive Protein, DOAC = direct oral anti-coagulant, FiO_2 = Fraction of inspired oxygen, ICU = Intensive Care Unit, IMV = Invasive Mechanical Ventilation, IU = International units, IV = Intravenous, NPPV = Non-Invasive Positive Pressure Ventilation, O_2 = oxygen, PO (per os) = oral administration

* The safety of ivermectin in pregnancy has not been established thus treatment decisions require an assessment of the risks vs. benefits in a given clinical situation.

For optional medicines and an overview of the developments in prevention and treatment of COVID-19, please visit flccc.net/optional-medicines

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MATH+ HOSPITAL TREATMENT PROTOCOL FOR COVID-19

TO CONTROL INFLAMMATION & EXCESS CLOTTING

In all COVID-19 hospitalized patients, the therapeutic focus must be placed on early intervention utilizing powerful, evidence-based therapies to counteract:

- The overwhelming and damaging inflammatory response
- The systemic and severe hyper-coagulable state causing organ damage

By initiating the protocol soon after a patient meets criteria for oxygen supplementation, the need for mechanical ventilators and ICU beds will decrease dramatically.

TREATMENT OF LOW OXYGEN

- If patient has low oxygen saturation on nasal cannula, initiate heated high flow nasal cannula.
- Do not hesitate to increase flow limits as needed.
- Avoid early intubation that is based solely on oxygen requirements. Allow "permissive hypoxemia" as tolerated.
- Intubate only if patient demonstrates excessive work of breathing.
- Utilize "prone positioning" to help improve oxygen saturation.

ABOUT THE MATH+ HOSPITAL TREATMENT PROTOCOL FOR COVID-19

Our **MATH+** protocol is designed for hospitalized patients, to counter the body's overwhelming inflammatory response to the SARS-CoV-2 virus. The protocol is based on numerous medical journal publications over decades. It is the hyper-inflammation, not the virus itself, that damages the lungs and other organs and ultimately causes death in COVID-19. We have found the **MATH+** protocol to be a highly effective combination therapy in controlling this extreme inflammatory response and we have now added ivermectin as a core component given the profound emerging efficacy data in hospitalized patients reviewed here (www.flccc.net/flccc-ivermectin-review-covid-19).

The steroid Methylprednisolone is a key component, increasing numbers of studies (see <https://flccc.net/medical-evidence>) show its profound effectiveness in COVID-19, which is made more potent when administered intravenously with high doses of the antioxidant Ascorbic acid given that the two medicines have multiple synergistic physiologic effects. Thiamine is given to optimize cellular oxygen utilization and energy consumption, protecting the heart, brain, and immune system. The

anticoagulant Heparin is important for preventing and dissolving blood clots that appear with a very high frequency in patients not given blood thinners. The **+** sign indicates several important co-interventions that have strong physiologic rationale and an excellent safety profile. It also indicates that we plan to adapt the protocol as our insights and the published medical evidence evolve.

Timing is a critical factor in the successful treatment of COVID-19. Patients must go to the hospital as soon as they experience difficulty breathing or have a low oxygen level. The **MATH+** protocol then should be administered soon after a patient meets criteria for oxygen supplementation (within the first hours after arrival in the hospital), in order to achieve maximal efficacy as delayed therapy has led to complications such as the need for mechanical ventilation.

If administered early, this formula of FDA-approved, safe, inexpensive, and readily available drugs can eliminate the need for ICU beds and mechanical ventilators and return patients to health.

DISCLAIMER

This protocol is solely for educational purposes regarding potentially beneficial therapies for COVID-19. Never disregard professional medical advice because of something you have read on our website and releases. It is not intended to be a substitute for professional medical advice, diagnosis, or treatment in regards to any patient. Treatment for an individual patient should rely on the judgement of your physician or other qualified health provider. Always seek their advice with any questions you may have regarding your health or medical condition.

CONTACT

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For updates, references and more information on **MATH+** (Hospital Treatment Protocol for COVID-19) and on our **I-MASK+** (Prevention & Early Outpatient Treatment Protocol for COVID-19) please see

flccc.net

HealingS T R O N G in S O U L (M ind, W ill and E motions)

“Beloved, I pray that in all respects you may prosper and be in good health, just as your soul prospers.” 3 John 1:2



HealingStrong Live: Chris Wark Power of ...

CHOOSE TO FORGIVE

- Do Not harbor unforgiveness against anyone. It hurts only you. We should forgive the same way Jesus forgave. Forgiveness is an opportunity to love again and frees our soul.

- Jesus came to *set the captives FREE.

<https://vimeo.com/manage/videos/325080979>

Healing S T R O N G in S P I R I T : R E N E W A S T E A D F A S T S P I R I T W I T H I N M E

Create in me a pure heart, O God,
and renew a steadfast spirit within me.

11 Do not cast me from your presence
or take your Holy Spirit from me.

12 Restore to me the joy of your salvation
and grant me a willing spirit, to sustain me.

13 Then I will teach transgressors your ways,
so that sinners will turn back to you. Ps 51:10-12

H e a l i n g S T R O N G i n S P I R I T :

R E N E W A S T E A D F A S T S P I R I T W I T H I N M E

How can a young man keep his way pure? By guarding it **according to your word.** Ps 119:9

“Resist [your enemy the devil], standing firm in the faith, because you know that your brothers throughout the world are undergoing the same kind of sufferings.” – 1 Peter 5:9

A background image showing several hands of different skin tones being held together in a supportive grip. The image is slightly blurred, focusing on the sense of community and healing.

LET'S HEAL *together*

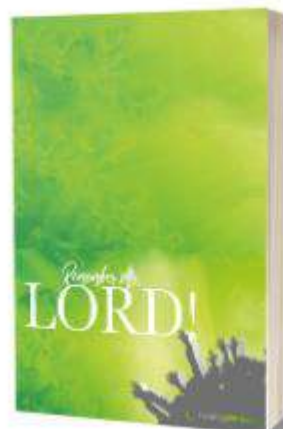
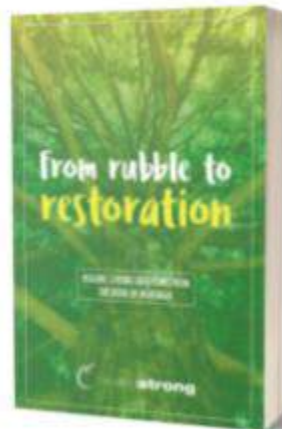
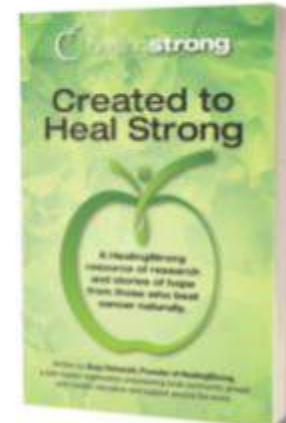
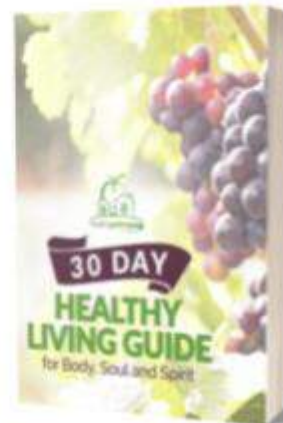
We Heal Best in Community

We support a network of online and in-person groups that meet all around the world. Find one today in your community, or join one online.

[Find a Group](#)

Healingstrong.org/groups

HealingStrong Books



Join our
Membership
and Receive
Benefits:

[www.healingstrong.org/
membership](http://www.healingstrong.org/membership)

Resources and Educational Videos



Webinar: Essentials of Nutrition with Dr. Patrick Quillin, PhD, RD, CNS



Gaea Powell on Thermography



Thrive Beyond Cancer Interview with Suzy Griswold



Rev. Danny Jones on COVID-19



Webinar: Laura Bradshaw with 4 Truths and a Lie



Webinar: Dr. Linda Isaacs, M.D.



Testimonial: James Templeton, Stage 4 Melanoma



Webinar: How to Fast with Dr. Anja Sonst, M.D.



Are We Lost? How God Lights Our Path On a Healing Journey



HealingStrong Q&A with Dr. Veronique Desaulniers



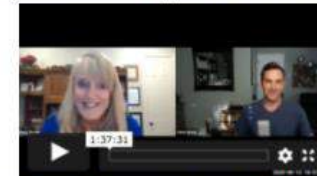
A Breast Exposé: The Breast Kept Secret



Webinar: Juice Lady, Cherie Calbom



Webinar: Gerson Therapy with Dr. Patrick Vickers



HealingStrong Houston: Special Q&A with Chris Wark



Webinar: Sara Jo Poff on Emotions, Words and the Body

Join our
Membership
and Receive
Benefits:

[www.healingstrong.org/
membership](http://www.healingstrong.org/membership)

START A *group*

We are honored you are considering starting a HealingStrong group in your community. Our HealingStrong Leaders are part of an incredible network of holistic thrivers, caregivers, and practitioners, connecting their shared desire to educate, equip and empower others to heal and stay strong: body, soul and spirit.

We are a non-profit organization and our heart is to help establish a community of support and healing.

CONNECT, SUPPORT & *educate*

When you decide to become a HealingStrong Group Leader, we will support you every step of the way. It's to register and we offer many resources and provide guidance to bring a HealingStrong support group to your community.



Support

Curriculum

- ✓ Web-based portal (aka: Leaders Lounge) for videos, ebooks, recipes and more.
- ✓ Exclusive offers from our HealingStrong Partners.
- ✓ Optional listing in our searchable HealingStrong directory.
- ✓ Monthly newsletters with stories of group leaders.

• **Join our HealingStrong Group Leaders and Receive Benefits, Training, Curriculum, Support**

Healingstrong.org/groups

MAKE A *donation*

If you believe in and would like to support the mission of HealingStrong, please consider making a donation. There is more work to be done and we need your help now more than ever.

Make a Donation

<https://healingstrong.org/donate>

PRAYER *request*

Whatever may be on your heart, or the weight of your burden, someone is waiting to stand with you in prayer. Reach out to our HealingStrong Prayer Team to make a request.

Make a Prayer Request

Prayerrequest@healingstrong.org



• A very special thank you to the HealingStrong team, including the Group Leaders around the United States, Canada and some countries around the world. Thank you to our staff and Board of Directors. We are grateful to our members who help sustain and support our mission, along with our Corporate Partners. We could not carry out this important mission without the help and support of all of you!



healing**strong**TM