

ADE is Real Threat in COVID Vaccines Leading to Death, Fauci Lies
By Dr. James White

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Dr. James White – Alpha & Omega Ministries. Mentioned on this program, something called ADE, okay? And I explained briefly what it was, what the concerns of what scientists were saying that the vaccines that were being developed at that time because they rolled out in December basically, utilized a mechanism that had been abandoned a number of times because once they got into animal studies, had caused mortality and one of the issues that people were concerned about is something called ADE, it's when your antibodies, when you artificially create them but don't use the natural system to bring them about, they can not be as robust as they should be and what happens is a new strain of the disease comes along, your body thinks you've already got the antibodies to it and hence you are rendered either more susceptible or defenseless, in the worst case scenarios, against the new variance because your body thinks it's already ready for that and it's not, and so it doesn't create the proper immune response when you encounter a new variant which we would naturally have if we had natural immunity from exposure or from the old style inoculations and vaccines.

So I mention this and, of course, all the folks with the tin-foil hats, conspiracy theory stuff are immediately, "Man, this is such a shame when James White used to just talk theology and now he's talking wild crazy conspiracy theories and stuff like that," and it was a part of having a meaningful foundation for analyzing whether you should take these vaccines as you need to know what the dangers are and these folks ain't gonna tell ya. When you look...there were 52 new billionaires created during 2020 and guess which area had the most of them? Big Pharma and medical. Hundreds and hundreds of billions if not a trillion dollars has gone into that field worldwide. You don't think that that kind of money is not causing a tremendous amount of suppression of meaningful data? The FDA just approved the Pfizer vaccine without any public comment. Really? Because they have no response to these things and everybody knows it. I mean, I certainly can recognize when someone is running from an argument.

But here is a...this is from the Journal of Infection. Now you know that's a real medical journal because no one else would name it Journal of Infection. Only those really geeky people are going to subscribe to the Journal of Infection. Your wife's not gonna allow that on the kitchen table, you know what I mean? Your wife might allow the Journal of

Infection on the kitchen table? Okay, fine, well, I'm not going to say anything more about that.

This is from...okay, here's the title, "Infection enhancing anti-SARS, COVID 2 antibodies recognize both the original Wuhan/D614G strain and Delta variants, a potential risk for mass vaccination." Here's the highlights, this is the highlights before the abstract.

"Infection enhancing antibodies have been detected," oh, why did you not...okay, let's see if we can, there we go, "Infection enhancing antibodies have been detected in symptomatic COVID-19. Antibody dependent enhancement (ADE) is a potential concern for vaccines." That's what I said in November of last year and that's why I'm asking why aren't you sending all the apology emails through because there must be. Everybody who went after me must be apologizing now, right?

Speaker. So you apparently have forgotten what you said at the very beginning of the show about people digging the hole deeper and deeper and they don't realize they're stuck in it. Yeah. Yeah. No apology tour is happening over here.

James. No, no apology letters, huh? Okay.

"Enhancing antibodies recognize both the Wuhan strain and Delta variants. ADE of Delta variants is a potential risk for current vaccines. Vaccine formulations lacking ADE epitope are suggested." This is the paper, okay?

So what you could get kicked off of social media for misinformation for over a year ago is now the stuff of the introduction and highlights of medical papers today. I had no control over that but what it means is the people who raised these questions were raising absolutely valid issues and what was the response? Kick them out. Fire them. Censor them. Suppress them. And for some people in this audience, "You people just don't know what you're talking about."

Speaker. So my question is how many of those people's lives, families, jobs, careers, got ruined before the rest of them decided to wake up and actually pay attention?

James. Well, I'm not sure it's possible to wake up right now, certainly not in Australia which has just simply become a police state and has capitulated on all levels of freedom. I'm sorry, what a shame but, man, the Aussies and the Kiwis, pfft, they're just like whatever our government says we will do.

So a bunch of this stuff is coming out so, for example, the Children's Health Defense website links to...this is...the paper is linked here in the article, a study, "Fully vaccinated healthcare workers carry 251 times viral load, pose threat to unvaccinated patients/coworkers." So if you want to know why the masks also just started coming back, it's because it has been demonstrated beyond all question now in multiple studies that the Delta variant in vaccinated people produces minimally 250, I've seen over 300 times the viral load in the nose of fully vaccinated people. Now what's funny is why don't they, I don't know why, but why don't they talk about unvaccinated people because it

sounds as I'm reading it, I could be wrong, but it sounds as I'm reading it that it doesn't produce the same viral load in unvaccinated people. You know what that means, don't you? Here, let me, yeah, here, this is from the Oxford University Clinical Research Group published August 10 in Lancet. "The study found vaccinated individuals carry 251 times the load of COVID-19 viruses in their nostrils compared to the unvaccinated. While moderating the symptoms of infection, the jab allows vaccinated individuals to carry unusually high viral loads without becoming ill at first, potentially transforming them into pre-symptomatic superspreaders. This phenomenon may be the source of the shocking post-vaccination surges in heavily vaccinated populations globally."

Yeah, so, like that one little Caribbean country and then now Israel, super-spikes. They're the most vaccinated places on the planet. Super-spikes of cases and all they can tell us is, "Yeah, well, you don't get quite as sick." Oh, I don't remember that being the big selling point of vaccines only a matter of days ago. I do remember reporters going, "So if I get vaccinated, then I'm not going to be able to pass this on to my loved ones, right?" And now it's, "No, actually it'll make you a super-spreader."

So that doctor up in Idaho who, again, you know, people were like, "Well, I saw a fact check article about him." Well, there's a fact check article about everybody that's not part of the narrative. But I love the way he put it because it makes such perfect sense. We are now force-vaccinating everyone, like if you work for Delta, \$200 a month allegedly for medical costs because you're not vaccinated. Baloney. That is pure bullying on the part of Delta. Delta, shame on you. Mark them down because the truth's going to come out eventually and you're going to see the people that were behind this and the people that cooperated and the cowards that gave in. Mark them down. Fire them. Get rid of them.

But here you have other studies, I've got them right here saying that in less than 50 year olds, the current vaccines have dropped to as low as 31% efficacy. You're going to force that on people? As the doctor in Idaho put it, we are vaccinating everyone for last year's disease. He's right. He's right and here's the question: what about the next variant?

Because I also have an article here that says that some enterprising researchers started looking at samples from the earliest COVID-19 survivors and have clear evidence that they carry within them genetically modified by human beings viruses, that it's like a little flag sticking up going, "Hi, I was made by humans." What if the next variant that comes down the road at the end of this year has already been designed, knowing what the first one would produce and it will absolutely press the mega-ADE button? What's going on right now, right now this very day? Our Department of Defense is demanding that everyone in the military get a vaccine that for them will be less than 31% effective, will make them super-spreaders. The entirety of the military. What if the next variant is just waiting to be released that goes full-on ADE and wipes out the US military? Gee, where could that have come from?

"Oh, conspiracies!" I've been right all along. It's just common sense. It's just like sit back, take Romans 1 and mix in a trillion dollars and what will people be willing to do? What are people willing to do? I mean, look at the lies about masks right now. Here's another one, here's another one. I saw an advertisement and I've got a study right here, a new

study claims masks only 10% effective. Okay, when was it, June of last year, I'm going, hey, wait a minute, there's all these studies from 2014 to 2019 and they're all pretty much saying the same thing, this is a big fat lie. "You conspiracy theorists, you're trying to kill grandma, blah, blah, blah, blah. We're gonna kick you off the social..." So here's a paper from August of this year that says the same thing. Anthony Fauci's emails come out, Anthonay Fauci knows this to be true too, but you know, he tells that to his friends, not publicly, which is despicable, by the way. It's absolutely evil, just despicable, despicable human being to do that kind of thing. Just blah. But now I'm just sitting here...I think it was on Facebook, I don't know, an advertisement came up, can't get away from them anymore. Somebody, by the way, recently sold my phone number again. I had 11 yesterday, I've got 8 so far today of spam calls so I need to look back and see what I bought online and go, "Oh, there's a company that just put it back out there, here's an active thing." And ding, ding, ding.

So it's an advertisement from, was it 3M? Yes, it was 3M for a truly effective biological mask, even moreso than N95, which I'm sure what that means is because this is just simply physics, the more it filters, the less you breathe. The more it filters, the less oxygen you get and the more carbon dioxide you've got in your bloodstream. That's just the way it is. But in the text of the advertisement it says, "Regular cotton face masks only filter about 10% of biological products." Oh, yeah, that's the stuff we were getting in trouble for, for saying last summer. "You anti-maskers, you're doing misinformation." And now 3M can advertise with that and they're not being kicked off the internet for doing that because, actually, everyone knew that that was true all along. That's why they talked about double masking and triple masking. Well, even triple mask, you're up to 30% and you're probably about to die. Alexander Solzhenitsyn, "Live not according to the lies. Live not according to lies."

But we are and in Washington state, did you see that horrible little picture? My daughter retweeted it or was that on Facebook? I think it was both. Where up in Minnesota it's a picture of them teaching the little kids to walk like zombies in the hallways with their hands out to keep other little kids social distance from them. So that's how you're supposed to....with your little face shields and your masks.

Yes, sir, I saw that you have raised the golden microphone of French superiority.

Speaker. So you were walking by my desk the other day while I was on the phone and that phone call was a gentleman, a very nice gentleman, very respectful gentleman who was, identified himself as a medical doctor and he was raising concerns about the fact that you retweeted this other doctor.

James. Probably the guy in Idaho.

Speaker. Right. And in the conversation, because I'm like, okay, let's you and I have a conversation here. Let's talk about some things that I've been talking about for well over a year, and I asked him, I said, "Do you know what someone looks like after using a paint sprayer wearing an N95 mask?" And he wasn't quite tracking with me. I said, "As soon as

I take it off, you can see where all of the water molecules went, how they penetrated the mask, how they're up your nose, how they're in your mouth." That's when the conversation started going towards, "Well, you know, it at least slows things down," and then eventually it was, "Well, they're at least 10% effective." I asked him, I said, "Doctor, would you walk into a room filled with carcinogens in the air wearing that mask and spend an hour in there?" "Well, no."

So there's a reason why an automobile painter wears a NIOSH mask. First of all, it's just strapped super-tight to his face, it's got rubber around it, it's got layers along with charcoal in it, alright, but nobody, nobody is out there talking about us using NIOSH masks, in fact, some people have done it and they laugh. They laugh, okay?

James. Don't give them ideas.

Speaker. But the point here is, here's the simple question: if we were actually dealing with the Spanish flu would they be playing these games? Because that's exactly what they're doing.

James. Well, they did back then but they didn't have anything else to do.

Speaker. But if we were looking at truly millions in this country like they said this was going to be dead in a few months, millions dead per month, they wouldn't have the room to be playing these games because it would literally be a scenario where the guy in the cart comes by your house and says, "Bring out your dead." And an N95 isn't going to survive that kind of thinking.

So the whole mask thing, folks, you've got to wake up and recognize it's all for show. There's...

James. Submission.

Speaker. Well, it's like the little old lady who Wendy's used to say, "Where's the beef?" There ain't any.

James There isn't. Pure submission. Pure lies. No two ways about it. And of course, as people say what it does is it makes people think that they are protected by it when, in fact, they're not.

One last thing real quick, another study, I had all these, there's like an explosion of studies over the weekend. Real world data from Israel linked Pfizer's COVID-19 vaccine to an elevated risk of heart inflammation, researchers said this week. Israeli scientists found that vaccination likely cause myocarditis or heart inflammation in one to five people per 100,000 who wouldn't have otherwise suffered the condition. However, they also said that getting COVID-19 was linked to a higher risk with 11 inflammation events out of 100 attributed to the disease. I'm not sure why, okay, 11...okay, most of the heart inflammation cases post-vaccination were in young males. The 21 people who had

myocarditis in the vaccinated group had a median age of 25 and 90.9% were women. So the argument here is, yes, it does cause myocarditis but COVID, getting COVID is worse than getting the myocarditis, at least over a larger number of people. That's the argument now, is that, yeah, there's risks with these vaccines. So the question is: why does it cause myocarditis? Why, then, would you force the people who are in the least danger of COVID-19 to run that risk? I don't know but the idea is, "Well, okay, yeah, it is out there." Well, why at first were they so averse to admitting it? Well, part of it has to do with, you know, now the Pfizer one has been FDA approved, they're now having to find a way to backdoor immunity from lawsuits because once something's licensed, then you can sue if you have negative results from it.

So it's all money. It's all money. But there's an admission now, "Well, yeah, it does cause that." But initially everybody who said, hey, this is happening, "Oh no, that's just conspiracy theory, tin hats." No, actually it was happening.

The Highwire with Del Bigtree

Jefferey Jaxen, Investigative Journalist. This is Israel's National Emergency Services and Ambulatory Services. He looked at all the data they had on calls for what's called acute coronary syndrome and he came up with this chart after collating the data and it's very interesting. So we have a highlight here and for people just listening, you can see it's broken up into male and female and the age groups. So we have the age group of 16-19. What they did was they compared 2019, January 1 to May 31, 2019 to January 1 to May 31, 2021 and what they found was the calls to this ambulatory service and emergency care for acute coronary syndrome in males 16-19 saw 91.7% increase. Males 20-29 saw a 31.1% increase. Then we go down to females 16-19 age group saw 140% increase. Their females 20-29 saw an 83.6% increase. So an incredible increase, I mean, every one of those values we see over 50% increase pretty much except for a couple, and so what he did was he forwarded this information urgently to the Ministry of Health in Israel twice and had no answer. Why is this important? Because acute coronary syndrome in the scientific literature, there's tons of scientific literature saying that that syndrome is almost identical to myocarditis, pericarditis, and is very hard to determine the difference between the two because they present with the same symptoms like head...dizziness, fainting, abnormal heartbeat, breathing difficulties.

So that's setting up what we're going to go into and now let's look at VAERS. So we have open VAERS data here and we have a little circle there and it says that's the vaccine adverse event reporting system, this is for the COVID vaccines, we have over 5,000 events reported for myocarditis and percarditis.

Del Bigtree. Wow.

Jefferey. And now that brings us into ACIP. The recent ACIP meeting met to talk about the new Pfizer's vaccine that was approved, they also talked about the boosters, and they went over VAER's data for myocarditis.

Del. Let's be clear when we talk about ACIP, this is the Advisory Committee on Immunization Practices. This is the committee that the CDC refers to, they decide whether a vaccine can be added to the schedule or not, or if there's any writing to be done to warn people of things. All of that takes place, the ACIP makes recommendations and the CDC puts them out. This is the illustrious heroes on the ACIP voting committee and so tell me about this conversation then because this has been a big concern of ours, I've been seeing it all over social media, especially young men ending up in hospitals with swollen hearts, you know, and then, you know, you see a social media post by the mother saying, "And my son's not the only one in here," you know, 20-30 different cases that are staying in hospitals. So this is obviously something that seems to be happening a lot more than it's being reported or spoken about and so Israel's seeing it. What did ACIP admit to?

Jefferey. Yeah, that's exactly right. So what ACIP did was they looked at those various reporting numbers and they have the first slide here, they looked at myocarditis or myocarditis with pericarditis and the difference between that is that's just myocardium, pericardium, they're just the layers of the heart and the inflammation, that's how far this, you know, essentially the virus inflames the heart. And it says here they looked at 2,574 reports. So we looked at open VAERS, that's about only half of the reports that were reported to VAERS and that's as of August 18, what they looked at. Then the next slide they compared it to background rates. So this is just the mRNA vaccinations. So just Moderna and Pfizer. Now keep in mind Israel just had Pfizer because they made an exclusive deal with Pfizer to give that to the population. So we have here, we're going to look at the red highlighted. So we have age groups 12-15, cases of myopericarditis expected, 0-3. They found 12 going across, that's in females going across.

Del. So they expected 0-3 but there was 12 in fact, so a huge jump over what was expected.

Jefferey. Right and that's in females. Now males, we're being told, reacted a little I guess stronger would be the word to this heart inflammation after vaccination. So expected in 12-15 years old in the background is 1-5, they had 117. Now the numbers don't get any better as you go up in the age groups. So 16-17 years old in males they expected 0-3, they had 121 cases. Males 18-24 they expected 1-11, they had 213. So on and so forth and you can see the only age groups that really for males that didn't see an over background rate was 50-64 and 65+. So we have it seems like a signal here and this all against, this was for the dose 2, by the way, the second dose and it was only a seven day window that they looked at, they call it a seven day risk period.

So you know, it opens up a lot of questions there but this all, you know, paints a background up against the okaying of the biological license or emergency authorization for younger children for 5-12 year olds for Pfizer. So there is kind of a couple substories at the ACIP committee. That was one of them. The other big substory was a booster shot.

So they talked about the booster shots and if you remember the booster shots for all was announced by the Biden administration around August 18 and here's the headline, "US announces plan to offer boosters to all Americans starting in late September." And they said during that time the additional doses will be available to people eight months after they receive their second dose. So doing a quick, you know, a napkin calculation, people that receive their doses, the first round of people in the US, they would be eligible for this by the beginning of August.

So you know, with this announcement, yes, right now as we're speaking with this announcement by the Biden administration people just reading these headlines and saying, "Hey, eight months after my second dose, boosters for all Americans. I'm going to go to my local pharmacy and get this shot." So we have some issues that possibly there for public messaging. So what they did, what ACIP did is they didn't really have any data whatsoever they brought to the table, what they did have was public commentary by a gentleman named Stanley Plotkin, Dr. Stanley Plotkin, you know, often called the Godfather of Vaccination, and here's what he had to say about the booster vaccination. Take a listen.

[Audio clip, ACIP, August 30, 2021]

Stanley A. Plotkin, MD, Author of "Plotkin's Vaccines." After hearing some of the prior comments, I am moved to remind you that there is no vaccine against stupidity but the point of what I want to say was that I would not call the third dose a booster.

[end]

Jefferey. There is a big bombshell that happened right after the ACIP meeting and this thing is in the headlines everywhere, this is perhaps the biggest breaking story of this week, in my opinion, and we have to talk about it. We go back to this story, this is going to set it up, "Exclusive: Top FDA official says would resign if agency rubber-stamps an unproven COVID vaccine." This was in 2020. This was out of Reuters, "Speculation about the FDA approving a vaccine under political pressure 'only undermines confidence in the public health system,' Caputo said in a statement." This is Michael Caputo's public affairs lead at Health & Human Services which oversees the FDA and NIH. He says, "I've never met one FDA regulator who wouldn't resign over improper pressure, and that's how America knows their seal of approval is the gold standard."

Now fast forward to June, 2021. We have three FDA advisors who did exactly that. They resigned, "Three FDA advisers resign over agency's approval of Alzheimer's drug." And it says here, "In a powerful statement," again, here we go, these are statements being made, "In a powerful statement of disagreement with the Food and Drug Administration's approval of Biogen's controversial Alzheimer's drug, three scientists have resigned from the independent committee that advised the agency on the treatment."

And now here comes the big news. We have two top officials at the FDA have resigned, announced their resignation one day after the ACIP meeting, that was at the beginning of this week.

Del. Really, one week after approval of the vaccine, right? They just approved the vaccine, okay, by the FDA?

Jefferey. Correct. Yes, they "leave the agency as decision on COVID-19 boosters loom." This is Dr. Marion Gruber, the Director, Director of the FDA's Office of Vaccines Research and Review, 32 year veteran, and her deputy, Dr. Philip Krause. It says here in the article, "In a statement sent to agency staff and obtained by BioPharma Dive, Peter Marks, director of the agency's Center for Biologics Evaluation and Research, said both plan to step down from the FDA within the next two months. Gruber, an FDA veteran for three decades and the director of its vaccine review office, will retire on October 31, Krause, the vaccine team's deputy director, will leave the agency in November, Marks said." And now we start getting some mud slinging.

So this was reported just yesterday in Politico, "Biden's top-down booster plan sparks anger at FDA." Listen to these quotes, Del, never heard anything like this in my life. "...the agency is facing a potential mutiny among its staff and outside vaccine advisers, several of whom feel cut out of key decisions and who view the plan to offer boosters to all adults as premature and unnecessary." Politico goes on to write, "The tensions within the administration plus open skepticism from outside experts has fueled finger-pointing and divisions among health agencies. Career scientists in particular have been confused and surprised by the process." Here we go. Here we go.

Del. It's amazing and, you know, and when you look at this, Jefferey, I mean, not to sort of toot our own horn but I wonder if the fact that ICANN has, you know, a microscope really up their butts over there at the FDA, we are filing, you know, like we just showed earlier in the show against the NIH, every time they make a statement we're all over them, we're taking them to court, they know, I mean, and by the way, when we get responses from the FDA, they're being written by these top officials that have to sort of stand for the statements they're making, stand for the products they're defending, and I think they're starting to see the writing on the wall. As we started expressing last week, it looks more and more like we may have antibody dependent enhancement looming in the future, a waning vaccine that is having, you know, terrible results in Israel and other places, we're starting to see, you know, everyone is going to be masked whether you're vaccinated or not, this thing is crumbling at the seams and now they're starting to point fingers at each other, starting to argue with each other. You know, I don't know how much responsibility we have in that but clearly, once again, I like our position in this in where we've stood this entire time and I'd hate to be on that team.

Jefferey. Absolutely. Absolutely. And there's more problems throughout the world here as we continue and that story is unfolding. It's going as we speak. The FDA has talked about they're going to have an advisory committee meeting on September 17 to talk about licensing and the booster vaccine. So that popped up out of nowhere after these two announced their resignations so it looks like there's a lot of politics going on behind the scenes that we don't see but that's going to be on September 17. You can bet we'll cover that.

Del. All right.

Jefferey. But in 2017, the world first learned through a scientific study about vaccine contamination and the title of that headline was, "Dirty Vaccines: New study reveals prevalence of contaminants." And it says, "Researchers examining 44 samples of 30 different vaccines found dangerous contaminants, including red blood cells in one vaccine and metal toxicants in every single sample tested – except in one animal vaccine." And looking at that study, I'm setting this up for a reason, we'll look right at that study, it's titled if anybody wants to look it up, it's titled, "New quality-control investigations on vaccines," they found, "micro- and nanocontamination." These are the Italian researchers Gatti and Montanari and they said, "...we verified the presence of saline and Aluminum salts, but further presence of micro-, submicro- and nanosized, inorganic, foreign bodies (ranging from 100mm to about ten microns) was identified in all cases, whose presence was not declared in the leaflets delivered in the package of the product." They found iron, they found all types of stuff in there and that was allegedly from manufacturing, just sloppy manufacturing issues.

But fast forward to the COVID vaccines now. That was obviously 2017 was before the world heard about the COVID-19 and coronavirus situation, so we have contamination issues even with the coronavirus manufacturing. This was a Baltimore plant. This was the headlines out of that. This is for Johnson & Johnson, "Factory mix-up ruins up to 15 million vaccine doses from Johnson & Johnson." What they did was they were producing AstraZeneca in the same plant and they were screwing up, they were switching the viral vectors from one vaccine to the other so they had to ditch those. And what happened shortly after that, very shortly after that was they had to shut the plant down. Here's the headline from that, "Emergent," Emergent was the name, "shuts down COVID-19 vaccine production at troubled plant after feds put J&J in charge."

So there appears to be not quite exceptions for this but it seems like this contamination issue is a little more widespread than we're being told.

Del. As if you don't have enough problems with this vaccine already, now you've got to have contamination in there. Why not? Just throw it in. Just back a garbage truck up and just dump it into the big cistern there and we'll give you whatever comes out the other end.

Jefferey. Yeah, I was told these were made by angels, there was no issues. So for the world reading mainstream headlines, everyone's following the story of Japan. Japan is announcing vaccine contamination. So this August 26 in Japan was the first announcement we saw out of Reuters and it said this, "Japan suspends 1.63M doses of Moderna over contamination." And this story really started running so it says here, "'The detection of this particular matter refers to certain vials from one product lot distributed exclusively in Japan,' the company said in a statement from Madrid." "The origin of this manufacturing incident may be in one of ROVI's," that's Spain's manufacturing lines, the manufacturing company in Spain, "the statement noted." ROVI is the Spanish

manufacturer. "Neither the companies nor authorities gave details on the possible type of contamination."

So we're hearing from that article when it first kicked off, one lot, just one lot, it's put on hold, all good, everything's back to normal. Then we have some more headlines that start running and it starts to expand besides one lot. So it says here, "Foreign substances in Japan's Moderna shots: Here's what you need to know." Now this story starts to talk about more, "The vials with the three lot numbers had been distributed to nearly 900 vaccination centers across Japan and more than 500,000 of the affected shots had already been administered." So now we're hearing three lots.

Then the information just gets a little more troubling for Moderna in Japan and these two gentleman, "Two die in Japan after shots from suspended Moderna vaccines – Japan govt." It says, "The men in their 30s died this month within days of receiving their second Moderna doses, the ministry said in a release. Each had a shot from one of three manufacturing lots suspended on Thursday. The causes of death are being investigated."

Then from there it widens so now we talk about more and we're talking about more lots, more being put on hold and this, again, back to Reuters. Reuters had really been leading this thing with kind of like just the facts reporting. "Japan's Moderna vaccine contamination woes widen as regions put holds on shots. The latest reports of vaccine contamination came from Gunma prefecture near Tokyo and the southern prefecture of Okinawa, prompting temporary holds on Sunday on shots from two new Moderna lots." So at that point we're up to five lots, over 2.6M it says. "A tiny black substance was found in a Moderna vaccine vial in Gunma, an official from the prefecture said, while in Okinawa, black substances were spotted in syringes and a vial, and pink material was found in a different syringe."

So pretty big deal here when there's stuff floating around in your vials. You have the health minister of Japan had to come out and play damage control so he jumped in front of the media, "Japan health minister says Okinawa vaccine contaminants likely from needle stick." So that's what we heard, that's what the media was going with, needle stick, but literally a day after that headline we have the metal contaminants. Back around full circle to 2017, "Moderna," now is no longer on hold, they recalled them, "Moderna to recall COVID-19 doses in Japan after stainless steel contaminants found." And the health minister said basically that based on the information from the company, from Moderna's investigation, they don't think the steel poses any additional health risk.

So I guess we're all okay, all those 500,000 people plus that had stainless steel or whatever injected into them are going to be okay because the science suggests that injected stainless steel is safe and possibly effective. I don't know where they get these comments but you can see the balance, they're trying to have this balancing act where they're trying to get the vaccination rates up and then this inconvenient situation, to say the least, just plops right in their lap and they have to damage control it. And it's been fascinating to watch it and unfortunately, you know, two people have died and how many other people have been injured we don't know.

Del. And how many people have died that hadn't been reported or they're trying to hide it or sweep it under the rug. What a mess. Terrible.

Jefferey. Right, right. And so that's what's happening in Japan but in America here, we have a new, I guess we could call it a syndrome, a symptom that's appearing and it has a little bit to do with COVID-19 and a little bit to do with this guy. Take a look.

[video clip. The great Fauci flip-flop.]

Anthony Fauci, January 21, 2020. This is not something that the citizens of the United States right now should be worried about.

Anthony Fauci, July 28, 2020. There's no doubt that we knew that we would get cases here.

Anthony Fauci, February 29, 2020. There was no need to change anything that you're doing on a day-by-day basis.

[Headline, "Dr. Anthony Fauci: The highest paid employee in the entire US federal government."]

Anthony Fauci, July 28, 2020. You do those things, masks, no crowds, physical distance, personal hygiene, no doubt you're going to be able to turn these things around.

Anthony Fauci, March 8, 202. When you're in the middle of an outbreak, wearing a mask might make people feel a little bit better and it might even block a droplet but it's not providing the perfect protection that people think that it is.

Anthony Fauci, February 11, 2021. Make sure you wear a mask. So you wear a mask, then you put a cloth mask over which actually is much better.

Anthony Fauci, January 21, 2020. Another coronavirus that obviously jumped from an animal species. We don't know exactly how that happened.

Anthony Fauci, June 9, 2021. We have not ruled out the possibility that there could have been a leak from the lab.

Lester Holt, May 13, 2021. Should we have any worries about walking by someone on the street who may be unvaccinated?

Anthony Fauci. Not at all. I would have no concern walking down the street past a person who's not been vaccinated and even a person who's been infected because the protection is really quite substantial.

Anthony Fauci, July 27, 2021. We do know that the science shows now that even people who are vaccinated and get a breakthrough infection can transmit.

Anthony Fauci. All of the things that I have spoken about consistently from the very beginning have been fundamentally based on science so if you are trying to, you know, get at me as a public health official, on a scientist, you're really attacking not only Dr. Anthony Fauci, you are attacking science. You have to be asleep not to see that.

[end]

Del. [snoring] I must be asleep then.

Jefferey. Yeah, I don't think anybody is trying to get at him, I think they're just sick of him and this is apparent in the headlines. This was already in April of 2021, "Fauci fatigue," there it is, that syndrome, "sets in as top doc sows doubt in vaccine effectiveness." And now this is recent, we have a new Rasmussen poll, "Fauci fatigue" fewer than half of Americans have a favorable view of Fauci." And it says here, "The latest Rasmussen Reports national telephone and online survey finds...Forty-two percent (42%) view Fauci unfavorably, including 29% whose opinion of him is Very Unfavorable. Fourteen percent (14%) are not sure." And it's not really stopping with Fauci because here we had him come out again just recently and talk about kids and school vaccinations; even though we don't have the data for that yet, he seems pretty clear on it. Take a listen.

[video clip. The Lead with Jake Tapper, August 29, 2021.]

Tapper. Now that the vaccine has full approval from the FDA, the Pfizer vaccine, would you like to see it mandated for students elsewhere in the US, and once it's approved for kids under 12, should it be mandated for them too?

Fauci. You know, I know that a lot of people will be pushing back against that but if you get the imprimatur about the safety and the strong benefit/risk ratio for the children, when that gets established which I believe it certainly will by the FDA and the ACIP, I believe that mandating vaccines for children to appear in school is a good idea. And remember, Jake, this is not something new. We have mandates in many places in schools, particularly public schools, that if, in fact, you want a child to come in, we've done this for decades and decades, requiring polio, measles, mumps, rubella, hepatitis. So this would not be something new requiring vaccinations for children to come to school.

[end]

Del. What might be new is the, you know, requiring a vaccine for an illness that children are at zero percent risk of having any issues with and so much science is reported on that, so many world-renowned scientists saying do not vaccinate the kids, saying that, you know, the school environment is the safest place for anybody to be, they handle this virus so well, that ends up creating herd immunity and protecting everybody else. You're only putting the children at risk but apparently, you know, that's where he's at. So you know, of course, the world, we're tired of him and here in the United States of America, I'm sure the entire world is tired of listening to Tony Fauci.

Del Bigtree, thehighwire.com. I don't know that you've ever sent anyone down to the Tractor Supply to grab some horse paste and eat it, but what do you think of, you know, when you see that and you see Fauci saying there's no evidence that ivermectin works, what do you have to say about that, that thought?

Richard Bartlett, MD, ER Physician & General Practitioner. Okay, so there's an old saying if his lips are moving, blank. I heard the same thing about budesonide, he said that, he had an interview with Matthew McConaughey on the internet and he said to Matthew that, "Budesonide is just a placebo, Matthew. It doesn't really work."

[video clip]

Matthew McConaughey. Is there any downside to, to, you know, there are people that, that, that believe that budesonide and, and, and taking zinc is, is, is working, is there any downside to, to, to doing it?

Anthony Fauci. You know, there's a placebo effect to make you feel better and less anxious but in reality, Matthew, it doesn't have any effect.

Matthew. Okay.

[end]

Richard. Oxford University said the opposite. Oxford is the oldest university in the English speaking world since 1096, 72 Nobel Prize laureates. They say that he's wrong. They say that 90% of hospitalizations, urgent care visits, and you know, what has he said that's right? And so this is more of the same pattern of information going out from two different sources, one has been proven wrong over and over. I'll say that half of the people that I'm seeing in this infusion center have been vaccinated. I love people. I have loved ones that have been vaccinated, others that haven't. The problem is the virus and the problem is there's a tremendous effort to censor information and interfere with the science and facts and, you know, if you have a source like Oxford University and Fauci talking about facts and science, he just says something and has nothing to back it up.

[Headline, "Common asthma treatment reduces need for hospitalization in COVID-19 patients, study suggests."]

Del. Look, we've seen the studies, we've shown them here on the show, studies so powerful with ivermectin that they discontinued them because people were dying that were in the placebo group and they just couldn't watch it anymore.

[Headline, "Review of the emerging evidence demonstrating the efficacy of ivermectin in the prophylaxis and treatment of COVID-19."]

So it's amazing to watch the FDA, the CDC, Health & Human Services that are supposed to be caring about people sticking with what apparently is mostly the protocol around the country is, you know, go home, wait until your oxygen level drops so low that you're in critical condition, come back, we'll drug you and put you on a ventilator where you have

a 1 in 10 chance of dying. It's really nice to see here in Texas that they are moving into different treatments and continuing to pursue treatments, not just vaccinations. Obviously we're going to have to use everything we can as we get through this.

Do you see an end in sight? I mean, is there a surge, I guess is my question? We're in Texas, I feel like now more than ever before I know more people that are coming down with COVID, I know more people that are, you know, having a rough time. I don't know anyone that's died yet but it does feel like whereas last year I was like, I don't even know if this virus exists, this year I definitely feel like something's going on. Is there a surge going on from your perspective on the front line?

Richard. You know, January 30 in Texas we pretty much hit a flat line for four months and beat COVID, and then all of a sudden something new appeared. Something new appeared. Where did SARS-2 come from, Del? And so it could be something that comes from the same place. I've talked to a General, I've talked to a Colonel, I've talked to Congressmen about this, and so I'm saying we've got to think outside the box here and look at the obvious. SARS-2 came from a specific source, it came from a lab, as far as I can tell.

[Headline, "Origins of SARS-CoV-2: Why the lab-leak idea is being considered again."]

Del. Right, right.

Richard. And so I want people to think outside the box here. We were told by Fauci this is just a variant. Really? Based on what? I'm seeing that we have SARS-2 didn't just come from bat soup apparently.

Del. Right. Well, as those conversations change, it does start to make us question what is the purpose, where did it come from, whether then it was on purpose or on accident starts becoming, should be a much bigger conversation than it is in the middle of this, yet it seems to be avoided by all mainstream media that simply wants to tell us to avoid horse deworming paste.

Look, I know you're taking time away. I am so thankful to have you out there. Thank you for bringing clarity. In this case, the FDA is recommending monoclonal antibodies and it sounds like it's working right before your eyes, so for people out there I want to, we all want to thank you for continuing to just bring the facts as you see them and not getting caught up in any politicization of any of these discussions. Real lives are at stake and it's just great to know that you're brave enough to be out there on the front lines doing your job and telling the truth about it.

Richard. Del, I count you a good friend. I thank you for what you do.

Del. All right, thank you. Take care and get back to those patients. We love you.

Richard. Bye.

Del. Bye.

The Highwire.

[video]

Rabbi. Get vaccinated now.

Rabbi 2. Get vaccinated now.

Male speaker. Get vaccinated now.

Male speaker 2. Right now.

Male speaker 3. Why are you still waiting? Please get vaccinated today.

Rabbi 3. Let's do it as soon as we can.

Rabbi 4. Get vaccinated now.

Male speaker 4. Please, get vaccinated.

Rabbi 5. Get vaccinated. Get it done. That's what the doctors, rabbis, want us to do. Let's go.

Male speaker 5. Be smart. Be responsible. Get vaccinated.

[end]

Del Bigtree. When I watched that video, I imagined that these are really good men that really care about people. From my perspective, I can tell they obviously haven't done the research that I've done about this vaccine and I try to imagine what it's going to be like if the type of destruction that like the inventor of mRNA vaccines, Robert Malone, is concerned about or, you know, Geert Vanden Bossche, who was once running vaccine programs at GAVI, you know, Dr. Michael Yeadon. I mean, and you're amongst these doctors, when you watch that, what does it make you feel, think?

Vladimir Zelenko, MD, Successfully treating COVID patients. I see dead men walking. You know, if you look back into the Bible, when the Jews left Egypt, only 20% left. I don't know if you knew that.

Bigtree. No, I didn't know that.

Zelenko. 80% chose to stay slaves and then there was a generation in the desert where half of them died off. So only around 10% made it to Israel. So another way of saying it, that only 10% of the Jews or in general I would say all people, are able to leave the slave mentality and think, have redemptive thinking or think as free men.

So while I don't doubt the motives of these people, I agree with your assessment, but the arrogance to think that they know better than world class physicians...for example, I mean, I was the first to develop a protocol. Half of these people are alive or their family is alive because they used my protocol. I treated them all.

Onscreen. #ZelenkoProtocol

1. Identify patients with a high risk of dying.
2. Treat them within 5 days of first symptoms.
3. Use a triple drug therapy: hydroxychloroquine 200mg twice a day for 5 days, zinc sulfate 220mg once a day for 5 days, azithromycin 500mg once a day for 5 days

And you would think there would be some appreciation or at least take counsel with people who really know. My practice has treated almost now 7,000 patients. We've trained probably more than 1,000 physicians worldwide on how to treat COVID properly and they've trained their students. So as a collective group we've trained, we've treated millions of patients successfully and so we're the ones who have the experience. Most of these people that said...have not treated one patient so they're in no position to render an opinion that has any validity, in my opinion.

[Headline, "Baltimore Rabbis call community to vaccinate against covid."]

Now the world experts are saying the following, that in animal models these vaccines have been shown to kill animals because of an immune reaction called ADE. That's a fact. Now I'm going to ask a simple question: wouldn't it be a good idea to exclude that phenomenon from the human race before you deploy this vaccine on everyone?

Bigtree. It's one of the...yes, I agree. It's one of the things that I've been very concerned about and brought up a lot on this show.

Zelenko. So they're gambling, they're gambling with the survival of the human race, and according to many experts now we're beginning to see the start of ADE. The patients that have been vaccinated have higher and get sick, have higher viral load titers or levels than the unvaccinated. That means that they're going to be sicker and Israeli hospitals are filled with vaccinated patients.

[Headline, "Nearly 60% of hospitalized COVID-19 patients in Israel fully vaccinated, data shows."]

The three top countries in the world that have been...have the most vaccinated of their citizens is Israel, Gibraltar and Seychelles, an island nation in the Indian Ocean. They all have more than 85% vaccinated. They're all having huge outbreaks of Delta variant.

[Headling, "Jerusalem Post. Israel registers almost 11,000 COVID cases, marking new record. August 31, 2021."]

So whenever you evaluate any therapeutic, you have to, first of all, see if you need it, does it work, and is it safe? And in my opinion, in general there's no medical necessity for COVID-19 treatment, only in the high risk group which has a 7.5% death rate.

By the way, you saw they didn't give any facts, they didn't quote any studies, they just...it's rhetoric. It's propaganda.

Bigtree. Well, I'm going to assume this script is written probably by somebody in Hollywood, scripted it, brought it in, said this is what you should say, probably had some experts.

As we look forward, are you concerned that we may, I've said, made some fairly dramatic comments out there that when I look at ADE, when I look at the history of this vaccine with all of the animal trials, and I say to everybody all the animal trials, not some of them, all of them we're seeing this issue, it was a big enough problem that we watched Dr. Peter Hotez go before the Congress early last year and say there's this problem with immune enhancement that I think is going to be very difficult to get around, nobody seemed to care. We rushed into human trials. We rushed right out of those human trials to the population and now we have very highly regarded experts that are very concerned about ADE, that we may be seeing the beginning of this, high titers, high, you know, viral loads, a waning vaccine which was always the concern. Everybody that's worried about ADE, even though they'll admit they don't really know what causes it, the big concern is if you have sort of a drop in your neutralizing antibodies and what remain are maybe disease-enhancing antibodies. I've said I think that we may see one of the great human die-offs of all times because of this vaccine. Are you in, are you of that opinion or do you see it a different way?

Zelenko. I feel that we're on the verge of a genocide and I don't use that word lightly. I'm, my family was a victim of a genocide. In World War II, over 40 of my relatives were shot or buried alive in a place called Babi Yar outside of Kiev so I know what genocide is, I grew up with stories about it, so I don't use that word lightly. And I hope I'm wrong. I hope I'm ridiculed for the rest of my life because if I'm right and if the world experts are right, then what we're really looking at is a death rate, according to some opinions, of 90% of the vaccinated people. Now do I think it's going to be 90%? You know what, let's say it's only 10%. So think about it. There are 2 billion people already vaccinated, 10% of that is 200 million people. That's not enough?

Bigtree. It's huge. It's huge. I mean, as I said, that would be the largest human die-off that I know of.

Zelenko. Do you know what the death rate would be if every single human being on the planet got COVID-19 and they were not treated? It would be less than .5%, that works

out to be 35 million people. Horrific. I would never advocate for 35 million people to die. However, if they're treated properly, you can reduce that number by 85% to 5 million people. So assuming every single human being on the planet got COVID-19 and we treated the high risk patients properly, we would have 5 million dead people out of 7 billion.

You know, I think Bill Gates is a sociopath. I think we're all suffering because he couldn't get a girlfriend in high school. But what he said in 2015 at a TED lecture, you know that, that the world population should be reduced by 15% because of global warming. Then last year, this same guy said that 7 billion people need to be vaccinated. This is all on film. So I'm going to ask you a simple question: why would I take a vaccine for my health advocated for and financed by someone who wants to reduce the world population?

Bigtree. I would not think that that would be the best person to take that advice from. I agree with you completely.

Zelenko. Right. So depending on what percentage you believe, Dr. Dolores Cahill is saying 90%, other doctors are saying 75% or 50%. I just told you if every single human being, 7 billion people got COVID and we treated people properly, the death rate would be 5 million people. Compare that to an estimate of, let's say, 10% of humanity, 700 million people.

Bigtree. Yeah. And we're talking about, you know, over time that cancers, the autoimmune diseases, all these and the quality of life that is going to be on the horizon. What in your mind when you think that through, when I think of that video with all of these Rabbis saying get your shot, do what's right, you know, and I think of all the politicians all around the world, Israel, America, you know, the UK, you name it, Australia, I don't think, I don't believe they're all in on some desire, maybe Bill Gates has a different agenda but these people are doing what they believe the experts told them to do, what will that moment be like when it sinks in on these Rabbis, when it sinks in on these politicians that, "I led millions of people to their death"? If that ends up, and you know, and I pray with you that we're wrong, but when we look at the science, do you imagine what that will be like? And how about the people that trusted those spiritual leaders, those political leaders, what happens to our society?

Zelenko. So we're segregating into two groups. I really believe that we're being tested by God here and that every individual is being asked one simple question, "Who are you going to seek salvation from? Are you going to bow down to Me who makes you, who loves you, vivifies you every second and put your trust in Me? Or are you going to bow down to sociopathic oligarchs, corrupt governments, or the golden calf of this false vaccine? Because if you do that, let's see how that works out for you."

So I think really the great...I'm a globalist and I believe in the great reset but in a little different way. I think God is the King of kings and that He has global dominion over the world, and I think we need to reset the world's mentality from paganism and idol worship

and child sacrifice to service of the Creator. So I'm a globalist and I'm a great resetter but completely different than the World Economic Forum who wants to enslave humanity by making you co-dependent on all this finite government forces and personalities and so on. You know, they say you will own nothing and you'll be happy. What kind of sociopath says that?

Bigtree. I know. Only one that's going to be the one that's renting you everything.

Zelenko. So I think we need to...now here's a piece of advice: there's many more of us than them. You know, during World War II, one Nazi with a German shepherd could corral 1,000 Jews into a gas chamber when all they had to do was turn around and trample him. Because of the demoralization of the individual, because of the fear and the isolation, people have become sheep and the reality is there's many many more of us than them, and what we really need to say, I can't really say what I want to say, but I will say that, "No, I will not take your vaccine. I will rather lose my job or lose my position in school, not travel on an airplane, but you're not going to coerce me into taking a course of action that will limit my future. I'd rather sacrifice the present and have a future than sacrifice my future for some conveniences in the present."

Bigtree. Very well put.

Zelenko. And the reality is that unfortunately there are going to be a lot of job vacancies. I wouldn't worry about finding a job.

Bigtree. Right. Yeah, it's true.

Zelenko. So you have to have, you have to value your life. You have to understand you're made in God's image, your soul is a part of God, and you have to sanctify it by staying alive and serving Him and not give into your fear and run to false gods. I think society is going to segregate itself into two groups. It's already happening.

Bigtree. Who wins?

Zelenko. God always wins but it's going to be a little bumpy because we need to be, the house needs to be cleaned up and a lot of these globalists, these false globalists are doing the job of cleaning up the slave mentality.

Del. No matter whether you're terrified of Delta or not, you shouldn't be because it looks like it's even lightening up from the place we're at. Here it is, this paper was, "Infection fatality rate of COVID-19 in community-dwelling populations with emphasis on the elderly: An overview." It goes on to say this, "Data Synthesis. Twenty-three seroprevalence surveys representing 14 countries were included. Across all countries, the median IFR," that's infection fatality rate, "in community-dwelling elderly and elderly overall was 2.4% with a range of somewhere between 0.3% and 7.2%, and 5.5% with a

range of 0.3% to 12.1%. IFR was higher with larger proportions of people over the age of 85 years, and then younger age strata had low IFR values," infection fatality rates, "median was," look at these numbers, "0.0027%." These are the people that Fauci wants to inject with this vaccine and force masks, or "0.014%, 0.031%, 0.082%, 0.27%," and at the highest, "0.59%," and those are the age groups that go with those percentages, "0-19, 20-29, 30-39, 40-49, 50-59, and 60-69 years." If that's a little bit confusing, let's just look at how this was tweeted out that makes a heck of a lot more sense. Here you have it: if you are between the age of 0-19, your infection survival rate is 99.9973%. All the way up to 19. We're vaccinating people in those age groups above the age of 12 and there's absolutely no reason for it. 20-29, look at this, we're getting to adults, 99.986% survival rate. 30-39, 99.969% survival rate. 40-49, you have a 99.918% survival rate. 50-59, 99.73%. 60-69, 99.41%. Here it comes, the doozy, 70+, 97% is where it finally drops down to anything that might even be considered significant, 97.6% and then 70+, 94.5% (all).

So when you look at those numbers, there's clearly one at risk group, this is what the great Barrington Declaration has always said, it's what we've been saying on High Wire. Can we just figure out a way to protect that tiny little group that are actually at risk and leave the rest of the world out of this so that we can get on with our lives? When you break this down, somebody put out a neat tweet that sort of looked at other things that have the same risk ratio. So there you have it, "The mortality risk COVID-19 changes of dying of C19 by age group with comparable overall odds to the population," this is based on the Stanford Study that Ioannidis just did. If you are between the age of 0-19 with that survival rate we just talked about, 99.997%, you have a 1 in 37,036 odds of dying, similar to the odds of dying from sharp objects. I actually think it's similar also to dying while inside your house while sleeping in your bunk bed below your sister wearing your rubber Batman costume. All right, but then at 20-29, 99.986% survival rate, 1 in 7,142 odds of dying similar to the odds of dying from sunstroke because that happens all the time. At 30-39, survival rate 1 in 3,225 similar to the odds of dying from choking on food. 40-49, similar to the odds of dying of drowning. 50-59, similar to the odds of dying in pedestrian accidents. 60-69, similar to the odds of dying in a car crash. And then 70+, similar to the odds of dying of chronic respiratory disease.

Folks, you're still walking down the street, you're still swimming in swimming pools, and you're still sleeping in a bunk bed below your big sister who always takes care of you and hopefully the walls of your house will too, yet we are living in this insane world whereas I just spoke to an audience the other night in California, I flew out there, and I said to them all of you are being pressured, you're being pressured by your employers that you're going to have to get vaccinated to hold onto your job, and you're all saying to yourself, "Well, you know what? I don't know what to do. I don't want this vaccine. I hate all the science. I'm watching the High Wire. But when it comes down to it, I've got to feed my family." And do you know what I said to that audience in California? How do you plan on feeding your family if you're dead? I'm serious. You have world-renowned scientists that are putting death into the equation, rise in mortality and morbidity from the mouths of Dr. Robert Malone and all of these people, while on the other hand Ioannidis is telling you you have a 0.something0 risk of actually dying from this virus.

You know that. Are you really going to get into that train car wherever they say it's going for you, because it told you you might be able to still feed your family? We have got to wake up. We've got to remember our history. In Israel it looks like slowly but surely maybe some populations there are starting to remember, "Man, we have a history with this and it's not good." We've got to wake up. We can't just bow down to our oppressors, companies that once did awful things to us that now say they're our Saviors and they override our God. Come on, folks, now is the time. The only reason they are getting away with this is not because they have the power, because they have the majority, it's because we aren't talking to each other, we aren't waking each other up, and we're not recognizing that in a hospital where I think I'm the only nurse or I'm the only doctor that doesn't want this vaccine, only because you're not talking about it in the snack room. Why don't you start talking about it? Why don't you find out how many of you there are? Because I'll bet you, based on the headlines and stats we're seeing, it's about 50% of you that don't want that vaccine, and if you just walk out instead of quietly taking it so that you can feed your family for the next five days that you're alive...

Do what you've got to do. It's up to you. All we can do is give you the truth. I'm never going to tell you what to do but I know that there's a future ahead for us that doesn't have people that lie and back-flop and flip-flop back and forth, that argue with each other over facts. Can you imagine what's happening in the FDA? I wonder if they're asking each other, "Is there any way I can censor the other scientists across the table from me right now? Because we've been doing it to the public." Now that you're not agreeing on your own science, I wonder if you'll want to censor each other. Is that where we're at, censorship, lies, deceit, forced vaccinations that don't work, death in our midst?

All of this, you know the truth because you're watching the High Wire.

Larry Wessels. "Visualizing the history of pandemics. Throughout history, as humans spread across the world, infectious diseases have been a constant companion. Even in this modern era, outbreaks are nearly constant. Here are some of history's most deadly pandemics." Okay, as we look down this chart, just showing it for visual effect, we see all these pandemics. One chart to the next. It's giving a quick synopsis of each of these historic pandemics. As we go to the death tolls here, the larger the virus molecule, the more people die from it.

Okay, now for this chart here, we see that we've got all these pandemics from this first one:

Antonine Plague of 165-180, believed to be either smallpox or measles, 5M died approximately.

Then we have the Japanese Smallpox and we have 1M there from the Japanese smallpox.

The Plague of Justinian, we have 30-50M people.

The Black Death during the Middle Ages, 200M people died.

Then we have the New World Smallpox outbreak, 56M.

Great Plague of London, 100,000.

The Italian Plague, 1M.

Cholera Pandemics, 1M+.

Third Plague, 12M, that was in China and India.

Yellow Fever, 100-150,000 people in the United States.

The Russian Flu, that was 1M people.

Spanish Flu, now my grandfather got that one because he caught it in the first Word War, anyway but he survived, thank goodness, because that's why I'm here. This is Larry Wessels speaking. 40-50M people.

Asian Flu, 1.1M.

Hong Kong Flu, 1M.

HIV/AIDS, 25-35M people died.

Swine Flu, 220,000.

We have SARS, 770 people.

We have Ebola, 11,000 people.

We have MERS, 850 people died.

And now we have the infamous COVID-19 Pandemic and according to these numbers here, it says 2.7M people but we know, as we'll find out later in this video presentation, that much of this death toll from COVID is manufactured based off of a phony COVID-19 test that's given as a nasal swab. We'll get into the details about that. So once someone is said to have COVID, no matter what they die of it's called a COVID death. You get killed in a car wreck, fall off a ladder and break your neck, it's a COVID death. So whatever, we'll get into those details later.

What I'm trying to show here is you see this next chart and so forth, that the numbers for COVID are highly manufactured unlike all these other pandemics that were real in nature.

Dr. James White – Alpha & Omega Ministries. What's most frightening to me is that this is a man-made media-driven panic. There was a study that came out just a few weeks ago that was immediately pulled from the site that posted it, it's only available on Archive now, that dove into the numbers and basically said there really hasn't been excess mortality, and dove deeply into the numbers to say it looks like because other forms of mortality have lessened, that there has been an inappropriate classification of COVID deaths. Now we all know that that's been happening. The public representatives came out and said, "If you die and you have a positive COVID test, it's a COVID death."

Anthony Fauci, yes, the Anthony Fauci this past summer admitted in talking with fellow, with virologists, that the PCR testing that we're doing right now is subject to wild false positives, a wild number of false positives. He admitted it. He talked about it. And so you have the deaths...anybody...honestly you can have a person in hospice on pain meds in their last week of life, and if they get the coronavirus, that's what killed them. They wouldn't have lived another five days but it doesn't matter, there's a positive PCR test for COVID, that's a COVID death.

That's created a massively large number of deaths which the media, and we don't have a free press in America any longer, the media as a group has used to create a massive sense of panic, panic amongst the people. That's what's going on and so the mindset is we have a horrible thing going on, people are dying in the streets, we've got to have refrigerator trucks, the CCU's are full, even though that's a complete fraud as well, it was from the start. I worked in a hospital. The CCU was almost always full and that wasn't during any pandemic. They want it that way. That's how they survive. They plan things so as to have a certain amount of occupation. People don't understand these things. We have had a numbers game run on us about CCU beds, we've had a numbers game run on us about mortality rates and numbers.

Listen to what Anthony Fauci says in this conversation "This Week in Virology." Now look, folks, "This Week in Virology" is not on CNN, it's not on MSNBC, and they have nobody in their staff that have anything, any idea what any of this stuff is talking about. But listen to this clip. Listen what's said here.

[audio clip]

Anthony Fauci. Right. Again, a good question and what is now sort of evolving into a bit of a standard that if you get a cycle threshold of 35 or more, that the chances of it being replication competent are minuscule, so that if somebody, and you know, we do, we have patients and it's very frustrating for the patients as well as for the physicians, somebody comes in and they repeat their PCR and it's like 37 cycle threshold, but you never, you almost never can culture virus from a 37 threshold cycle.

[end]

James. Okay, now I understand why that did not go viral, okay? I even tweeted if I told you that Anthony Fauci said that anything over 35 cycles in a PCR test is worthless, how many of you would have any idea what I was talking about? And most people just honestly wrote back and said, "I don't, I don't have any." I said without Googling it and they're like, "I don't know." I had a couple of doctors go, "Yeah, I do. It's significant but I'm a doctor so that's why I know."

The PCR, the way that they are seeking to detect the signatures of this virus is by causing those little fragments that are identifiable in the shell of the virus to replicate themselves, and so you go through these cycles where it doubles it and doubles it and doubles it and doubles it and so you get to 35 and what he's saying is once you get past that level, you can't have any confidence at all, he said minuscule, I thought that was interesting, you can have no confidence that once it finally comes up and says, "Ah, there it is," that that actually means anything because you have magnified it, you've multiplied it so massively that it could be anything.

I remember when my wife took, I think at least two, maybe three tests when she was still working, always came back negative but they always sent stuff back with her that said even if it comes back positive, that doesn't mean that you have COVID-19. You might have had a cold recently, or all sorts of other things like that. Why? Because that's how PCR tests work.

So he's saying past 35 and beyond, worthless. What's the standard in the United States right now? Forty, 40 cycles. That's why we're getting this...we have right now a test-demic, not a pandemic because not only do you have the problem with the PCR but we are also testing – are you ready for this – 670 times more than we have at this point in time in any year past, for example, for flu. If you went back to 2017-2018, took the numbers of positives then, and then multiply by 670, we had a worldwide pandemic in 2017-2018 and you didn't even know about it, did you? Nope, nobody did because it's playing with numbers.

All the death numbers, no one knows how many people die in the United States every single year so they've got no context to put it in. So you can play with PCR, you can play with this stuff, and we have been gamed and gamed royally. So this has created a massive panic even among, I know scholars, I've got a scholar on twitter that follows me, and in the field he's in, he's great but, man, he's bought all this stuff. He's bought all of this stuff. It's just, "Oh, there's people dying all over the place." You know, if you applied your standards of scholarship to this area, you wouldn't be believing this stuff but there you go.

So there's the context and that is why we have what's happening now. Think about it. We have hundreds of millions, because we're treating Moderna and the other one, I think that's over 100 million right there and that's just in the United States, they're already doing it in Britain and Russia and places like that, hundreds of millions of these vaccines and most of us are sitting there, I was sitting here until just recently thinking this is

similar to how we do flu shots and things like that. Until I started doing a little more reading in the articles that don't get viral because they're so complicated, and that's when I discovered this is the first time we've ever done this. Now we've used this technology in extreme situations of like cancer and stuff like that, but for a virus we've not done this. We are using our CRISPR technology, the technology that's developed really over the past 15 years, to play with genetics and we've created an mRNA strand, a messenger RNA strand. Now if you know anything about genetics and you're going, "What do you know about genetics?" Well, back in biology in college I raised 35,000 drosophila melanogaster fruit flies my senior year studying a certain locus on a particular gene. I know a little something about it. It's dated knowledge but I know something about it, and if you know anything about genetics, you know that our chromosomes are made up DNA, we've mapped the human genome now. DNA is that double stranded nucleotide and RNA is a single strand. And so RNA is very much involved in the transcription of DNA where you've got certain enzymes that unzip the DNA and then read it and create a single strand that comes out from that and then it zips it back up again.

It's just, talk about intelligent design. It is astonishing. I mean, the ability of the Creator to make these things is just so far beyond anything we even have now. We're just now after all this time come up with the ability to start playing with His stuff which is frightening. In a Christian worldview it would be great. Without a Christian worldview it is the stuff of the worst nightmares of the worst dystopian films and books you'll ever see. It is "I Am Legend" all over again.

So anyway, so we've come up with this technology where we have made an RNA strand, that's what's in the vaccine, and the RNA strand goes into cells in your body and instructs those cells, whatever else they're doing, to start producing antibodies to the coronavirus. So you're hijacking the cells of your body and using genetic information to cause them to produce antibodies for the coronavirus. Now this has never been done before. Any other vaccine you'd need to have one, three and five year safety studies. There are no one year, three year and five year safety studies here. Can't be. Operation Warp Speed. Can you imagine any situation, any situation that could warrant immediate introduction of hundreds of millions of vaccines into a population with less than four months of human studies? I can't think of one, and if you had not produced the panic that has taken over the minds of, it looks like, at least 40% if not 70% of the human population, this would never be happening. We'd never allow it. We'd never allow it. It wouldn't be done. But we're doing it.

Today the Food and Drug Administration demonstrated that is just as politically corrupt and irrelevant to medical science as the CDC, and that is without public comment in a way never done before, at a speed never done before, on a foundation never provided before. The FDA now says, "Oh, those vaccines? They're great. They're approved." And so now the President is out there saying to all employers, "You need to mandate vaccines." And as was pointed out by a medical doctor who knows a billion times more about virology than Joe Biden ever could, we are vaccinating for last year's disease. We're vaccinating for last year's disease. This vaccine was developed when there was no Delta variant and there was a report out of the UK, PHE report, that indicated that for

vaccinated individuals below the age of 50, the current vaccine is 1/3, about 30, it's either 31 or 37%, I didn't pull it up, it's in the 30s percent effective which means that 60-70% noneffective.

We are vaccinating for last year's disease but forcing it into people anyways because it has nothing to do with stopping a virus and we have never, I have challenged people on this, it stops them dead in their tracks but then they just go on, the Karen cult has them, and I've never had anyone provide a single answer to the following question: name me a single respiratory virus that has been banished from the human experience through the use of vaccines? It doesn't exist. You can't get rid of respiratory viruses with vaccines. It's not possible. And so that's the goal. As I drive down my roads right here in Phoenix, Arizona, the street signs tell me that I can have my part in getting rid of COVID-19. It's a lie and the vast majority of the American population is so ignorant of basic biological facts that CNN has been successful in convincing them that, yes, you can. Okay, name me one other we've done. They can't and as soon as they start trying to, "What about measles?" That's not a respiratory virus.

So what you do is you set up an absolutely impossible goal and that way you keep the war going all the time. Just look at what, look at the formerly free and beautiful city of Melbourne... I sort of feel like AOC because we know that AOC has been getting therapy and stuff because of January 6 because she was so close to dying even though she was in a different building and no one ever came close to her. But she was so close to dying that she's been getting therapy and stuff like that.

Well, what? Yeah, I know that. I know. Yeah, I know that. I know that.

But I sort of can now understand where she's at because I was in Melbourne in December of 2019. Yeah, and I think it was December, 2019. It was 2019. It was the last time I was in Australia was in 2019 and I thought it was December, sometime around there. And I got out just in time because it's now a prison city. It's a prison. Did you watch the video of the Australian cops just whaling away on people, choking them out, spraying kids in the eyes, you know, because they were protesting this draconian tyranny that has now descended upon them. I got out just in time and I'm sorry for you guys. I really am. I really honestly am because there are great guys down there but you have succumbed to tyranny utterly and completely. We may all but some are going to go down with a fight and some are not, and down there it just doesn't seem like... Well, Willie Wallis did put in a, did you see William Wallis show up for the....? There was a guy at the Melbourne protest that showed up on horseback and he's literally riding around screaming about freedom.

No, it wasn't Horns Man, he had no horns on thankfully. Now he's still, oh yeah, he's, all those people are gone forever. We literally have political prisoners in the United States that because you offended the Left you are in solitary confinement and you will never see the light of day again. It's astonishing. It really really is. We are there. We've got Pravda going, the whole nine yards. It's just, they've just got to pick us off one by one to get that thing working.

So anyways the FDA approving these things that in any other ear of our experience would have taken minimally and given the experimental nature and the VAER's reports, the confirmed deaths of pericarditis, spontaneous abortions, etc. etc. would have been a minimal seven, probably 10 year process and here it is, what, they started in December, I think? Less than a year and here we are which, to me as a rational person going give me the safety data, show me the facts, they decide they're not going to have that part of the discussion anymore. The public doesn't get to ask questions. The public doesn't get to express their concern. It's just, "No, we've decided it's good, it's fine. Let's go." And you know why that is, they can't answer those questions, they know that. They know it and so there you go.

So the FDA today proved itself to be just as much of the shill of the Left as the CDC. I would sit here and say change my mind but what I'd like is show me facts. And you can't. You can't. You won't. You're not allowed to have that give-and-take anymore, and if they knock this video down, just further proof, absolute evidence that they simply can't engage with this stuff.

Do you see what's going on in Israel? Did you see the graph, the spike in Israel? Israel is one of the most vaccinated nations on the planet. Like I said, we're vaccinating for last year's disease. And Fauci's even said it. Everybody's said it. The next variant after Delta which for some reason they're called Lambda, I'm thinking about starting an online petition to require people to actually learn the Greek alphabet before they start using the Greek alphabet. Lambda is not the next letter after Delta but they may have decided it's the most recognizable or the friendliest, I don't know. Maybe it's because it starts with LGBT.

Anyway the next variant, our vaccines will be irrelevant to it. Irrelevant to it and so now that you've gotten everybody to actually accept the idea that vaccination is the only way, unlike everything we've ever done in the past, now it's like 2019 and beforehand was the Stone Ages, man. Stone Ages. We don't care what we did back then. We don't care that we treated these things, that we focused upon things that are effective treatments. We have to prevent it because every case is a terrible thing.

Well, again pure deception, ignorance. If you apply that in any meaningful way to the rest of the family of human diseases, we're done. The only way to deal with cancer and heart disease and tuberculosis and meningitis and leukemia and everything else, I know leukemia is a cancer, is to give all power to the elites. It won't change anything. They don't care if you die but you'll feel better and some Christians will tell you you're loving your neighbor in the process.

An article from the Calgary Herald by John Van Sloten, pastor up in that area, that, let's see, "This week, our church leadership team decided that when our church opens for live gatherings next month," which tells you where they've been all along, "all attendees 12 and older will need to be fully vaccinated. Even though it's a temporary measure," temporary measure, remember temporary measure? Remember what temporary measure

used to mean? Three weeks to flatten the curve, two weeks to flatten the curve whatever? "Even though it's a temporary measure, and there will be online alternatives, and unvaccinated people will still be able to attend with proof of a recent negative COVID test, it still feels wrong." It should. It should, Pastor Van Sloten. It should feel wrong.

Now again, this is a church that's been closed for how long now? I mean, they're not even opening up until next month, that means they've probably been closed for 15-16 months. They need to be aware of the fact that a lot of churches that have been closed that long, when they reopen discover that 80% of their people are gone and are never coming back. And to be honest with you, if you closed your church that long, your church needs to be gone. I have no problem with your church just simply disappearing. If you've been closed since March of last year, then you've abdicated all of your responsibilities to your people and they've gone elsewhere, and a lot of us churches who never closed are bursting at the seams because we know where your people went. They wanted to hear the word of God preached. They wanted to have the Lord's Supper. They wanted to see baptism. They wanted to have fellowship. And they're members at our church now. That's how it works. That's how it works.

So I'm honestly, I look at something like this and I'm like, "I'm not surprised." It would not surprise me in the least bit for Andy Stanley's church to do something the same. Yeah. Why would that surprise anybody? And if that means fewer and fewer people hearing a watered-down governmentally-approved message, no problem. It's okay. But it's when the government comes along and says that's what you're all gonna have to do and you know, you know that's what they're going to do, and one of the things that will encourage them to do that is people like this. "Well, they're Christians and they think it's just fine. So you're not really representing a Christian position." That's the issue. That's what's going to be hitting us right up the head.

What About Romans 13 & Governments?

Speaker. So let me ask you this, so you started in the beginning by you mentioned that, that infamous phrase that we hear so often from Christians, "the law of the land," and you said that, you know, part of your concern with the legalization of marijuana is that Christians take their cues from the state, unfortunately, rather than the scripture. And so the law of the land, I hear that, you know, that phrase used so often and I know that you have also especially in 2020 and 2021 now with everything that's happened with, you know, coronavirus and draconian lockdowns from the state, where in scripture, could you help us, where in scripture, is that Romans 13? Where would we get this phrase "the law of the land," and how is that, because people would say, "I'm obeying God's law, aka the scripture, by submitting to the law of the land." Why is that wrong-headed?

Pastor Doug Wilson. Okay, so it's wrong-headed for a number of reasons and we need a lesson in basic civics first. So Romans 13 was written to the church at Rome that was the capital city of a pagan empire that had no believing laws, no believing traditions, no

believing institutions at all, okay? So it was a Christian church starting from scratch. That means that when Paul arrived in Rome, he didn't start circulating clipboards and petitions to get the gladiatorial games banned. He had bigger fish to fry. What Paul wanted to do was plant churches.

Now the planting of these churches all over the Roman Empire is what resulted in the gladiatorial games being banned three centuries later, but it was going to take some time, okay? So Paul was in a very different situation than we are in, all right, because the existing authority, when he wrote Romans 13 and someone said, "What are these existing authorities that you're talking about?" He would say the emperor, the senate, here are the laws, this is what I'm dealing with, and these laws are all fundamentally pagan, they're built on wrong assumptions, but these are the people you should pay attention to right now, okay? Now a Christian in the 21st century, when a Christian asks who are the existing authorities, what are the existing authorities right now? When the Christian responds, well, the emperor, you know, whoever the guy on tv is telling me what to do, Fauci is the existing authority, or you know, I saw a great meme where it says, you know, "I believe the science," and the retort is, "No, you believe the television." So there's this talking head on television telling you that this is the law. The governor comes on and says everybody has to stay in their basement, or you all have to stand six feet apart, or you can't go out without wearing a mask, okay?

Now when the Christian talks that way, as though the governor of Illinois or the governor of Michigan, or the governor of California, is in the same relationship to him that the Roman emperor was in to the average inhabitant of Rome, what they're doing there is they're ignoring the actual existing authority. The actual existing authority is the Constitution, okay? So since the Apostle Paul wrote those words, we've had 2,000 years of Christian history, church planting, civilization-forming, bringing our laws and our customs and our Constitutions into closer conformity with spiritual, all right? That means if the President of the United States or the President of some intergalactic thing came on the television and said, "Everybody has to wear a pink beanie tomorrow because I said so," okay? Now the reason I would disobey him is not because I think it's okay to disobey the existing authorities, it's because I don't think it's okay for him to disobey the existing authorities.

Speaker. That's right.

Pastor Doug. So the President has no authority to tell me to wear a pink beanie. He has no authority.

Speaker. It's a shame because you would look fantastic in a pink beanie, Pastor Doug. I think it would be a good look for you.

Pastor Doug. It would be fabulous. It would be fabulous. So when someone says you must do thus and such, the response ought to be, "By what standard are you, what authority are you appealing to when you're telling me to do this?" So when our governor, when the governor of Idaho declared an emergency and declared a lockdown on the basis

of his gubernatorial powers to declare an emergency, I went and read the Idaho code and he did not have the authority to require what he was requiring of us, okay?

Now so here's just to make the problem a very simple one and stay with the illustration of the pink beanie, if the President says, "You must wear a pink beanie," and I go look at the Constitution and I see that James Madison had the foresight to include and under no circumstances may the President tell you to wear a pink beanie, okay? I can read, I have a copy of the Constitution, I read this and then I look at the declaration the President just made, okay? Now my objection to him is that he is disobeying Romans 13. I'm not. If I go out without my beanie, I'm not disobeying Romans 13, he is.

So the thing that Christians don't recognize is that we have a highly-developed Constitutional system, court system, legislative, we've got dual federalism, we've got divided government at the federal level, we have a federal judiciary, we have federal legislative authority in Congress, and that's divided so there's a House and a Senate, then we have a federal executive. Then the next layer under is every state has those three functions, judicial, legislative and executive, and all of the states with the exception of Nebraska have bicameral legislatures. So Nebraska has unicameral legislature, all the rest have bicameral, so we have divided the authority, the existing authority that is established in our system has been spread thinly and pushed into every nook and cranny, and if the President suddenly stands up and says, "I am the king of the universe and I'm going to require you to start doing these bizarre things," he has no authority to do that. He has no authority to say that. He's not an absolute dictator. He's not an absolute despot. He can't do certain things.

Now when he tries to do them, if Christians stand by and let him do those things, then they are the ones disobeying Romans 13 because they are the ones, they're disregarding Paul's instruction to obey the existing authorities.

Speaker. I completely agree. Put another way to say that, you know, when Paul's writing in his letter to the Romans, it's one big difference is, you know, we're not subjects of a monarchy but rather citizens of a democratic republic, at least for the time being, and so that's a massive difference and so you're seeing all these human officials because the highest civil magistrate in our land is not a human official by design but rather a document. All these other human officials in our land are actually lesser magistrates that ultimately are called to submit to the highest being the federal and state Constitutions. And so when they're not obeying Romans 13, when a lesser human civil magistrate is in rebellion towards their authority, namely the Constitution, then our rebellion to that lesser civil magistrate is actually submission to the higher authority and righteous. Would you agree with that?

Pastor Doug. Absolutely. That's absolutely the case because you can watch the new President on television put his hand on the Bible and raise his hand and swear to uphold an authority that's higher than he is. All right, that's fundamental. That oath means something.

Are Leftists, Socialists, and Globalists Scientific?

Dr. James White – Alpha & Omega Ministries. So here is a woman who is introducing this amendment in the Ohio House of Representatives and so here's how the Left behaves. This is just an excellent example of the Left cannot argue this, they can't debate this issue, they are incapable of doing it. They know it. That's why they shout people down, censor them, because they can't debate it. So here's two different views of the same event.

[video clip]

Female speaker. Move to amend, 1,594.

Male speaker. The jury has the amendment. The amendment appears to be in order. The representative may proceed.

Female speaker. The Save Women's Sport Act is a fairness issue for women to be able to achieve their dreams in athletics in our state.

[end]

James. Now by the way, when it starts happening, watch the faces of the representatives behind her too. I found that rather interesting too.

[video clip]

Female speaker. It's crucial to preserving women's rights and the integrity of women's and girl's sports. Across our country, female athletes are currently losing scholarships, opportunities, medals, education and training opportunities.

[loud banging]

This amendment will require schools that are part of the OHSAA...

[loud banging continues throughout with inaudible shouting]

...to designate separate teams for participants of the biological sex. No school interscholastic conference or organization that regulates interscholastics shall permit biological males to participate on athletic teams or in athletic competition designated only for biological female participants.

[end]

James. Okay, so there's the one shot, all right? Here is the shot where you see the people who are acting like orangutans, okay? They're banging on stuff, they're just, they're acting like you would see animals acting in a zoo instead of like you'd see people acting, you know, like in the legislature, you know? Or actually raising serious argumentation. No, no, no. No, here we go.

[video clip of man banging on table and yelling continuously]

James. So there's the guy. I looked him up. He's from an urban area, shall we say. Good Democrat yelling, screaming, pounding. This is the Left. This is the Left. There it is. There's no rationality. There's no reason. There's no way to debate these people. They can't debate, they're incapable of it. All they can do is yell, scream, pound. It reminds, well, it's the Brown Shirts. It's the Brown Shirts from Germany. That's how it works. That's how it works.

Larry Wessels, Director – Christian Answers. Welcome again to one of our programs. This is Christian Answers of Austin, TX, and we're also known as Christian Debater and I want to thank you for being with us again for Christians Answers Presents. I'm Larry Wessels, your host, and I'm the Director of this ministry and we generally deal with issues that confront the Christian church, the gospel of Jesus Christ, and of course, our standard is the word of God, the Bible, and we believe that in this world of confusion, that you should use the Bible as your standard, the word of God, and after all, that's what the scripture itself says in Psalm 138:2, God has placed his word over all his name, that's in the King James Bible. And Jesus himself called constantly on the authority of the word of God as to be taken literally as that, and to be what we go by. So looking at issues in the world, that is how we're going to approach this.

Now we have a very special guest on our program today, Greg Bentley. You can see him there now. Greg, thank you so much for being with us, brother.

Greg Bentley, Director – Berean Beacon. Well, thank you for having me on, Larry. I really appreciate it. It's good to see you again. It's been quite a few years I was down in Austin.

Larry. Yes. Well, last time I saw you, you didn't have a gray beard, so you gained a lot of, you look much more wise as one of those sages that sits and meditates on the top of a mountaintop now, you know? Instead of a young guy that doesn't know anything. So we're going to lean on your wisdom of the ages here to get a better understanding of the subjects we are about to detail.

Now I want to introduce to the folks at home that Greg here has taken the place of our well-known guest on this show for years, Richard Bennett, who was a former Roman Catholic priest for 22 years and has been on a multitude of our programs over the years and, in fact, Richard and I and his wife, Lynn, we all went to the same church together in Austin, TX. So, you know, Richard now, of course, has gone on to be with the Lord and Lynn, his wife, as well. And Richard left the stewardship of his ministry, the Berean Beacon, to our guest, Greg. Greg, that's kind of a big responsibility to take over someone who is so widely known as Richard and who has so many fans around the world as

Richard. So could you tell us a little bit more about your association with Brother Richard.

Greg. Well, I had known Richard for quite a few years back in the early days of his ministry while he was an instructor at Multnomah University Christian College in Portland, and we developed a close friendship at that time. It was about a little over close to 25 years ago and I just started to fill-in wherever Richard would need help and help get him down to Austin, and then from there as his ministry grew, I filled in behind the cameras and did most of my work behind the scenes for Richard. I learned a lot from Richard. He certainly, those are big shoes to fill. My intent was not to try and replace Richard but to carry on what he started which was a great work in exposing the false teachings of the Roman Catholic Church but also to preserve his evangelistic materials. We have interviews of former Catholics that are out on the internet and hopefully to carry on in that work of exposing the works of Rome, but also to reach and evangelize Roman Catholics.

So that's kind of how I got involved with the ministry and then when Richard passed away, sadly just a year before COVID, just months before the COVID pandemic hit the world, and so the ministry has had to take on a different tack but prior to COVID, Richard had spent really the last 10 years of his ministry exposing the Vatican's global agenda with covering the pope himself on numerous articles and videos. So he had a real passion to expose how the Vatican was planning to control through civil law, civil magistrates, through their infiltration of governments, and we're seeing that more than ever now especially with the roll-out in 2020 and here we are in 2021 and this agenda is getting even, well, it's being exposed now which is a wonderful thing. So that's good news.

Larry. And you also run his website. Could you tell us more about the website.

Greg. Well, the website, bereanbeacon.org, was redeveloped to be a little bit more adaptive to different technologies so a lot of most of our viewing is done through mobile devices so we've expanded that and we're still in the process of revamping it because of various technical problems and hacking and different glitches and software. But it's still being widely viewed across the globe. Our viewership on our YouTube keeps growing every month. So the work that Richard started is continuing and we've had, you know, we're actually adding new content as, you know, things unravel on a global scale, and when we find that they're connected to the Vatican, we tend to expose those things to the best of our ability.