



VACCINE

INJURY TREATMENT

GUIDE

Your Roadmap to Recovery

By
Elizabeth Lee Vliet, M.D.
Preventive and Climacteric Medicine

and
Nicole Landers, RN, BSN, CCM,
Legal Nurse Consultant

with Medical Consultant: **Lt. Col. (Ret.)**
Peter Constantine Chambers, D.O.





VACCINE INJURY TREATMENT GUIDE: Your Road Map to Recovery

Elizabeth Lee Vliet, M.D., M.Ed.

Preventive and Climacteric Medicine *Vive! Life Center*
Founding Director and President/CEO, Truth for Health Foundation
Co-Author, COVID Early Home Treatment Guide with Dr. Peter McCullough
Association of American Physicians and Surgeons, past Board of Directors,
and current member, AAPS Editorial Writing Team
Creator and Host, Truth for Health...*The Rest of the Story* Radio Show

Nicole Landers, RN, BSN, CCM, LNC

Director, Covid Care Strategy Team, *Truth for Health Foundation*
Legal Nurse Consultant, Certified Community Care Nurse Manager

with Medical Consultant:

Lt. Col. (US Army Ret.) Peter Constantine Chambers, D.O.

Former Green Beret Special Forces Flight Surgeon and combat physician,
Military Advisory Council, Special Operations Advisor and Co-Chair Military
Vaccine-Injury Task Force, *Truth for Health Foundation*, Wounded Warrior
Combat Veteran

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



Your “Road Map” for Using This Guide

Step 1:

Review the experimental COVID shots, how they work, risk issues and safety updates now that we have more data on the outcomes since the COVID shots were released to the public. Go to **FACT SHEET 1**.

Step 2:

Before you take any experimental gene therapy COVID shots and boosters, our expert physicians and scientists suggest you **read our Patient Guide FACT SHEETS 2-5** to make an informed decision on effective treatment options for vaccine-induced injury.

Step 3:

If you have already taken the COVID shot, and do not have any identified adverse effects, we suggest focus on GENERAL PREVENTION STRATEGIES. Go to **FACT SHEET 3**.

Step 4:

If you have taken the COVID shot(s) and boosters and are experiencing puzzling adverse health changes, or have experienced serious side effects, fill **out** our **VACCINE INJURY REPORT** on our website. Then consult our **VACCINE INJURY TREATMENT** options in **FACT SHEET 2 and 3** for symptoms, immediate home care steps, and prescription medication options.

Then go to **FACT SHEET 4** assess your immediate options to start treatment at home. If your doctor does not treat vaccine injuries, check the resources on Truth for Health Foundation for physician resources in APPENDIX.

Step 5:

If you are at high risk based on your age, medical conditions, or occupation, we suggest Vaccine-Injury testing and medication treatment options. See **FACT SHEET 2**.



VACCINE INJURY TREATMENT GUIDE: Your Road Map to Recovery

e-Booklet Table of Contents

YOUR ROAD MAP To Using This Guide

INTRODUCTION:

FACT SHEET 1: Experimental COVID Vaccines: Update on Safety

FACT SHEET 2: Diagnostic Lab and Imaging Tests for Evaluation of Injury Following COVID Shots

FACT SHEET 3: Prevention and Treatment Nutraceutical Options

FACT SHEET 4: Prescription Treatment Options For Vaccine Injury

FACT SHEET 5: Threats to Pregnancy, Fertility and Endocrine Health

APPENDIX: Medical, Legal and Advocacy Resources

Disclosures: Physicians contributing to this guide for patients are actively treating COVID illness and vaccine-injured patients based on the best available medical evidence, and are focused on early, home-based delivery of medical treatment options unless critical care in hospital is determined to be urgently needed. Contributors to this guide have no financial ties with any pharmaceutical company or product suggested in the treatment algorithms. All contributors have volunteered their time and expertise as a community service in this pandemic emergency to help inform patients of their options for research-based, peer-reviewed, safe treatments. They have received no remuneration. The opinions expressed in this guide are those of the physician contributors and not those of their institutions listed.



INTRODUCTION

Our *Patient Guide to COVID Vaccine Injury Treatment* is built on the rapidly accumulating peer-reviewed medical research and written by practicing physicians with decades of experience treating patients with all kinds of illnesses.

See our “Road Map” to using this Guide to help you with the symptoms and complications of the shot.

Vaccines for RNA viruses are notoriously challenging and difficult to develop. We still, after all these years since AIDS emerged in the 1980s, do not have a vaccine for the AIDS virus, or the SARS-1 coronavirus that emerged in 2002-2003, and both are RNA viruses. Several attempts have been made to create vaccines for coronavirus and other respiratory viruses but none of the vaccines have survived the testing phases.

The vaccine trials for SARS-1 from 2003, for example, were shut down because the immunized animals developed severe autoimmune hypersensitivity reactions that caused death when animals were exposed to the natural virus after getting the vaccine.

The most *crucial* consideration before approving a vaccine for human use is to make sure that the vaccine is safe and effective. Developing safe and controlled infection models for humans normally takes many years of phased testing in the lab and then in humans. Many physicians and scientists have been concerned that vaccine manufacturers, with government support, sped up this process in ways that are not allowing adequate time for the usual phased testing leading up to human clinical trials. **There were many groups of people who were *excluded* from the clinical trials for whom we have NO safety data.**

The experimental COVID shots were rapidly rolled out to the public without the customary 2-7 years of animal and clinical human trials, and with only two months of safety data. In addition, we have recently learned that Pfizer and the FDA suppressed trial data from the public identifying over 1,200 different adverse effects which occurred amongst the clinical trial participants. The FDA had requested that this Pfizer data be withheld from the public for the next 75 years...a stunning reversal of all normal procedures for prompt release of clinical trial data for independent review and analysis,



Following a Texas federal court ruling, this data was release to the public on March 1, 2022. These adverse effects Pfizer accumulated in the clinical trial are being born out in clinical practice worldwide as physicians are seeing skyrocketing numbers of patients with these problems.

See www.OpenVAERS.com

Safety and effectiveness are now in question worldwide with the rising numbers of vaccine-induced deaths and severe complications. Complications and adverse effects with the experimental COVID shots are primarily occurring because of **inflammation and blood clotting abnormalities**, resulting from uncontrolled spike protein production and lipid nanoparticle damage. Immune dysregulation is another critical source of damage from the COVID shots.

There is a hopeful message in all this: Many of the prescription medications we used to treat inflammation and blood clotting in COVID-19 illness syndrome are also effective for treating the adverse effects of the COVID shots. These medications were also approved decades ago in other countries and are in use worldwide, with impressive safety track records in many different ethnic groups and ages. If you use an older, well-established medicine that means you have more information on safety to help guide your decisions.

Recommendation: We encourage all patients with injuries from the COVID shots to seek comprehensive diagnostic evaluation with laboratory and imaging studies discussed in this guide, in consultation with your personal health professional. We suggest you to seek treatment under the supervision of a physician or licensed medical professional who is knowledgeable in the use of the approaches described in this guide.

As practicing physicians and health professionals, we have moral, ethical and fiduciary responsibilities to our patients. It is our duty to do our best to find plausible, medically sound, readily available existing safe medicines, supplements, dietary and other strategies to help patients suffering from severe effects of the COVID shots.

The good news is there are safe and effective early treatments for COVID illness already available if you get sick. There are treatments for the adverse effects of the COVID shots if you experience any of these.



BLOOD CLOT WARNING SIGNS:



- SUDDEN ONSET OF SHORTNESS OF BREATH
- UNEXPLAINED INCREASE IN FATIGUE
- SUDDEN CRAMPING OR PAIN NOT EASILY RELIEVED
- PAIN WHEN BREATHING
- FAST HEART RATE
- INCREASED EFFORT WHEN WALKING
- AREAS OF WARMTH TO THE SKIN
- LOCALIZED REDDENED AREAS TO THE SKIN

PROVIDED AS AN EDUCATIONAL RESOURCE BY TRUTH FOR HEALTH FOUNDATION CONSULT YOUR PERSONAL PHYSICIAN FOR MEDICAL ADVICE. WWW.TRUTHFORHEALTHFOUNDATION.ORG

Alarming “FIRSTS” with the COVID shots

Source: *Worse Than the Disease? Reviewing Some Possible Unintended Consequences of the mRNA Vaccines Against COVID-19*

UNPRECEDENTED!

Many aspects of Covid-19 and subsequent vaccine development are unprecedented for a vaccine deployed for use in the general population. Some of these includes the following:

1. First to use PEG (polyethylene glycol) in an injection
2. First coronavirus vaccine ever attempted in humans
3. First to use mRNA vaccine technology against an infectious agent
4. First time Moderna has brought any product to market
5. First to have public health officials telling those receiving the vaccination to expect an adverse reaction
6. First to be implemented publicly with nothing more than preliminary efficacy data, no long-term safety data
7. First vaccine to make no clear claims about reducing infections, transmissibility, or deaths
8. First injection of genetically modified polynucleotides in the general population



FACT SHEET 1: Do I need the “COVID SHOT” or Booster?

How Deadly is COVID-19? Globally, about 99.9%+ of individuals who contract COVID will have mild to moderate symptoms and recover, just like with the flu. Highest number of deaths are in nursing home facilities (0.62% of the population).

The chances of someone *under 50 years old* with symptoms dying from COVID-19 is 0.05%.

The chances of someone *under 18 years old* dying from COVID is near 0%. Those that do die are those with severe underlying medical conditions. SEVEN times more children die from the flu than COVID-19.

The vast majority of deaths from the SARS-CoV2 virus happen in those over 75, especially those with other medical conditions: obesity, diabetes, heart disease, lung and/or kidney disease. The majority have been those over 80 years old in nursing homes with an average of 2-3 other medical conditions.

The bottom line? This virus looks and acts very much like the flu, but with **one CAVEAT:**

Unlike seasonal influenza, COVID-19 illness can become a profoundly serious critical illness unpredictably, if treatment is delayed, for two primary reasons:

SARS-CoV-2 virus triggers TWO responses in the body much worse than seasonal flu:

- (1) an ***exaggerated inflammatory response*** causing damage to critical organs, and
- (2) an ***exaggerated blood-clotting response*** leading to multiple blood clots in the lungs, brain, heart, kidneys, GI tract and other organs. Doctors have even found blood clots in large arteries like the aorta.

What are the possible benefits and risks of the COVID shots?

I. BE INFORMED! There is now sufficient data and reporting to conclude that the experimental COVID shots are NOT SAFE and can result in adverse effects, disability and death. Here is the [Pfizer data released under court order](#).

Was there any BENEFIT of the COVID shots in the drug companies’ clinical trial studies?

- No evidence of reduced spread to others.
- No evidence of reduced hospitalizations or reduced deaths.
- Evidence that taking the COVID shot increased the risk of death to trial participants by 50%.
- Evidence that taking the COVID shot *impairs your immune response*, called the Vaccine-induced Acquired Immune Deficiency Syndrome. This makes you *more susceptible* to a variety of other viral, bacterial, and fungal infections, as well as increased risk of cancer (new or recurrence of existing).

What groups of people are at the greatest RISKS of adverse effects with taking the COVID shot?

- People who had COVID or suspected COVID (with positive antibodies for COVID) are already immune and risks of serious adverse reactions are much higher.
- People with past allergic or other adverse reactions to vaccines.



Groups of people are at the greatest RISKS of adverse effects with taking the COVID shot, continued:

- **People with allergies to PEG (polyethylene glycol).**
 - *mRNA vaccines use PEG to stabilize lipid nanoparticles. About 70% of people have antibodies to PEG, which can cause a life-threatening reaction (anaphylaxis)*
- **ALL CHILDREN**
- **ALL women and men of childbearing age**
- **People with chronic cardiac, respiratory, and endocrine conditions**
- **People with a history of autoimmune disorders**
- **People at risk for, or who have a history of cancer**

What are the reported SIDE EFFECTS, and COMPLICATIONS? (Go to <https://openvaers.com/covid-data>)

There are now over 1,800,000 adverse events reported in VAERS related to uptake of the COVID shot, including over 25,000 deaths and over 140,000 hospitalizations

- **General symptoms such as fever, headaches, fatigue, weakness, muscle pain, swollen lymph nodes**
- **Nervous system effects: changes in sensation, Bell's Palsy, imbalance with walking, severe headaches, brain lesions, micro blood clots in the brain, changes in thinking and memory and seizures, Lewey body dementia, rapidly progressive dementia (Jacob Creutzfeld), flareup of multiple sclerosis and other neurodegenerative diseases such as ALS, Parkinson's**
- **Eyes: blood clots, vision loss/blindness, blurred vision, acuity loss, glaucoma, macular degeneration**
- **Ears: ringing in the ears (tinnitus), loss of hearing, dizziness/vertigo, loss of balance**
- **Cardiovascular system effects such as racing heart, chest pain, heart attacks, heart failure, myocarditis and pericarditis (especially in young people and athletes), low and abnormal red and white blood cells, low platelets, bleeding disorders, abnormal clotting**
- **Respiratory system effects such as changes in the lung tissue, asthmatic changes, shortness of breath, difficulty breathing with activity and recurring infections(pneumonia)**
- **Gastric system effects such a gastric bleeding, irritable bowel syndrome, gastric ulcers**
- **Immune deficiency syndrome leading to recurrent infections with atypical organisms or dormant viruses like Shingles, impaired cancer surveillance functions leading to increase in new and aggressive cancers, recurrence of cancers previously in remission.**
- **Autoimmune disorders worsening: Crohn's disease, pernicious anemia, autoimmune thyroiditis, rheumatoid arthritis, Lupus, and others**
- **Skin changes: petechiae, increase in bruising, unusual rashes, shingles outbreaks, painful hives, skin cancers, wounds that do not heal**
- **Reproductive system effects such as**
 - **Women: miscarriages; deaths of mothers, deaths of nursing babies after mother vaccinated, abnormal bleeding, menstrual problems**
 - **Men: testicular pain/inflammation**



II. TESTING FOR IMMUNITY BEFORE GETTING ANY COVID "SHOT:"

ALL of the blood tests LISTED IN FACT SHEET 2 (next page), are available from clinical labs across the United States. You can also go on-line yourself without a prescription to purchase the test to check your humoral immunity for COVID (SARS-COV-2) at www.T-Detect.com

It is crucial to check for antibodies to SARS-CoV-2 prior to getting the COVID shot, or prior to getting a "booster." Those who have already been infected with SARS-Co-V-2 and recovered are at much higher risk of serious adverse effects, and even death, if they get the COVID shot and already have positive antibodies to the nucleocapsid and spike protein. Those who have already been vaccinated *and still have markedly elevated antibodies to the spike protein*, are at much higher risk for blood clots, heart, lung, and brain damage with the booster shots. If the antibodies to the spike protein are still high, then a booster shot isn't even needed. So we encourage people who have had the shot to get tested prior to getting boosters.

III. FACTS to consider before you take experimental genetic vaccines, or "jab," still in clinical trials.

Genetic shots are either mRNA (Pfizer, Moderna) or adenoviral DNA (AstraZeneca, J&J). These are not like vaccines you have had before. NOT FDA-approved, only being used on Emergency Use Authorization.

- Normal vaccines inject an inactive virus or protein in your arm and your body develops immunity.
- The genetic COVID-19 vaccines trick your body with *mRNA* (Pfizer, Moderna) or *adenoviral DNA* (J&J, AstraZeneca) into making the spike-protein in the organs of your body in an uncontrolled way in order to provoke an antibody reaction. It is this generation of spike protein that leads to inflammation and thrombosis (blood clots) in susceptible people in unpredictable ways.
- Evidence shows genetic material and the spike proteins generated by the vaccine penetrate ovaries, brain, spinal cord, nervous system, heart, lungs, intestines, kidneys, and cross the placenta in pregnant women. But the degree of distribution around the body *has not been studied, which urgently needs to be done.*
- Toxicologists argue that observed and potential toxicities are a "class effect" with all 4 gene-based products.
- New in vitro evidence demonstrates the Pfizer vaccine accumulates in liver cells within 30 minutes of injection and has the capacity to alter DNA which can then permanently alter the human genome
- **NO ONE KNOWS ALL** the risks and side effects, or how long the adverse effects may last. Experts predict that exposure to the virus again may trigger *worse* illness than if you were never vaccinated.

IV. IF YOU HAVE HAD "THE SHOT" and ARE EXPERIENCING SYMPTOMS:

We suggest you fill out the [Citizens Vaccine Injury Report](https://www.truthforhealth.org/vaccine-injury-report/) on our website here:

<https://www.truthforhealth.org/vaccine-injury-report/>

This will give you an assessment of symptoms by body systems so it will help you plan your diagnostic evaluation and consider treatment options available to pursue.



**TRUTH FOR HEALTH
FOUNDATION**

A 501(c)(3) public charity incorporated in Arizona, USA

FACT SHEET 2: Diagnostic Lab Tests for Evaluation of Injury Following COVID Shots

This list is provided as an educational resource for our readers and supporters. This is not an exhaustive list, but it reflects the integrated evaluation I have done for my medical patients for many years, with added inflammatory and other markers that I have found particularly important to evaluate my patients who have developed new medical conditions after the experimental COVID shots.

Inflammation, micro-blood clotting, and susceptibility to atypical viral and bacterial infections are common after the COVID shots, so I have recommended to my patients that we check these (and other) markers to assess risk and decide treatment. I have organized them into the categories related to types of medical problems I am seeing in my independent medical practice. I have provided my list to help people know that there ARE tests you can request to help answer your questions and decide what treatments may help relieve your symptoms.

Each of you reading this will need to discuss with your own health professionals what is appropriate for you based on medical evaluation of your particular symptoms. Join our discussion group on Vaccine Injury on our Clout Hub channel: @TruthForHealth

~Elizabeth Lee Vliet, MD, President and CEO Truth for Health Foundation

METABOLIC TESTS:

Comprehensive Metabolic Profile	Cholesterol profile
Glycosylated hemoglobin	Fasting insulin
CBC with differential	Vitamin B12, Folate
Vitamin B6 and B1	25-OH Vitamin D
Magnesium (serum and RBC)	Zinc

ENDOCRINE TESTS - Draw in AM prior to any meds to assess damage to endocrine system

**FSH, LH, Estradiol, Progesterone, Testosterone (free and total), DHEA-S, DHEA TSH (hs), Free T3 and Free T4, Anti-microsomal, Anti-thyroglobulin AB
8 AM Cortisol, total and free, Prolactin, Parathyroid Hormone, Amylase, Lipase
PSA, CA125, CA 19-9, CEA, CA 15-9**

INFLAMMATORY MARKERS and SPECIALTY TESTS:

CRP-hs	Fibrinogen	D-Dimer	Troponin-1
Ferritin	Cytokine Panel	IL-6, IL-10	Myeloperoxidase (MPO)
24-hour urine for measure of: catecholamines, metanephrines, VMA			

To assess new infections:

**SARS-CoV-2 spike protein antibodies
SARS-CoV-2 Nucleocapsid Antibodies
Mycoplasma pneumoniae, EBV titers, CMV titers, RSV titers
HIV and other viral titers as indicated by presenting symptoms.**



**TRUTH FOR HEALTH
FOUNDATION**

A 501(c)(3) public charity incorporated in Arizona, USA

FACT SHEET 2: Specialty Diagnostic Imaging Tests for Evaluation of Injury Following COVID Shots:

This list is provided as an educational resource for our readers and supporters. This is not an exhaustive list, but it reflects the specialty imaging studies I have researched in consultation with radiology experts. I have found these tests critically important to evaluate my medical patients with new onset medical problems after the experimental COVID shots and suspected of being related to vaccine-induced inflammation and abnormal blood clotting. There are other specialty imaging studies that can be ordered based on each patient’s cluster of symptoms and signs. Readers will need to discuss with their health professionals what is appropriate based on individual medical evaluation.

~Elizabeth Lee Vliet, MD, President and CEO Truth for Health Foundation

<p><input type="checkbox"/> CT Temporal Bone, high-resolution Clinical symptoms: dizziness, vertigo, impaired balance, suspected injury to ossicles</p> <p>Need detailed assessment of whether ossicles are intact. With contrast at discretion of neuroradiologist</p>
<p><input type="checkbox"/> 3 Tesla MRI brain, with and without contrast, WITH Internal Auditory Canal (IAC) Protocol and attention to posterior fossa structures</p> <p>Clinical Symptoms: dizziness, vertigo, impaired balance, impaired cognition, abnormal sensation (numbness, tingling), other: _____</p>
<p><input type="checkbox"/> Cardiac MRI for morphology and function, with late-phase gadolinium enhancement to assess for myocarditis, pericarditis</p> <p>Clinical symptoms: chest pain, palpitations, arrhythmias</p>
<p><input type="checkbox"/> CT Angiogram of Lung with arterial and venous phases to evaluate for peripheral microthrombi and/or larger pulmonary emboli</p> <p>Clinical symptoms: shortness of breath, dyspnea on exertion</p>

Other specialty studies can be ordered to assess gastrointestinal pain syndromes, suspected abdominal and/or pelvic blood clots, ovarian or testicular pain syndromes following the experimental COVID shots.



FACT SHEET 3: Prevention and Treatment Options – Nutraceuticals, Foods, Supplements

This FACT SHEET is designed to be a rapid action plan checklist of steps you can take on your own, without a physician’s prescription, to create your Health Action Plan. For more details on the options in our master list, please refer to the references section, and the more detailed Fact Sheets on these areas we are adding to our resources regularly. This master list gives you items to create your shopping list to start adding to your home prevention and treatment kit.

FIVE MAIN Goals for both prevention and treatment of COVID vaccine-induced injury (these also apply to COVID illness, and to radiation-induce illness):

- REDUCE SYSTEMIC INFLAMMATION
- REDUCE RISK OF BLOOD CLOTS
- BOOST IMMUNE RESPONSE
- IMPROVE CELLULAR OXYGENATION
- NEUROPROTECTION

I. REDUCE SYSTEMIC INFLAMMATION

A. Supplement and Nutraceutical Options

- Vitamin D3 2000-4000 IU daily *unless deficient and doses will need to be increased*
- Vitamin C 1000-2000 mg twice a day up to three times a day
- Vitamin E
- Fish Oils
- Turmeric
- Resveratrol
- Monolaurin
- Glucosamine
- Blackseed extract (N. Sativa)
- Chondroitin sulfate - body needs this to build and fix DNA damage
- Green tea (EGCG) and green tea extract 500 mg/day
- Quercetin 500 mg 2-3 times a day
- Glutathione, and/or N-acetyl cysteine (NAC) 600 mg - 1200 mg daily + Glycine 500 mg
- Resveratrol 500 mg
- Beta carotene (take with fat to improve absorption)
- Curcumin 500 mg with black pepper (piperine)



- Ginger <2 grams/day ~1600 mg
- Bromelain 500 mg
- Glycine
- Sulfur (found in MSM)
- Melatonin
- Proper balance of Omega 3 Fatty acids (FA) and Omega 6 FA
- Spirulina <8 grams
- Fiber with fructooligosaccharides (FOS)
- Whole food-source multivitamin such a Balance of Nature.
- Probiotics – but avoid ones that are solely Lactobacillus family as over time they alter GI pH in negative direction. Consider a mixed probiotics that has several different organisms, such as *SugarShift*, available at www.BiotiQuest.com

B. ANTI-INFLAMMATORY FOODS as Medicine - Dietary Approaches:

- **Increase water intake.** Adequate *hydration* is critical to your health and normal body function. *Water* is a natural diuretic, and detoxifier, and helps maintain blood volume for circulating nutrients and oxygenation, removal of wastes. You are *adequately hydrated* if your urine is the color of *pale straw*. Darker yellow urine means inadequate water intake. Colorless urine means too much water intake and leads to dilutional low sodium and other electrolyte imbalances.
- **Eat a whole food plant-based diet**, limiting processed foods, emphasizing “clean” foods, lean, non-farm raised protein sources predominantly from bean, legumes, raw nuts and seeds and fish.
- **Increase whole grains** such as barley, rye, oats and lentils, and non-gluten grains
- **Increase cruciferous vegetables**, such as broccoli, Brussel sprouts, cabbage, kale, cauliflower. These are rich in folate, vit C, E and K, and fiber. They also contain glucosinolates that protect cells from DNA damage, inactivate carcinogens, and have anti-bacterial and anti-viral properties.
- **Increase intake of fresh fruits and berries** including apples, bananas, grapefruit, cherries, strawberries, blackberries, and raspberries
- **Eat more in the [ALLIUM](#) family of vegetables:** garlic, onions, leeks, chives, scallions, and shallots. These are antioxidants, with anti-viral and anti-bacterial properties. They boost the immune system and can help reduce the risks of blood clotting.
- **Season foods with anti-inflammatory spices:** turmeric, ginger, cinnamon, fennel, fenugreek, coriander, clove allspice, mustard nutmeg, black pepper, garlic and onion powder, cumin, no salt spice blends
- **Use healthy fats:** olive oil and avocado oil in moderation. Eliminate seed oils and polyunsaturated fats from your diet, including vegetable oils
- **Eliminate artificial additives:** sweeteners, flavorings, MSG, dyes, preservatives, sodium and added sugars. These ALL add an inflammatory load to the body.



II. REDUCE RISK OF BLOOD CLOTS

A. Supplement and Nutraceutical Options

- Vitamins B, C, and E
- Fish oils (Do not take with anti-clotting drugs)
- Co-Q-10
- Ginkgo biloba
- Bromelain
- Probiotics – Avoid ones that are solely Lactobacillus family as over time they alter GI pH in negative direction. Consider a mixed probiotics that has several different organisms, such as *SugarShift*, available at www.BiotiQuest.com

B. ANTI-COAGULANT FOODS as Medicine - Dietary Approaches:

- Whole grains: Oats slow cooked or oat groats, whole wheat or wheat berries, rye, barley, brown rice, and quinoa
- Fresh fruits including apples, cherries, prunes, pears, citrus
- Raw nuts: almonds, pistachios, cashews, walnuts, peanuts
- Seasonings and Alliums including garlic, turmeric, cinnamon, cayenne pepper
- Legumes, beans, and lentils
- sunflower seeds
- lean proteins such as skinless white chicken, white-fleshed fish, Greek yogurt, low fat cottage cheese
- Extra virgin olive oil
- Red Wine

III. BOOST IMMUNE SYSTEM

A. Supplement and Nutraceutical Supports:

- Vitamin D3 2000-4000 IU daily, unless deficient and doses will need to be increased
- Vitamin C 1000-2000 mg twice a day up to three times a day
- Vitamin B12 and B9
- Zinc
- Resveratrol
- Cocoa Extract
- Elderberry Extract
- Luteolin
- Monolaurin
- Melatonin



- Ginkgo biloba
- Quercetin
- N-acetyl cysteine (NAC) plus glycine
- Curcumin
- Probiotics – but avoid ones that are solely Lactobacillus family as over time they alter GI pH in negative direction. Consider a mixed probiotics that has several different organisms, such as *SugarShift*, available at www.BiotiQuest.com

B. IMMUNE-BOOSTING FOODS as Medicine - Dietary Approaches:

- Kefir (fermented milk, excellent source of healthy bacteria to improve gut microbiome). Avoid commercial products high in sugars. Easy to make your own at home, with “starter” available in health food stores, on-line vitamin, and nutritional supplement sources.
- Yogurt, without added sugars, and with live healthy bacteria cultures. Greek-style yogurt has both live cultures *and* higher protein content.
- Fresh fruits and vegetables including citrus fruits, apples, kiwi, bananas, berries, tomatoes, leafy and dark green vegetables, Brussel sprouts, cabbage, radishes, arugula, cauliflower, and bell peppers
- black currants and black currant tea
- Whole grains: Oats slow cooked or oat groats, whole wheat or wheat berries, rye, barley, brown rice, and quinoa
- Raw nuts: almonds, pistachios, cashews, walnuts, peanuts
- Seeds: raw sunflower, sesame, hemp, pumpkin, chia
- Spices: ginger, turmeric, rosemary, fenugreek, clove, cinnamon, nutmeg, black pepper, cumin, fennel
- Legumes, beans, and lentils
- Mushrooms, and/or immune-boost Mushroom Complex powder (Lion's Mane, Turkey Tail, Reishi, Maitake, Chaga etc.)
- Green tea and anise tea
- Allium family of vegetables: onions and garlic, chives, scallions
- Wild caught seafood and salmon
- Dark chocolate
- Organic extra virgin olive oil (cold first pressed)
- Bone broth
- Raw local honey



IV. IMPROVE CELLULAR OXYGENATION

The goal is to suppress and repair the chain reaction triggered by overproduction of oxygen free radicals or *reactive stress species* (ROS) and optimize the body's antioxidant defense mechanisms.

A. Supplement and Nutraceutical Supports:

- N-acetyl cysteine (NAC)
- Glutathione
- Vitamin E
- Black seed oil (N. Sativa seeds, preferably Egyptian). Rich in thymoquinone: eliminates superoxides, is neuroprotective, antioxidant, anti-inflammatory, anti-bacterial, anti-viral

B. ANTIOXIDANT FOODS as Medicine - Dietary Approaches:

- Fresh fruits and green leafy vegetables including grapes, citrus, pomegranate, spinach and kale
- Berries
- Seasonings and Spices including turmeric, ginger, cinnamon, and Cayenne pepper
- ALLIUM family of vegetables: garlic, onions, leeks, and beetroot
- Fatty fish including salmon, trout, and herring
- Nuts
- Chocolate

V. NEUROPROTECTION

A. A. Supplement and Nutraceutical Supports:

- Alpha Lipoic Acid
- Grapeseed Extract
- Coenzyme Q10 (CoQ10)
- Sulforaphane
- Selenium
- N-acetylcysteine (NAC)
- Carotenoids: lycopene, lutein, astaxanthin and zeaxanthin or a mixed carotenoid
- Vit A, C and E
- Resveratrol
- Ashwagandha
- Sulfur
- Zinc
- EGCG
- Curcumin
- Ginkgo biloba L.
- Turmeric/ curcumin



B. NEUROPROTECTIVE FOODS as Medicine - Dietary Approaches:

- Whole Grains: brown rice, barley, oatmeal, whole-grain breads and pasta
- Dairy: milk, yogurt, natural cheese (avoid non-processed cheese products)
- Fresh vegetables like asparagus, broccoli, and kale and other leafy greens vegetables
- Seasonings: ginger garlic turmeric cassia cinnamon cayenne pepper,
- Oils: grape seed extract olive oil
- Seafood: tuna, mackerel, salmon, herring, and sardines
- Nuts and Seeds: sunflower seeds, almonds, peanuts, raw Brazil nuts, and hazelnuts
- Dark orange fruits, apples, grapes, and pineapple
- Eggs
- Avocado
- Dark Chocolate
- Red wine
- Tomatoes
- Green tea
- Ginseng
- Rosemary
- Garlic

VI. CLEAN UP YOUR ENVIRONMENT

A. Food and Lifestyle

- Reduce Alcohol
- For the duration of symptoms STOP intake of all inflammatory animal products including all meats and dairy except grass fed, poultry, and eggs
- Limit added sugars including artificial sweeteners
- Choose whole foods and homemade foods over processed convenience foods or restaurants
- No smoking
- Increase daily physical activity
- Turn off negative news
- Reduce time on social media
- Scripture and Prayer daily
- Laughter and play – find ways to create more “laughter medicine” in your day
- Practice yoga, Tai Chi, Qi Gong, breathing exercises to improve relaxation, reduce stress, improve oxygenation, boost immune function
- Improve your social support – increase relaxing, fun times with family and friends to reduce stress and improve your well-being



B. Physical Environment

- INCREASE time outdoors in the sunshine – walking, gardening, relaxing outside
- Reduce 5G exposure – keep phones out of bedroom, turn off WiFi in home at night, etc.
- Reduce your use of synthetic chemicals and synthetic fragranced products in the home – clean with simple vinegar, bleach, alcohol our grandmothers used without all the extra chemicals that increase inflammation and add to vaccine injury

VII. Health and Resilience

- **Resilience** is the capacity to withstand adversity, bounce back, and recover from difficult life events and grow despite life's downturns and setbacks.
- Resilience allows us to live fully in this world: mind, body, and spirit, as well as in relationships and in our connections with the environment around us.
- Our capacity for *resilience*, which encompasses all aspects of health, is also an innate gift from our Creator to every man, woman and child. Investing into our relationship with God through His Son, Jesus Christ allows us to tap into the gift of resilience He has given to each of us. God has made this world with many tools and resources for our health and wellbeing. Some of these tools and resources are more commonly known, while others we must use our minds and dig deeper to fully understand and develop new skills for this world.
- 5 Days to Spiritual Vaccination: Become Immune to Future Worries, Past Wounds, and Find Peace Amidst Trials through Christ and the Christian Mystic Tradition. This is a wonderful, inspiring guide to overcoming the fear and panic we have experienced in the years of the pandemic. <https://interiorlife.app/tfh-spiritual-vaccination/>
- Resilience also means studying the ways that “PsyOps” and psychological tools are used to influence your thoughts, feelings, and decision-making. Check out the Powerpoint presentations on our website under Mind Strategies in the Health and Resilience section. The one by neuroscientist, Dr. Stephen Sammut, is particularly good and enlightening: *Neurobiological Basis of Crowd Behavior*.
- Learn more about ways to achieve resilience for mind, body and spirit health and well-being in our “Health and Resilience” Program at the link below: <https://www.truthforhealth.org/resilience/>



FACT SHEET 4: PRESCRIPTION TREATMENT OPTIONS for VACCINE-INDUCED INJURIES

Returning to Basic Medical Principles in our Treatment Approaches for COVID Shot Injury

- **Proper evaluation (see FACT SHEET 2) to identify risk factors prior to more serious injury**
- **Diagnosis of micro-blood clot risk early** reduces your risk of serious long-term damage or death from stroke, heart attack, pulmonary emboli, deep vein thrombosis, and other organ damage leading to hospitalizations and death.
- **Treating early** works best to reduce the risk of more serious or even permanent complications.
- **Treating the whole person** with prescription medicines, supplements, nutraceuticals, stress reduction, mind-body health and other strategies targeted to the specific problems triggered or aggravated by the COVID-19 shots has the best chance of success. There is no “one-size-fits-all” or “magic bullet” – it takes an integrated, comprehensive approach.
- **Overcoming fear with Faith and positive action to improve health.** Fear is destructive to physical, emotional and spiritual health as it robs us of peace and joy, the positive emotions that improve health and well-being. Fear leads to panic, which increases stress, and *suppresses our immune response, diminishes our ability to respond to stress, and leads to paralysis and more fear. Faith overcomes fear and helps lead to resilience and ability to respond to stress.*

UNDERSTAND THESE KEY POINTS ABOUT THE COVID SHOTS:

- The experimental COVID shots are **not** traditional vaccines. They fall in the FDA regulatory category of **gene-therapy agents**. The mRNA and DNA are carried into our cells and alter our body’s DNA to trigger production of the synthetic spike proteins and disrupt our normal immune system responses.
- This new technology, never used in vaccines before, triggers the body to make uncontrolled amounts of the *spike proteins* that led to unique reactions in the body not seen with traditional vaccines. These three reactions are primarily caused by the synthetic spike protein and by the *lipid nanoparticle coating* used to carry the mRNA or DNA into the body’s cells to alter our own DNA.
 - **An exaggerated inflammatory response**, causing damage to critical organs. In its most serious form, this is called *cytokine storm*.
 - **An exaggerated blood-clotting response**, leading to multiple blood clots (thrombi) in the lungs, brain, kidneys, intestines and other critical organs. These blood clots can occur in both veins *and arteries*, which is unusual and potentially life-threatening if not treated rapidly.
 - **Vaccine-induced Acquired Immune Deficiency Syndrome (VI-AIDS)**. This means you are more susceptible to all kinds of illness outbreaks - viral, bacterial and fungal, as well as new cancers and recurrence of existing cancers.



Doctors have to use a **combination** of prescription medicines and nutraceuticals to reduce and block the unique inflammation and blood clotting effects of the COVID shots that can lead to serious, *unpredictable and life-threatening adverse effects*.

Not everyone develops these severe reactions to the COVID shots but the problem for doctors is that we cannot predict *who* will develop critical problems and who will not, or how fast this may occur.

The use of prescription medications discussed in this guide should be considered clinically indicated, medically necessary, and appropriate “off-label” use of these products, many of which have been FDA-approved for a variety of medical conditions and have a long track record of safety. Physicians have *always* legally been able to use older medicines “off-label” for new uses based on medical judgement for individual patients.

I. Anti-inflammatory Approaches

- **Medicines to decrease inflammation**, such as *hydroxychloroquine, ivermectin, corticosteroids (nebulized budesonide, oral prednisone and others), montelukast, antihistamines, cyproheptadine, famotidine and others*. Several of these are also *immune modulators* and help to prevent the immune disruption and dysregulation that can be caused by the COVID shots.
- **Corticosteroids** can be nebulized or given as oral pills. Some patients benefit from both nebulized steroids and oral steroids.

II. Anti-Clotting Approaches:

- **Antiplatelet Therapy**: Full-strength (325 mg) aspirin if D-Dimer elevated. Lower dose Aspirin 81 mg once or twice a day for preventing platelet clumping leading to clots.
- **Anticoagulant Therapy**: Rx medications to prevent blood-clots that can cause pulmonary collapse, strokes, heart attacks, kidney shut-down, and death including Eliquis (Apixaban), Xarelto (Rivaroxaban), Pradaxa (Dabigatran), Lixiana (Edoxaban)



III. Neuroprotective Approaches:

There are different types of neuroprotective agents, some of which help reduce glutamate-induced excitotoxicity, while others that reduce oxidative stress. The most common cause of neurodegeneration is oxidative stress, therefore considering neuroprotective agents may be beneficial for long-term brain health and for reducing the complications of inflammation and oxidative stress caused by the COVID shots lipid nanoparticles and spike protein production in the brain, spinal cord, and nerves.

- **Medications:** Donepezil, Memantine, Clomethiazole, Caspase inhibitors, Anti Protein Aggregation Agents (such as Trehalose), bupropion (dopamine boosting), selegiline and other dopamine agonists, hydroxychloroquine, ivermectin
- **Mild hyperbaric oxygen therapy (mHBOT).** Resources and excellent research library available at these sites: <https://hyperbaricmedicinefoundation.org/>; <https://www.hyperbaricmedicineinternational.org/>; and The International Hyperbaric Medicine Foundation <https://www.theihmf.org/>
- **Lifestyle Approaches** to reduce stress responses also reduce inflammation and are neuroprotective: Prayer, Meditation, Biofeedback, Hypnotherapy, Yoga, Qi Gong, Tai Chi, cranial sacral therapy, osteopathic manipulation therapy (OMT)

For more information on safety of HCQ and other medicines in the algorithm, check the c19study.com website that summarizes more than 154 studies of HCQ-based treatment, which are particularly favorable when HCQ is used in the first few days of COVID-19 symptoms as recommended in the above algorithm. Patients should read the safety information in the medication package insert and patient guide before deciding on the risks and benefits of the medication. Ask questions of your physician for additional information/clarification. For further information, see [compendium of articles and studies on COVID-19](#).



FACT SHEET 5: Pregnancy, Fertility and Endocrine Threats

All of the currently available genetic COVID shots contain lipid nanoparticles (LNPs) coating the mRNA or DNA, that trick the body into making billions of spike proteins in an uncontrolled way that cause inflammation and blood clots throughout the body. The experimental gene therapy products, *unlike traditional vaccines*, were **designed** and have been **demonstrated** to:

- 1) Distribute lipid nanoparticles (coating for mRNA or DNA) to tissues throughout the body, far from the site of vaccination in the arm muscle (*See illustration at end of this FACT SHEET*).
- 2) Accumulate in tissues with high levels of ACE-2 receptors (ovaries, testes, lining of blood vessels, heart, lung, intestinal tract, brain). The coronavirus spike proteins bind to ACE-2 receptors to enter and infect our body cells.
- 3) Generate synthetic spike proteins in cells throughout your body. No one knows how long this occurs.
- 4) Stimulate your body to produce antibodies to the spike proteins (which is the immune response).

Lipid Nanoparticle Damage to Ovaries and Testicles

This graphic (from 2018) shows the many ways ovarian and testicular structure and function are harmed by the experimental gene therapy shots. Lipid nanoparticles cause enormous and potentially permanent damage to fertility, and widespread damage to overall health with loss of testosterone for men and estradiol for women.

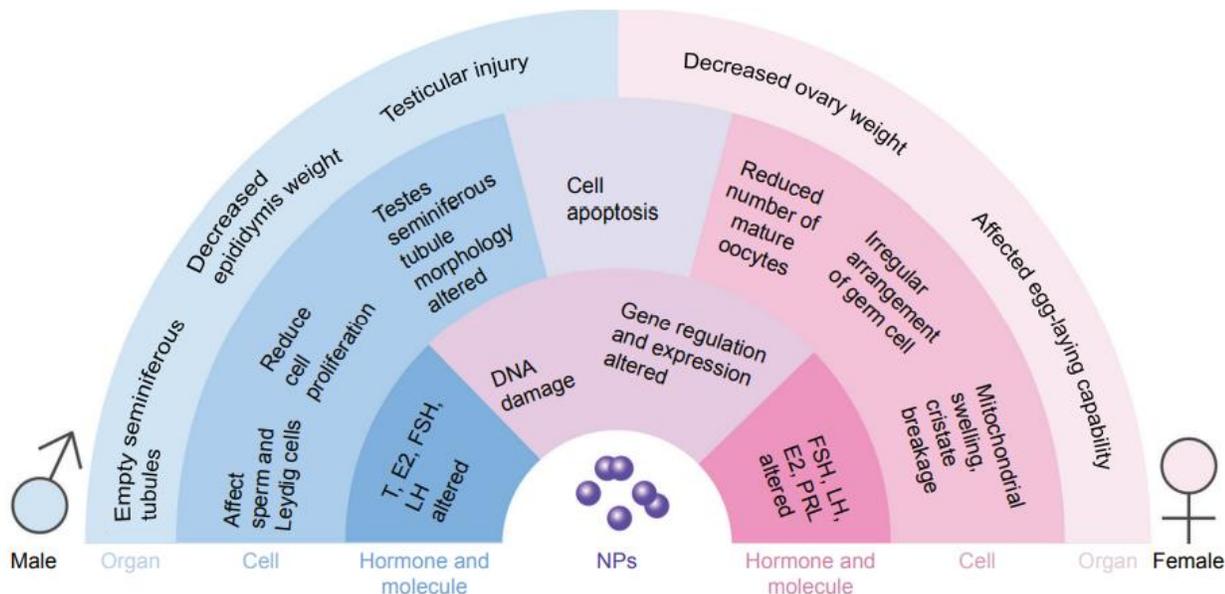


Figure 1 Adverse effect of NPs in the reproductive cell organs and molecules.

Abbreviations: E2, estradiol; FSH, follicle-stimulating hormone; LH, luteinizing hormone; NPs, nanoparticles; PRL, prolactin; T, testosterone.

Published in Int.J. Nanomedicine, 2018 by team of Chinese researchers (Wang R, 2018).

Fertility Risks: Female

- **Pharmaceutical researchers knew in 2012 - 9 years ago - that LNP concentration in the ovaries occurred in all animal species tested, and was a risk to female fertility.**



- Studies of the Pfizer vaccine from 2012 and 2020 show that in two different species of mammalian lab animals, the LNPs used in the COVID shots were distributed throughout many organs of the body and were **at least 20x greater in the ovaries** than in other organs of the body (Pfizer, 2021).
- Lipid nanoparticles are known to cause inflammation and damage to organs such as the ovary.
- LNPs also provide a vehicle to carry genetic material (mRNA, DNA, viral particles) across the placenta in pregnancy, which puts a developing baby at risk when a pregnant woman is vaccinated with one of the COVID shots.
- Syncytin-1 is a protein that is necessary for the functioning of the placenta – for both fertilization and pregnancy. A recent study (Mattar CNZ, 2021) showed a 3x increase in antibodies against the placenta, which amounts to a vaccine-induced autoimmune attack against the placenta.

Fertility Risks: Male

- Male testicles have a high concentration of the ACE-2 receptors, which bind the spike proteins, causing injury and pain due to inflammation and microthrombi (blood clots).
- Lipid nanoparticles used in the COVID shots and spike protein damage lead to reduced testicular size, reduced sperm production, damaged sperm, reduced testosterone production (Brohi R D, 2017).

Pregnancy Risks and Unknowns

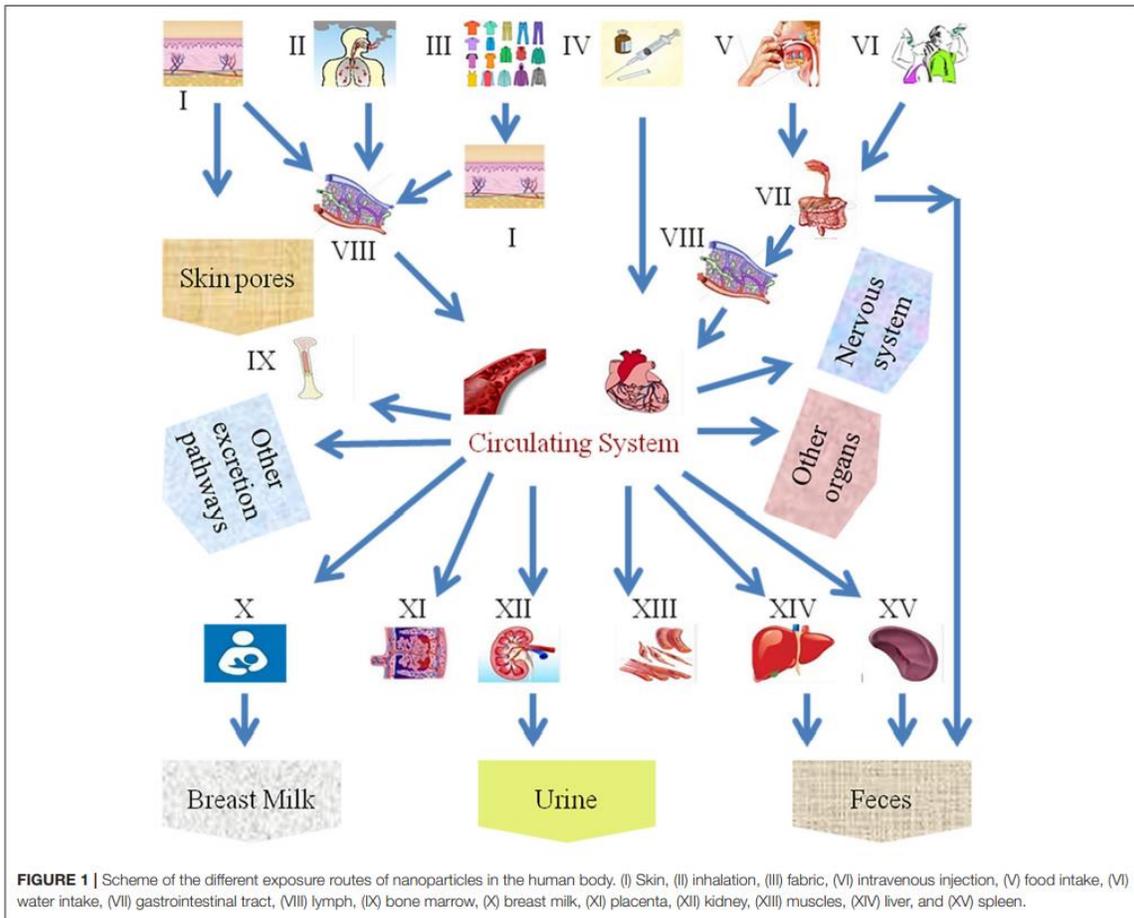
- Antibodies to the natural placental protein Syncytin-1 triggered by the experimental gene therapy "Covid shots" make it difficult to *become* pregnant. But it *also* means women vaccinated *while pregnant* risk vaccine-triggered antibodies attacking the placenta causing a miscarriage.
- There were no data evaluating long-term impact on pregnancy or fertility submitted to or reviewed by FDA in the data packages that served as the basis for the Emergency Use Authorization (EUA) of the COVID shots.
- No pregnant women were included among the patient groups studied in the clinical trials which supported EUA (FDA, Office of Chief Scientist, 2021). Open VAERS website¹ reflects over 4,850 reported adverse events associated with "pregnancy" as of March 23, 2022.
- The VAERS database² contains over 1,800,000 adverse event reports following receipt of the COVID shots with impact on pregnancy³ as of March 23, 2022.
- Critical re-analysis of the data presented in the NEJM article by Shimabukuro, et. Al. 2021) shows the *actual* spontaneous miscarriage rate to be **closer to 82% for women vaccinated in the 1st or 2nd trimester of pregnancy** (Blumrick, 2021) .

¹ [Openvaers.com](https://openvaers.com)

² Vaccine Adverse Event Reporting System, administered by CDC: [Vaccine Adverse Event Reporting System \(VAERS\) | CDC](https://vaers.hhs.gov/)

³ Using the following search terms in the "adverse event description" field: pregnancy, pregnant, spontaneous abortion, miscarriage, birth defect, congenital anomaly.

Diagram of Different Exposure Routes of Nanoparticles in the Human Body



From: *Frontiers in Pharmacology*, 2017 by team of Chinese researchers (Brohi RD, 2017).

No Off-Setting Benefit from the Gene Therapy Vaccines

- Young people and women of child-bearing age have no health benefit from gene therapy vaccines because they are at such low risk from COVID-19 (Ioannidis J, 2020).
- Early, effective, safe treatments are already available *for both prevention and treatment of COVID* illness. These medicines have been used worldwide, and clinical studies show **at least 85% reduction in risk of hospitalization or death** (Stricker RB, 2021).
- There is no societal benefit from mass vaccination of young people. Basic hygiene and common sense are the only proven approaches to stop the spread of respiratory viruses. If one becomes infected, safe effective widely available medicines are a safer alternative to experimental vaccines.

References

Blumrick, R. (2021, Feb 27). Potential Risks of COVID Vaccines During Pregnancy. *MNI Great Lakes ECHO*. MI. Retrieved Aug 19, 2021, from <https://vimeo.com/580443866>



- Brohi R D, W. L. (2017). Toxicity of Nanoparticles on the Reproductive System in Animal Models: A Review. *Frontiers in Pharmacology*, 8, 606. doi:10.3389/fphar.2017.00606
- Brohi RD, W. L. (2017). Toxicity of Nanoparticles on the Reproductive System in Animal Models: A Review. *Frontiers in Pharmacology*, 8, 606. doi:10.3389/fphar.2017.00606
- FDA, Office of Chief Scientist. (2021, Jun 25). *EUA 27034 - Emergency Use Authorization of Pfizer-BioNTech COVID-19 Vaccine*. Retrieved Jun 28, 2021, from FDA.gov: <https://www.fda.gov/media/150386/download>
- Ioannidis J, C. S. (2020, Aug 25). Forecasting for COVID-19 has failed. *Int J of Forecasting*. doi:<https://doi.org/10.1016/j.ijforecast.2020.08.004>
- Mattar CNZ, K. W. (2021). Addressing anti-syncytin antibody levels, and fertility and breastfeeding concerns, following BNT162B2 COVID-19 mRNA vaccination. *medRxiv (preprint)*. doi:<https://doi.org/10.1101/2021.05.23.21257686>
- OVRR, CBER, FDA. (2021, Jun 25). *Emergency Use Authorization of Moderna COVID-19 Vaccine*. Retrieved Jun 28, 2021, from FDA.gov: <https://www.fda.gov/media/150387/download>
- Pfizer. (2021). "Biodistribution" study of mRNA vaccines. Retrieved July 26, 2021, from Rights and Freedoms.
- Seneff S, Nigh G. Worse Than the Disease? Reviewing Some Possible Unintended Consequences of the mRNA Vaccines Against COVID-19. *International Journal of Vaccine Theory, Practice, and Research*. 2021;2(1):38-79. <https://ijvtp.com/index.php/IJVTPr/article/view/23/51>
- Shimabukuro, T., Kim, S., Myers, T., Moro, P., Oduyebo, T., & al., e. (2021, April 21). Preliminary Findings of mRNA Covid-19 Vaccine Safety in Pregnant Persons. *New Engl J Med*, 10 pgs. doi:10.1056/NEJMoa2104983
- Stricker RB, F. M. (2021). Hydroxychloroquine Pre-Exposure Prophylaxis for COVID-19 in Healthcare Workers from India: A Meta-Analysis. *Journal of Infection and Public Health*, 14(9), 1161-1163. doi:<https://doi.org/10.1016/j.jiph.2021.08.001>
- Wang R, S. B. (2018). Potential adverse effects of nanoparticles on the reproductive system. *Int J Nanomedicine*, 13:8487-8506. doi:doi:10.2147/IJN.S170723

APPENDIX: MEDICAL and VIDEO RESOURCES

- www.TruthForHealth.org
- www.VAXXChoice.com
- www.howbad.info
- www.HowBadIsMyBatch.com
- <https://childrenshealthdefense.org/>
- <https://covid19criticalcare.com/network-support/the-flccc-alliance/>
- www.C19Study.com
- <https://americaoutloud.com/author/dr-elizabeth-lee-vliet/>
- <https://americaoutloud.com/the-mccullough-report/>
- [HCQ White Paper: The Economic Standard](#)
- <https://www.truthforhealth.org/2022/04/vaccine-injury-treatment-guide-your-roadmap-to-recovery/>