

The Biggest COVID Question: What Will Happen in 10 years?

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STORY AT-A-GLANCE

- > So far, children have been largely unfazed by COVID-19 because their interferon pathway works really well. Interferon is an immune molecule that protects cells against invading pathogens
- > The COVID jab inhibits the type-1 interferon pathway, so mass injecting young children may actually erase the natural herd immunity against COVID-19 that would develop if all children remained unjabbed
- > Aggressive cancers have exploded among adults who got the shots, even though it's only been a little over two years since their rollout
- > Analysis of U.S. Morbidity and Mortality Weekly Report (MMWR) data suggests the U.S. Centers for Disease Control and Prevention is redesignating cancer deaths as COVID deaths to eliminate the cancer signal, and has been doing so since April 2021
- > We've also seen massive increases in excess mortality from abnormal clotting issues and heart problems since the COVID shots rolled out. If side effects such as cancer, heart disease and stroke are killing working age adults in unprecedented numbers already, what will the excess mortality be, say, 10 years from now if children and teens keep getting mRNA boosters every year?

What will the future hold for people whose exposure to COVID-19 occurs during the first years of life? That question was recently asked by Katherine J. Wu, a staff writer at The Atlantic.¹

"To be a newborn in the year 2023 — and, almost certainly, every year that follows — means emerging into a world where the coronavirus is ubiquitous ... Beyond a shadow of a doubt, this virus will be one of the very first serious pathogens that today's infants — and all future infants — meet," she writes.

"Eventually, the expectation is that the illness will reach a stable nadir, at which point it may truly be 'another common cold,' says Rustom Antia, an infectious-disease modeler at Emory.

The full outcome of this living experiment, though, won't be clear for decades — well after the billions of people who encountered the coronavirus for the first time in adulthood are long gone.

The experiences that today's youngest children have with the virus are only just beginning to shape what it will mean to have COVID throughout a lifetime, when we all coexist with it from birth to death as a matter of course."

COVID Jab Prevents Natural Herd Immunity

Wu praises the COVID jab as being part of why we can be hopeful for future generations that have to live with this new virus, but is that really realistic? Right now, everything points to the COVID shot being a disaster, and no one actually knows what the long-term effect will be on children who get it.

Wu highlights the fact that children's immune systems have the advantage of "marshaling hordes of interferon — an immune molecule that armors cells against viruses." This is thought to be a primary reason why COVID-19 isn't nearly as lethal in young children as in older adults.

The problem that Wu completely misses is that the COVID jab inhibits the type-1 interferon pathway,² so mass injecting young children may actually erase the natural herd immunity against COVID-19 that would develop if all children remained unjabbed. The shots will NOT, as Wu suggests, help us achieve herd immunity at all.

Cancer Rates in Young People Will Likely Rise

Mass injecting children with a drug that impairs their immune system may also (rather predictably) result in exploding cancer rates. Already, aggressive cancers have exploded among adults who got the shots,³ even though it's only been a little over two years since their rollout.

For example, data from the Defense Medical Epidemiology Database (DMED)⁴ — historically one of the most well-kept and most heavily relied-upon medical databases in the world — showed that, compared to the previous five-year averages, cancer among Department of Defense (DOD) personnel in 2021 skyrocketed.

Overall, cancers tripled among servicemen and their family members after the rollout of the COVID shots. Breast cancer went up 487%. Exploding cancer rates are also seen elsewhere. Indeed, the explosion of cases is so bad that cancer is now one of the top three leading causes of premature death among young working-age adults — a trend that in turn has driven down U.S. life expectancy by three years.

Cancer Relapses and Metastasis Rates Are Exploding

November 26, 2022, The Daily Sceptic published a letter^{5,6} to the editor of The BMJ, written by Dr. Angus Dalgleish, professor of oncology at St. George's University of London, warning that COVID boosters may be causing aggressive metastatic cancers:

"COVID no longer needs a vaccine programme given the average age of death of COVID in the U.K. is 82 and from all other causes is 81 and falling," Dalgleish wrote. "The link with clots, myocarditis, heart attacks and strokes is now well accepted, as is the link with myelitis and neuropathy ...

However, there is now another reason to halt all vaccine programmes. As a practicing oncologist I am seeing people with stable disease rapidly progress after being forced to have a booster, usually so they can travel. Even within my own personal contacts I am seeing B cell-based disease after the boosters.

They describe being distinctly unwell a few days to weeks after the booster — one developing leukemia, two work colleagues Non-Hodgkin's lymphoma, and an old friend who has felt like he has had Long COVID since receiving his booster and who, after getting severe bone pain, has been diagnosed as having multiple metastases from a rare B cell disorder.

I am experienced enough to know that these are not coincidental anecdotes ...
The reports of innate immune suppression after mRNA for several weeks would fit, as all these patients to date have melanoma or B cell-based cancers, which are very susceptible to immune control — and that is before the reports of suppressor gene suppression by mRNA in laboratory experiments. This must be aired and debated immediately."

In a December 19, 2022, article⁷ in Conservative Woman, Dalgleish continued discussing the phenomenon of rapidly spreading cancers in patients who were in stable remission for years before receiving their COVID boosters. He noted that after his letter to The BMJ was published, several oncologists contacted him to say they're seeing the same thing in their own practices.

"Seeing the recurrence of these cancers after all this time naturally makes me wonder if there is a common cause?" he wrote. "I had previously noted that relapse in stable cancer is often associated with severe long-term stress, such as bankruptcy, divorce, etc.

However, I found that none of my patients had any such extra stress during this time, but they had all had booster vaccines and, indeed, a couple of them noted that they had a very bad reaction to the booster which they did not have to the first two injections.

I then noted that some of these patients were not having a normal pattern of relapse but rather an explosive relapse, with metastases occurring at the same time in several sites ... Scientifically, I was reading reports that the booster was leading to a big excess of antibodies at the expense of the T-cell response and that this T-cell suppression could last for three weeks, if not more.

To me, this could be causal as the immune system is being asked to make an excessive response through the humoral inflammatory part of the immune response against a virus (the alpha-delta variant) which is no longer in existence in the community.

This exertion leads to immune exhaustion, which is why these patients are reporting up to a 50% greater increase in Omicron, or other variations, than the non-vaccinated."

Swedish pathologist, researcher and senior physician at Lund's University, Dr. Ute Krueger, has also observed an explosion in rapidly advancing cancers in the wake of the COVID shots, with the largest increase occurring among 30- to 50-year-olds. 9,10 According to Krueger, tumor sizes are also dramatically larger, multiple tumors in multiple organs are becoming more common, and cancer recurrence and metastasis are both increasing.

Cancer Deaths Are Being Intentionally Hidden

Disturbingly, as detailed in "How Cancer Deaths From the COVID Jabs Are Being Hidden," analysis of U.S. Morbidity and Mortality Weekly Report (MMWR) data suggests the U.S. Centers for Disease Control and Prevention is filtering out and redesignating cancer deaths as COVID deaths to eliminate the cancer signal, and has been doing so since April 2021.

The signal is being hidden by swapping the underlying cause of death with main cause of death. As many as 20% of the weekly so-called COVID deaths are actually cancer deaths.

An Unconscionable Experiment on Humanity

Absolutely no one knows what the long-term ramifications of giving these injections to infants and young children will be. It's a public health experiment unlike anything we've

ever seen before. So far, we've not seen cancer rates among children skyrocket, but the uptake among young children has also been low.

66 If side effects such as cancer, heart disease and stroke are killing working age adults in unprecedented numbers already, what will the excess mortality be, say, 10 years from now if children and teens keep getting mRNA boosters every year? 99

Since their immune systems are also more robust, children may be protected from cancer for a time even if they do get the jab. The question is how long? The U.S. childhood vaccination schedule now includes the initial series plus an annual COVID booster. How many boosters will it take before a child's immune system breaks and cancer starts to proliferate?

Excess Mortality Skyrocketing

We've also seen massive increases in excess mortality from abnormal clotting issues and heart problems since the COVID shots rolled out. If side effects such as cancer, heart disease and stroke are killing working age adults in unprecedented numbers already, what will the excess mortality be, say, 10 years from now if children and teens keep getting mRNA boosters every year?

I shudder to even think about it. Making matters even worse, drug makers are working overtime to deliver other mRNA-based "vaccines" as well, including one against respiratory syncytial virus (RSV). The U.S. Food and Drug Administration has already fast-tracked it. This, despite the fact that previous attempts to create an RSV vaccine failed because they caused antibody dependent enhancement (ADE).

No Benefit, Massive Cost

Now that we're more than two years into the COVID injection campaign, the cost-benefit analysis is clearer than ever. The benefit is so small as to be inconsequential, while the costs are enormous. Here's a quick summary breakdown, based on available evidence:

- Benefit Short-term (four to six months) protection from severe COVID illness and death.
- Cost Negative effectiveness after a few months (meaning the risk of infection, hospitalization and death from COVID is higher than before the injection). It also doesn't prevent infection or spread of the virus, so vaccine-induced herd immunity can never be achieved.

The shots destroy immune function, making people more prone to all types of infections and chronic diseases, which in turn puts pressure on the health care system, raises disability rates and excess mortality, and lowers life expectancy. On top of all that, there's evidence suggesting the shots have adverse effects on fertility, which could potentially result in a population collapse.

Evidence mRNA Jabs Cause Fertility Problems

By December 2021, at which time the COVID jabs had only been out for one year, reports of surges in menstrual changes and stillbirths were already proliferating. And, while health officials were, and still are, adamant that the COVID shot is safe for pregnant women, the data tell a very different story.

The study¹¹ most widely used to support the U.S. recommendation for pregnant women to get injected was sponsored by the Centers for Disease Control and Prevention and published in The New England Journal of Medicine (NEJM) in April 2021. According to this study, the miscarriage rate among COVID jab recipients was 13.9%.

However, there was a MAJOR mistake made in this study, which was highlighted in a rapid communication¹² from the Institute for Pure and Applied Knowledge (IPAK). The authors are Aleisha Brock, Ph.D. of New Zealand, and Simon Thornley, Ph.D., a senior lecturer in the section of epidemiology and biostatistics at the University of Auckland.

They explained that the NEJM study "presents falsely reassuring statistics related to the risk of spontaneous abortion in early pregnancy, since the majority of women in the calculation were exposed to the mRNA product after the outcome period was defined (20 weeks' gestation)."¹³

When the risk of spontaneous abortion (miscarriage) was recalculated based on the cohort that was injected prior to 20 weeks' gestation, the incidence of miscarriage was seven to eight times higher than the original study indicated, with a cumulative incidence of miscarriage ranging from 81.9% to 91.2%!

What's more, 12.6% women who received the jab in the third trimester reported Grade 3 adverse events, which are severe or medically significant but not immediately lifethreatening.

Another 8% also reported a fever of 38 degrees C (100.4 degrees F), which can lead to miscarriage or premature labor. Another problem with the NEJM study is that follow-up only continued for 28 days after birth, meaning the long-term effects of prenatal exposure to babies is still unknown.

A Pfizer-BioNTech rat study also showed the injection more than doubled the incidence of preimplantation loss. Birth defects, specifically mouth/jaw malformations, gastroschisis (a birth defect of the abdominal wall) and abnormalities in the right-sided aortic arch and cervical vertebrae, were also observed.¹⁵

Transhumanist Cabal Intend to Change Humanity

It's become quite clear that the technocratic, transhumanist cabal that it trying to seize worldwide control is aggressively trying to genetically alter humanity. But to what end? Considering all the negative effects we're seeing in adults, just two years in, what will happen to the infants and children who have been jabbed over the next decade or two? Especially if they start getting mRNA boosters every year?

Transhumanism is "sold" as the way of the future — a future in which everyone is in perfect health and can live as long as they want. We already see how the COVID shots

are advertised as a simple "software update" for your immune system. The idea is that, eventually, any health issue will be solved this way.

The problem with this utopia is manifold, however. First of all, considering how disastrous this first mRNA injection is, it seems clear the reengineering of an already perfect biological system isn't as easy as they make it out to be, and I for one doubt they'll ever perfect it.

Secondly, while they say this transhumanist utopia is for everyone, it's absolutely not. Do you really believe they want 8 billion people to be in perfect health and live for hundreds of years?

Perfect health means perfect reproductive capacity, so the number of offspring would be staggering. Clearly, they don't want this, seeing how these same individuals are already complaining that the world is overpopulated. So, perfect health for everyone is a pipedream.

Extreme life extension for the masses also isn't in the cards. Already, they want people to die as close to retirement age as possible, to minimize payouts. Do you really think they'd be willing to pay billions of people to spend 100 years in retirement?

Even if the retirement age was pushed way back to, say, 150, and the average life span is 175, who's going to employ all these people? Remember, robots and artificial intelligence are already slated to take over most jobs, making most humans obsolete. There's simply no incentive to extend the health span and life span of billions of people.

No, the transhumanist utopia is intended to be reserved for a select few, and this is something to keep in mind as they continue these genetic experiments on humanity. They're not for our benefit.

What Are They Turning Us Into?

In closing, here's a snippet from a November 22, 2022, Truth Talk article, in which blogger Katrina Wicks ponders the reasons behind the transhumanist push:16

"They make no secret of it, it's not some wild conspiracy theory and is in fact being implemented in front of us and around us. Changing humans from what we are, into something else. Augmented humans seem to be on the horizon, as well as disrupted, corrupted and spliced humans too ...

'The Island of Dr. Moreau' ... by H.G. Wells ... highlights an obsession with making animals more human through 'medical intervention' ... I wonder if they are trying to do the opposite ... to make humans more animal like? ...

A certain international organization seems to have a nominated mascot who is the mouthpiece of how they want us to be bio-mechanical beings essentially, being constantly monitored, tested, observed and upgraded. Weird huh? Yet they gleefully put these plans forward and explain how and when. Just not really covering the why, or at least the real reasons for it.

But you can make up your own mind on what their purpose really is ... what is out there for everyone to see is that they do want control.

Of your daily activities, thoughts, fears, aspirations ... and generally of your future. So that is where you do get to take an active role, unless you already consider your life forfeit and have already accepted their new regime and landscape. But if you do not ... and you have chosen to live, then now is the time."

Sources and References

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