

# Pfizer's COVID Vaccine Causes VAIDS in Children, Study Proves

## Vaccinated Children Become Susceptible to Bacterial and Fungal Infections

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Many of us shared anecdotes of loved ones vaccinated with COVID-19 vaccines - and suffering from all sorts of unrelated illnesses afterward. I know a young individual who, after mandated COVID vaccination, had all sorts of bacterial illnesses that he never had before. (This story was a major impetus to my opening and growing this substack).

Finally, we have scientific confirmation that **vaccination against COVID-19 causes a marked decrease in immunity to heterologous pathogens** such as *viruses, bacteria, and fungi*. This *decreased immunity to other pathogens* (acquired immune deficit) is what people colloquially refer to as "VAIDS." (VAIDS stands for Vaccine-Acquired Immune Deficiency Syndrome)

The study titled [BNT162b2 COVID-19 vaccination in children alters cytokine responses to heterologous pathogens and Toll-like receptor agonists](#), set out to measure the quality of general immune responses in children vaccinated with the Pfizer COVID vaccine.

ORIGINAL RESEARCH article

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Vaccine-induced innate immunity and its role in viral  
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## BNT162b2 COVID-19 vaccination in children alters cytokine responses to heterologous pathogens and Toll-like receptor agonists

<https://www.frontiersin.org/articles/10.3389/fimmu.2023.1242380/full>

Blood samples from 29 children, aged 5-11 years old, were taken before the FIRST dose of COVID vaccination and subsequently retaken on the 28th day after the second dose.

**Methods:** A whole blood stimulation assay was used to investigate *in vitro* cytokine responses to heterologous stimulants (killed pathogens, Toll-like receptor ligands) and SARS-CoV-2 antigens. Samples from 29 children, aged 5-11 years, *before and 28 days after a second BNT162b2 vaccination were analysed (V2 + 28)*. Samples from eight children were analysed six months after BNT162b2 vaccination.

In the introduction, scientists coyly said that vaccination “altered cytokine responses”. As we will discover, the jabs altered immune responses for the worse, not better!

**Conclusions:** BNT162b2 vaccination in children alters cytokine responses to heterologous stimulants, particularly one month after vaccination. This study is the first to report the immunological heterologous effects of COVID-19 vaccination in children.

## What the Scientists Did

## Sample collection

Participants were requested to provide blood samples at two core visits, and one optional visit. The first blood sample was taken immediately before, and on the same day as, the first BNT162b2 vaccination (V1), the second blood sample was taken 28 days after the second BNT162b2 vaccination (V2 + 28) and the optional third blood sample was taken 6 months after the second BNT162b2 vaccination (V2 + 182) ([Supplementary Figure S1](#)). Up to 23 mL venous blood was collected into sodium heparin-containing and serum separator tubes (Becton Dickinson, NJ, USA).

Then, collected blood was tested for the immune response to various pathogens, including various commonly encountered bacteria, staphylococcus aureus, and pathogenic yeast [Candida Albicans](#):

### In vitro whole blood stimulation

In vitro whole blood stimulation assays were done as previously described (16, 23). [lab work details omitted - I.C.] ... Other stimulants have previously been described (16) and included: *bacterial stimulants* (heat-killed Haemophilus influenzae type B, HK Listeria monocytogenes, BCG-Denmark, HK Staphylococcus aureus and HK Escherichia coli, and viral/other stimulants (hepatitis B virus surface antigen, ..., HK Candida albicans

Many of the above are pathogens that we encounter often, and they are the reason why we have God-given immune systems to keep them away, which healthy children typically do.

Unfortunately, **the 29 COVID-vaccinated children aged 5-11, had markedly decreased immune responses 28 days after the second dose of Pfizer**. Many **specific immune reactions declined by a factor of over ten times**:

(the charts in the figure above are using *logarithmic scale*)

The authors state:

Following heterologous bacterial, fungal and viral/TLR agonists

stimulation, **there was a general decrease in cytokine and chemokine responses** in children between V1 and V2 + 28. The largest decreases were seen for IFN- $\gamma$  and MCP-1 ([Figures 2, 3A-C](#)). IL-6, IL-15, IL-17 also decreased between V1 and V2 + 28 following stimulation with BCG, *H. influenzae*, *S. aureus*, hepatitis B antigen, poly(I:C), and R848 ([Figure 3B](#)). *L. monocytogenes* stimulation induced IL-15, TNF- $\alpha$  and IP-10 decreases between V1 and V2 + 28 ([Figure 3C](#)). IL-8 responses also decreased between V1 and V2 + 28 following *H. influenzae* and *S. aureus* stimulation.

Reduced responses to *Staphylococcus aureus* are very serious: this illness is difficult to treat and causes untold harm. I will skip the worst pictures to not upset my readers too much.

In any case, a decrease in immune responses happens across the board.

In the ideal world, careful scientists, cautious public health authorities, and principled medical doctors would investigate COVID vaccines' effects *before vaccinating tens of millions of children* and billions of adults. Had they investigated and done the basic science (such as the study above)

before mandating and injecting COVID vaccines, such dangerous injections would never have been given to children and young adults!

Instead, in the mad rush to “vaccinate the world” with vaccines that do not even work, we ruined the immune responses of millions of children and likely all other vaccinated people.

Headlines about the “unexplained rise in children infected” with the above-mentioned bacteria abound:

Instead of careful consideration, science and health authorities denied everything and refused to debate. Now that the truth is coming out, the ill effects of Covid vaccines can no longer be reversed. Very unfortunate!

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Do you know any affected people? Please share your stories, while BEING MINDFUL ABOUT PRIVACY!

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