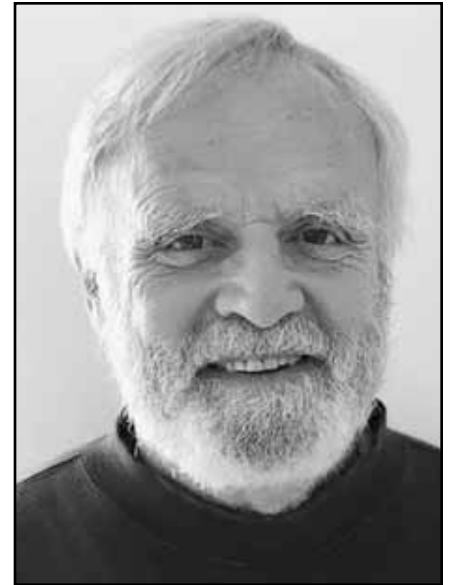


Vaccine or Natural Immunity

Steven Acuff



Thank you for allowing me to respond to the excerpt from Michael Rossoff's article that recommends vaccination for those over 70 years old or who don't follow healthy food and lifestyle guidelines. I am 75 years old and will present my thoughts first about the risk of vaccination and then the benefit of natural immunity, the wise alternative.

Pfizer, the U.S. maker of the well-known mRNA injection, provides on its website clear information about the obvious risks of their controversial product. The website reveals just how risky their jab is with a long list of recorded harmful aftereffects, ranging from chills and headache to swelling in the throat and face, rapid heartbeat, and dizziness. Pfizer also states that this new mRNA medical concoction does not have full FDA approval and licensing. In fact, the FDA has granted only emergency permission. The mRNA "vaccine" doesn't fit the legal definition and is officially "gene-based medical technology." According to Pfizer, its mRNA technology doesn't prevent infection or prevent

infecting others. The purpose is rather to prevent an infection from becoming a serious illness with the risk of death. Pfizer also states that the duration of protection from the mRNA injections is unknown, and a yearly booster may well be needed.

The Pfizer and Moderna mRNA products are still in the long-term observation-study phase with the evaluation of the safety testing results to begin in two years. Rushing a mass vaccination program without the standard safety observation time is reckless, to say the least. Political leaders and public health authorities around the world keep pushing this "full speed ahead" agenda.

This is the "warp-speed" rollout announced last year. It normally takes 5-10 years to develop an officially 'safe' vaccine with long-term observation to check for harmful aftereffects. Warp speed means that the priority is obviously not safety. Since 1986, U.S. regulation doesn't allow lawsuits against the pharma industry for liability because of vaccine injury. From 1986 until now, the taxpayer-funded U.S. National Vaccine Injury Compensation Program (VICP) has paid out \$4 billion for injuries from thor-

oughly tested and licensed vaccines, mostly to the families of disabled children. The mRNA has not yet been fully licensed.

Pfizer and Moderna claim that their tests show an amazing 90-95% efficacy. Professor Stefan Hockertz (immunology and toxicology) of Germany has worked for years with the development of new vaccines. In a recent interview, Prof. Hockertz stated that his research team needed 5-7 years to achieve safe vaccines for corona influenza viruses. He added that his team was pleased with an efficacy rate of 30-40%. He then added that Pfizer and Moderna must show some scientific proof of their bold claim that this warp-speed "achievement" in less than a year proved an efficacy of 90-95%.

The Covid-19 vaccine agenda includes not only the new gene-based mRNA technology, but also vector vaccines from Astra Zeneca (AZ) and Johnson & Johnson (J&J). These conventional vaccines have become notorious for triggering an autoimmune response that leads to dangerous blood clots and the collapse of blood platelets. They contain toxic preservatives such as formaldehyde and nanopar-

ticle mercury, as well as aluminum—aluminum as an adjuvant that passes through the blood brain barrier and triggers inflammation in the brain.

After a pause in the U.S. to reconsider the safety of J&J, the CDC and FDA now have allowed it again. Common sense should make us wary of this approach, as this is not a well-founded, science-based policy to deal with the risk. It is in fact a risk assessment, a judgment call: the risk of blood clots and platelet collapse against the risk of dying of Covid-19. The various national public health authorities seem to make it up as they go.

Since the elderly are more likely to die from Covid-19, the common AZ vaccine is generally given only to them. At the time of this writing, the rules for injecting AZ vary: In Portugal, Spain, Italy, and the Netherlands only for those 60 years and older; in Germany also 60 years, and those younger who already got the first AZ injection now should take the second jab as mRNA from Pfizer or Moderna. France has set the age limit at 55, Sweden and Finland at 65, the UK at 30, and Australia at 50. Denmark and Norway have stopped AZ totally. The straightforward Norwegian health authority stated that AZ is more dangerous than Covid-19. At the moment, the EU still has the J&J vaccine on hold, while the EU medical overseer further weighs the risk. Israel has been the number one vaccinator, preferring the mRNA jab. Several cases of herpes zoster (shingles) have been reported as an aftereffect in Israel and now there are reports of a significant incidence of myocardial (heart muscle) inflammation after the second mRNA jab.

These are rare but serious short-term reactions. However, the bigger, scarier unknown is what the long-term aftereffects will be. Sherri Tenpenny,

MD, very knowledgeable about vaccines, warns that a wave of autoimmune illness may strike by the end of this year. This includes allergy, asthma, Crohn's disease, rheumatoid arthritis, diabetes 1, multiple sclerosis, and Hashimoto, as well as others. Further down the track, the consequences could be cancer without anyone suspecting a link to the vaccine. As Dr. Tenpenny points out, the product info insert for all vaccines includes the statement that the vaccine has not been tested for its cancer-causing potential (carcinogenicity). It is simply a matter of weighing the risk of the vaccine against the risk of harm or death from

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Covid-19, which is low at 1.8% in the U.S. By contrast, the Ebola virus kills half the people it infects.

The virus mutations show how uncertain the protection with vaccination is. No one knows how many mutations will appear or how aggressive they will be. Top vaccine expert Geert van den Bossche has made an impassioned online plea to stop the mass vaccination, as he fears this will lead to more virulent virus mutations and become a much more serious threat.

Vaccination has indeed many downsides. Antibodies that form as a reaction to the vaccine are very specific and may not react to a mutated virus. Also, the coating that protects the mRNA on its way from the injection site to the cell is toxic polyethylene glycol (PEG). This can trigger allergic reactions when it contacts the body

surface in shampoo and toothpaste. Who knows what PEG can unleash when injected into the body?

The governments around the world present vaccination as secure protection and the frightened population understandably falls for this misrepresentation. They see the vaccine as their way back to the normal life they long for. However, less understandable is the decision of those living a macrobiotic lifestyle to go along with the official narrative. Macrobiotic people tend to be wary of experts, and especially medical experts, and there is every reason to be wary now.

Fear of infection from the virus comes from a lack of understanding of how natural immunity works. The Covid-19 virus attacks the lungs, but it takes nearly 300 proteolytic steps to complete the takeover of the cells. The natural immune response prevents this by doing what the T-cells and B-cells do best, namely destroy the harmful virus. However, the immune system doesn't function well in an unwell body. Those who die of Covid-19 tend to be the elderly or have pre-existing conditions, including obesity, high blood pressure, and diabetes, especially those taking multiple medications. In such cases, natural immunity is of course weakened.

The immune system needs specific nutrients to function well, and a lack of those nutrients weakens the immune response. As we all would agree, our daily food should provide these nutrients. With nutrient-dense staples, macrobiotic food is ideal for keeping the immune system in balance, not too strong and not too weak. These foods include whole grains, vegetables, legumes, seaweed, seeds, and nuts and form a sound foundation. However, getting enough nutrients is not only a matter of what we eat, even if organically grown.

Not all nutrients are automatically abundant in macrobiotic food and vitamin D is the most obvious example. Except for those who enjoy a warm, sunny winter with strong sunshine, vitamin D drops below the level needed to provide proper immunity. This leaves the body vulnerable to microbial infection. It is not wise to rely on the small amount of vitamin D in mushrooms. A deficiency of vitamin D is very common in the winter and spring, before the UVB radiation in sunlight becomes strong enough to trigger the innate production of vitamin D. Even in the summer many people have a deficiency because the skin doesn't get enough sunlight exposure during the middle of the day when the sun is strongest. Sunscreen is also a problem as it blocks the formation of vitamin D.

Cod liver oil has a long tradition in sun-starved Northern Europe as a reliable source of vitamin D₃. A tablespoon of Norwegian cod liver oil provides about 1350 IU, but the daily intake should be higher to maintain a good defense against invading microbes. Most vitamin D₃ supplements are made from sheep wool and a daily dose of 4,000 to 5,000 IU is right for most people when there is little or no strong midday sunlight exposure to the skin. This is far above the official recommended daily allowance (RDA). The amount needed varies according to body weight.

Vitamin D₃ is the key nutrient for natural immunity against Covid-19 and other viruses. It is an immune modulator, keeping the immune response in balance, not too active or too passive. Indonesia and the Philippines have published studies showing the direct connection between D₃ deficiency and a high death rate from Covid-19. Norway has just ended a study comparing 800 people taking cod

liver oil with a control group without it. Although the final results are not yet published, the preliminary results show clearly that the group with cod liver oil has less infection and, when infected, less serious symptoms.

Cod liver oil is especially beneficial because it also contains omega 3 fatty acid, a strong anti-inflammatory. Serious symptoms and death in Covid-19 patients result not from the virus, but rather the reaction of the immune system to the virus. It sets off an intense cytokine storm, an over-reaction of inflammatory signals that overwhelm the body.

The modest goal of vaccination is to prevent extreme symptoms and cy-

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tokine storms that can become deadly. Vitamin D₃ and omega 3 achieve that easily without the vaccine risk of blood clots, the collapse of blood platelets, and other autoimmune reactions. Macrobiotic food contains too little omega 3, as plant-based alpha linolenic acid, found for example in flax seeds and walnuts, is only the precursor of omega 3—only a fraction transforms into real omega 3. Algae oil contains real DHA and EPA omega 3 for vegans.

Vitamin C is the most famous nutrient for immune support. Naturally fermented sauerkraut is rich in vitamin C as well as other nutrients. Camu camu berry powder contains the most vitamin C, followed by acerola. The concentration of vitamin C in white

blood cells, the “hitmen” of the immune system, is 50 times higher than in the surrounding serum when they work best.

Zinc stops the replication of the virus when it breaches the cell membrane. Pumpkin seeds contain plenty of zinc and there are several other food sources as well. However, caffeine blocks the absorption of zinc. For optimal natural immunity it is crucial to consider both factors, namely a good supply of key nutrients and avoiding the gremlins that weaken the immune response.

Natural immunity provides reliable protection against Covid-19 and its future mutations. Taking special products and supplements makes more sense than joining an enormous medical experiment with an unknown outcome. Food provides enough nutrients for general well-being, but in the middle of the Covid-19 pandemic it is wise to take more concentrated amounts of these nutrients for optimal natural immunity. Fear not.

Steven Acuff began using macrobiotic principles in 1971 and studied with macrobiotic author and lecturer Michio Kushi in the 1980s. In 1989 he published a book in German called Das Makrobiotische Gesundheitsbuch (Goldmann Verlag, Munich), which sold nine editions. Currently, Steven teaches intensive courses in macrobiotic healing as well as traditional Oriental facial and body diagnosis combined with German naturopathic health evaluation. Steven's latest book, Eating the Wu Way for a Longer, Healthier Life, was featured in the summer 2016 issue of Macrobiotics Today. This book is now available as an eBook as well as a hardcopy printed book. See www.stevenacuff.com for more.