

Dr. Byram Bridle shares a very important information:

“We made a big mistake”

You can hear the entire article here:

<https://wholeheartedmedia.ca/did-you-get-the-jab-or-know-someone-who-is-please-listen-to-this-first/>

Dr. Bridle is a viral immunologist, currently an associate professor of virology and immunology at the University of Guelph in Ontario, Canada. He leads research teams, studying the natural power of a patient's immune system to eliminate their own cancer cells. His teams also study host responses to viruses and other inflammatory stimuli. He also teaches students in the Doctor of Veterinary Medicine, graduate and undergraduate programs, at Guelph.

Dr. Bridle is voicing his concerns, from a recently released study, outlining why complications and severe side-effects are occurring after taking the C-19 vaccine(s). He states that ***he has all the peer-reviewed data in hand, to back up everything he is saying, along with other internationally recognized expert colleagues.***

This is cutting edge science. There's a couple of key pieces of scientific information that have become evident. Let me assure you that everything that I'm stating here right now is completely backed up by peer reviewed scientific publications and well-known and well respected scientific journals. I have all of this information in hand.

What has been discovered by the scientific community is that the spike protein on its own is almost entirely responsible for the damage to the cardiovascular system if it gets into the blood circulation. Indeed, if you inject the purified spike protein into the blood of research animals, they get all kinds of damage, the cardiovascular system, and it can cross the blood brain barrier and cause damage to the brain. Now, at first glance, that doesn't seem too concerning because we're injecting these vaccines into the shoulder muscle. The assumption until now has been that these vaccines behave like all of our traditional vaccines, that they don't go anywhere other than the injection site. So they stay in our shoulder. Some of the protein will go to the local draining lymph node in order to activate the immune system.

However, this is where the cutting edge science has come in, and this is where it gets scary. Through a request for information from the Japanese regulatory agency, myself and several international collaborators have been able to get access to what's called a bio distribution study. It's the first time ever that scientists have been privileged to seeing where these messenger RNA vaccines go after vaccination. In other words, is it a safe assumption that it stays in the shoulder muscle? **The short answer is absolutely not.** It's very disconcerting.

The spike protein gets into the blood, circulates through the blood of individuals over several days post vaccination. Once it gets into the blood, it accumulates in a number of tissues, such as the spleen, the bone marrow, the liver, the adrenal glands. One that's of particular concern for me is it accumulates at quite high concentrations in the ovaries.

The spike protein, when combined with the receptors that are on our platelets and the cells that line our blood vessels, it can do one or two things. It can cause platelets to clump and

that can lead to clotting. That's exactly why we've been seeing clotting disorders associated with these vaccines. It can also lead to bleeding. And of course, the heart's involved, a key part of the cardiovascular system. That's why we're seeing heart problems. It can also cross the blood brain barrier and cause neurological damage. That's why also in the fatal cases of blood clots, many times it's seen in the brain.

They have also found that the messenger RNA vaccines actually get transferred through the breast milk. So they are delivering the vaccine vector itself into infants that are breastfeeding. As the spike protein gets into circulation, any proteins in the blood will get concentrated in breast milk. Looking into the adverse event data base in the United States, we have found evidence of suckling infants experiencing bleeding disorders in the gastrointestinal tract.

In short, the conclusion is we made a big mistake. We didn't realize it until now. We thought the spike protein was a great target antigen. We never knew the spike protein itself was a toxin and was a pathogenic protein. So by vaccinating people, we are inadvertently inoculating them with a toxin.

I have many other legitimate questions about the long term safety, therefore, of this vaccine, for example, with it accumulating in the ovaries. One of my questions is, will we be rendering young people infertile?