

The Medical Truth About Covid-19 Vaccinations: Hopeful Healer or Camouflaged Killer?

STAND IN THE GAP
TODAY



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Guest: Dr. Dolores Cahill PhD. Dublin, Ireland

Segment 1: Diagnosing the Virus

Sam Rohrer: Hello and welcome to this Thursday edition of Stand in the Gap today. Hard to believe it's Thursday already. I'm so glad that you've joined me today for what I truly believe will be one of the most informative and authoritative exposes on the COVID-19 virus. For instance, we're going to talk about this. Did the World Health Organization rightly declare a pandemic back in March or in fact was that declaration wrong because we really have a preventable influenza type of a virus? We'll talk about whether or not the long-awaited and the touted versions of the COVID-19 vaccinations now rolling off the pharmaceutical assembly lines right into the bodies of unsuspecting people worldwide should be viewed as a confirmed hopeful healer or is it more likely a camouflaged killer?

I'm Sam Rohrer, and I'm privileged to introduce on the program today one of the world's leading experts on viruses and the COVID-19 virus. We're going to talk about the true diagnosis, its true prognosis and the most effective treatment. Her name is Dr. Dolores Cahill. She is calling in from Ireland to be with us today. I had the opportunity to meet her a couple of weeks ago and listen to her speak, as well as talk one-on-one with her. I felt her message and her approach, her expertise on this matter of COVID, and the current and increasing push to take the vaccine, was valid, sound, expert, and balanced. That's why I asked her if she would be with me today on this program to share her expertise on this very key issue with you all listening with us today.

Now, just a bit more about Dr. Cahill. By training, she's a molecular biologist and immunologist. She's spent the last 15 years as a professor, still there, at the University of Dublin, spent 20 years as a project consultant on government policy and a range of things, expert advisory role to the European Union on matters of health and innovation. She's a co-founder of companies dedicated to validation of research integrity. She's a creator of patented technologies in protein and antibody research and development. And can I say that she loves freedom. She fears God, and she is committed to doing all that she can do to improve and help the lives and the health of all people, exactly what God would have all morally based doctors and healthcare workers and crafters of public policy to do.

With that, let me welcome right now to the program Dr. Dolores Cahill. Dr. Cahill, thank you for being with us.

Dolores Cahill: Lovely to be with you, Sam. An absolute privilege. Thank you for having me on.

Sam Rohrer: You are welcome. We have a lot to go over. Big topic. A lot of people listening here right now, and they're anticipating good answers to this discussion.

Let me start here. Since January of 2020 this year, one of the greatest problems here in America, and I would say probably the world, has been finding the real truth about COVID-19, from the description of the virus to its potential impact on people. The potential treatments, the policies, for instance, have flipped from no masks to masks all the time, from 'we can stop the spread to we can't stop the spread', from lockdowns to partial lock-downs, to now the universal narrative, Dr. Cahill, is that, as you know, that the only sure preventer is a new and rushed vaccination. Dr. Cahill, in the course of this program today, I want you to give the truth on these matters and others.

But starting here, right now, as a researcher, an advisor to the European Union, a professor, a leading microbiologist, would you medically and scientifically describe what it is we're dealing with the COVID-19 virus? Is it really novel or is it one of a family of influenza viruses? Put this in perspective right off, please.

Dolores Cahill: Well, very good. My background is immunology and molecular biology. Yeah, so that's great.

I suppose this really started from, as we know, in China and on the cruise ship the Diamond Princess and people had symptoms of flu. It turns out, we'll say, from Nobel Prize-winning Michael Levitt, he was actually very aware from January 2020, as is the case, that actually only about 1 in 500 people will actually really have symptoms and that there were people who have these flu-like symptoms were over 80 years old and it was influenza symptoms that in maybe 1 in 100 people or 1 in 500 people would go towards breathlessness but that the vast majority of people all over the world, as we saw in China, Asia and on the Diamond Cruise Ship were immune and were actually healthy and he described the curve called the Gompertz curve and as an immunologist, that would be herd immunity.

So, the thing is, yes, there was a flu. The World Health Organization came out on the 11th of March, 2020, and they said the causative agent of the symptoms was Coronavirus. So, what's really important for your listeners to know is that Coronaviruses circulate the world in 4 years out of 10. So, 40% of the time when people have flu symptoms, they're caused by Coronaviruses. Other times they're caused by rhinoviruses or by influenza viruses, even though we call them flu; influenza viruses only cause the flu symptoms but that's 15% of the time. So, the very important aspect of Coronavirus is that they only cause illness and symptoms in America, Europe, Asia, from December to the end of April. And generally, we'll say in North America and in Europe, it would be around February, March, April. And so, while there are the symptoms that the coronavirus is what the World Health Organization said was the cause of agents, they named it as SARS-CoV-2 and the disease sentence are COVID-19 but the main issue when I came out in May, 2020, is that Coronaviruses do not cause illness and symptoms or death after April.

Sam Rohrer: And I've got to ask you, you've said that a couple of times what's magical about April?

Dolores Cahill: So, some viruses are cause disease all year round for this flu. So like adenovirus can cause flu all year round and Terra viruses and rhino viruses can cause flu like symptoms between March, April, may, June in the Summer, up until October and then Terra viruses are in the Summer period and Coronaviruses just from, this is known for decades, cause only illness and symptoms December, January, February, March, April and there were a couple of reasons for that but one is the Coronaviruses, they need it to be cold for them to actually be able to replicate in your lungs when you breathe in cold air and then there's a second thing that happens that when somebody comes in the warmer periods, the virus lives a very short time on solid surfaces so that the sunlight does not allow the virus to transmit but also there are environmental than higher temperatures that doesn't allow the virus to replicate in our lungs because the temperature is too high.

Sam Rohrer: Okay. And we'll have to stop right now, going into a break. So, ladies and gentlemen, I'm going to come back and ask Dr. Cahill to clarify but really what she's saying is there are multiple types of viruses, Corona, rhino, Terra and others. They come at different times of the year. People can get sick all the time. Like we know it may not be what we think it is but you're going to have a lot of similar symptoms. We're going to hold it there. We're going to come back and we're going to dig it a little bit deeper now. We're going to talk about, is it a pandemic really or is it a preventable virus?

Segment 2: Covid 19: Pandemic or Preventable

Sam Rohrer: All right, welcome back to Stand in The Gap Today. I'm Sam Rohrer and we have chosen a topic today, a theme I've entitled, The Medical truth about COVID-19 vaccinations and I put this little trailer on it, the Hopeful Healer or perhaps is it a camouflaged Killer? That's right. Well, we're right in the middle of all this ladies and gentlemen. We tried to deal with the headline news which this is here. The vaccinations are here. COVID is directing our lives. Is it not? But as we all know, where do you go for the truth. I'm privileged to have on right now a guest, one of the world's leading molecular biologists and immunologists, Dr. Dolores Cahill. She's calling in from Ireland right now, a professor currently, among other things at the University of Dublin. From the first COVID announcements of the World Health Organization, back in February they shaped the world's narrative about this Coronavirus with many of our guests referring to it really, as some others do, SARS-2. That ultimately generally became known as COVID-19.

Now it moved from virus to epidemic on March the 11th actually, I think, a declared pandemic by the World Health Organization around the world from Europe to Africa to the United States. The world's leaders, in my opinion, as if on cue fell into lock step. They believed and acted upon the World Health Organization's analysis and they trumpeted the same predictions, the same predicted loss of life and they imposed very similar lock-downs. They simultaneously destroyed entire economies and more. And to this very day, they continue on generating a political but real panic in the minds and hearts of people. Normal health protocols, historical research, methodology, established diagnosis, prognosis and treatment was all thrown out the window. Former experts were replaced with so-called experts like Tony Fauci, who in

reality is a lifelong bureaucrat now acting under declared 'health emergencies' have put on their little tyrant hat and they make life altering recommendations at will.

And unlike the weather forecasters who regularly get it wrong or should I say, like weather forecasters who regularly get it wrong and the public just seems to say, Well, that's okay, it's just the weather. We do the same thing for him. But the problem of it is these policies are affecting our lives. The virus is not comparable to whether or not it's going to rain today, 20% chance or a 40% chance. We're dealing with something that's affected our lives, our livelihoods and the entire world. So back to this question, what's the truth? Dr. Cahill, let me go right back here on this and push into this area. You advised back, I believe on March the 10th, the day before the World Health Organization issued that our pandemic warning. And if I'm not mistaken you publicly opposed their decision to declare the COVID virus as a pandemic. Now, you can clarify that if that wasn't the case but from an immunological and micro biological and research perspective, why did COVID not qualify as a pandemic? And I would suppose if it didn't qualify, then it doesn't qualify now. So, tell me your thinking on that please.

Dolores Cahill: So, yeah. So, in my international network I was pushing back because I've been advising governments and around the world and I ran a bio-safety lab so I was, if you declare something a pandemic, you call it a highly infectious disease. So, I was in my international networks around the world. I was doing it since January, but I really publicly only came out in May, 2020 when I did an interview that got half a million views within a few days and went viral. So, the reason why it was very clear is that when they declared the pandemic on the 11th of May, 2020, the second line of the declaration said, that the number of people that had died in the whole world was 4,291. So, the immediate question that any prime minister or president would ask is, Well, how many people die of flu every year? And it's around 500,000, about half a million people. And so that means that the World Health Organization said it was a Coronavirus, which causes death December to April. So, March is almost at the end of this seasonal flu coronavirus. And it was only causing 1% of the annual flu season deaths.

So, people would expect if, to declare something a pandemic, it was more than every other year but in the World Health Organization declared it with not half of the annual flu deaths, not a 10, not at 20th, not 150, but 100. And that works out as 56 people dying in the world every day from it.-

Sam Rohrer: Okay. So, what you're saying, so what you're saying, Dr. Cahill, and I want to clarify that you were saying March, you were saying May, but you meant March 11th, correct?

Dolores Cahill: ... Nope. Yeah, sorry. When they came out on the World Health Organization on the 11th of March, 2020-

Sam Rohrer: ... Okay. The 11th of March and what you're saying was that they violated their own real interpretation of the data and they made a proclamation raising the expectation and the panic of the world based on numbers that were lower than the normal deaths rate, just from regular flu. Is that what you're saying?

Dolores Cahill: If you have, we'll say half a million people die, you would expect the pandemic to be at least a million by that stage but it wasn't even ... it was 4,000 and in the whole world and that is a chance of dying of 1 in 1.8 million because 56 people were dying per day in the whole world.

Sam Rohrer: Okay. So the World Health Organization on behalf of the whole world makes a claim on numbers, which are not accurate and then the whole thing begins to go. Now, I want to go-

Dolores Cahill: And also, can I just say, just the number they said were accurate, but the thing is that so 4,000 in the whole world for the Winter season, 4,000 which works out at 56 deaths per day, that was accurate and it was verified in the CDC and the WHO but people need to know that from TB, we'll say our influenza, the normal seasonal flu in that time was 1,000 people per day from seasonal flu and TB was 3,000 people per day in March, 2020. So, coronavirus was 56. So, 50 times more people were dying from TB every day and 20 times more people were dying from seasonal flu. So, they should not be declaring a pandemic, for 56 people dying in the world every day and that's how I knew from day one there was no reason to call the pandemic.

Sam Rohrer: ... Okay. And you being a researcher, Dr. Cahill, you were clued right in on that and that's why you're making that statement. Now, I want to get another response here in this segment, before we come up another break, I believe that you made a statement again as a microbiologist and immunologist that SARS-2, what we're calling COVID-19 here. I believe you said it was in fact or maybe is in fact preventable, which ties into the fact that we should have been hearing the prevention to this. Now, are you saying, and do you still believe that COVID-19 is in fact preventable? And if it is, what is that material or whatever it is that makes it preventable? So clarify that statement and give us that cure that you say exists.

Dolores Cahill: As we know, it's our immune system – right? So, as I said, why coronavirus actually stops as well in April is because we have an immune system. Everyone responds to the virus and they develop an immune response and they are healthy after about 10 days or so and the prevention are things that are known to help our immune system fight off all of these influenza viruses. And so what's been known for decades is that vitamin D-D3, taking that every day, vitamin C and Zinc can boost everybody's immune system so that then you don't get the symptoms and if you don't get the symptoms, you won't get the ... the symptoms won't get more severe and you won't die.

But also, after SARS, the first SARS in 2003, there were papers and clinical trials showing that hydroxychloroquine and Zinc also could prevent illness from Coronaviruses and hydroxychloroquine and zinc was also used around the world since then and was used in Asia successfully and by Dr. Zelenko in New York> He had 799 elderly people. They were all given hydroxychloroquine and Zinc and there was not one death and 20 hospitalizations but not one death. So, it was well-known vitamin D, C and Zinc boost the immune system helps you prevent it but also hydroxychloroquine and Zinc and inhaled steroids in a preventative dose works within eight hours, reduces the symptoms, prevents people get going into hospital. So it is 100% preventable.

Sam Rohrer: Interesting. 100% preventable, which says in light of all that's going on, we're going to get us some solutions on the end of what people have to do. So we'll save some of that but can I just ask you, are you able to say, all right if you want to prevent yourself from getting this, how many units of vitamin D how many units of vitamin C, how many units of Zinc, for example, should a person take that would put them in a position of being able to prevent getting this virus.

Dolores Cahill: Yeah. So, I'm not a medical doctor and a lot of the time, the units that you need to take are based on your weight and you can actually get measurements for your own vitamin D status and the proper way of getting vitamin D and C and Zinc is through nutrition. So, in a way, I would refer people to the Dr. Zelenko protocol and there are protocols from Dr. Raoul in France where they've actually done clinical trials. So, it depends on your weight and depends on your nutritional status, but people should engage with their pharmacist and with their doctors what their proper dose. Is that okay?

Sam Rohrer: No, that is absolutely excellent. I didn't know if you were to do that but I know people are listening. My wife and I both went through, we just had what we think probably was COVID but our doctor gave us Hydroxychloroquine, vitamin D, C and Zinc and I ended up taking a bit of a steroid at the end and fortunately, thank Lord, we're back to full steam. But as you say, right treatment can make a huge difference. Now, ladies and gentlemen, when we come back, we're going to go to the next layer here and we're going to get into this issue of the vaccination. Healer or killer? We're going to talk about that next.

Segment 3: Covid Vaccination: Hopeful Healer or Camouflaged Killer

Sam Rohrer: Welcome back to Stand In The Gap Today. I'm Sam Rohrer and I've chosen today as a theme, the Medical Truth about COVID-19 Vaccinations, A Hopeful Healer or a Camouflaged Killer.

Well, the vaccine challenge is before all of us. It's happening around the world. We know now, and it's coming here in this country so I've asked one of the leading experts in the world, Dr. Dolores Cahill - she's a molecular biologist and immunologist serving right now as a Professor at the University of Dublin, Ireland - been there 15 years, a 20 year project consultant to the EU on matters of health and innovation and developer of patents and research on antibodies and protein development, a whole bunch of other things. So, I'm glad to have her on. So, if you're just joining us right now, we're going right now into the matter of the vaccinations. I'm going to give this a little bit of an introduction here and set it up and then we're going to get into the meat of this with Dr. Cahill.

The push for vaccinations, as you know, as really the only promoted solution to stop the spread of COVID-19 and SARS-2 effectively, that virus that was established early on, if you recall by Dr. Fauci, and also by another key individual who happens also to be a promoter of population control and a very strong one world government, he's a billionaire. His name is Bill Gates. Now, there are others too, but these are key. Then when the United States Congress appropriated trillions of dollars for expedited COVID-19 vaccination development among other things and the name Warp Speed was enacted and put into effect -- Then at about the same time, the European Union, the International Monetary Fund appropriated billions of dollars for development. The Russians jumped into it, the Chinese jumped into it and now the world is witnessing a rush in a push to see who can get their vaccinations approved first and then now the discussion is about how you force vaccinations on the entire world.

And skipping, as we've talked about on this program, skipping all normal research and testing, public leaders are talking in terms of forced vaccinations, even using the military to inoculate hundreds of millions of people. International travel, we've talked about it here. The organizations, airlines, cruise ships are about to enforce COVID passports, they're calling them, which include proof of vaccinations. Tracing will be a part of it and a whole lot more. It's also

being linked to access to digital currency, which is coming, buying, and selling and the ability to go to work. All of it's linked up here that doesn't look good to me and with that, Dr. Cahill, with that set up, I've had experts on this program before who have declared for instance, that there has never been an approved influenza or a Coronavirus vaccination in a broader sense here ever happened. So why should we think one can be developed now? That's the question? Here's the question to you? Is it possible to develop a safe and effective vaccination for what we're calling COVID 19 or SARS-2? Is that possible?

Dolores Cahill: So the clear answer to that is that in decades of research, there has never been a vaccine licensed against a Coronavirus ever not because they haven't done lots of clinical trials and attempts but because when they looked at the safety study, all the vaccines were not approved because in the animal models and when they use them in people and children, there was so much severe disease and death in the animal models and in the children that were vaccinated, that the vaccines were either withdrawn or never approved in the first place. So, the answer is, no. These vaccines are commercial products and so it's always possible to make them but normally you would go through initial safety testing in animals like ferrets and other animals and in the coronavirus vaccine candidates in the last 20 years, none of them were licensed because the animals either were very sick or died, not immediately after the vaccine but when they were exposed to the virus in the months after vaccination. The people who were vaccinated were much sicker or died.

Sam Rohrer: Okay. And that's going to walk us right into the next question here. So, if one has never been developed and you're saying not because they haven't spent a lot of time on it but that it failed in the clinical trials with animal subjects and/or children either getting sick, dying, or much more inclined to get sick. Now, holding that, let's go into this. From a medical perspective again, this COVID vaccination, Moderna, Pfizer, whoever is -- There're many of them going around right now about to be approved, is said to be constructed differently than most vaccines, where this one has an RNA component, which can or does by design permanently alter a person's DNA, thereby creating an entirely new health consideration, in my opinion, that appears to be totally overlooked. Now, can you tell us the truth here? Tell us what is this vaccination that's now coming down the pike, the Pfizer vaccine, that's actually being introduced right now in your area, the UK, and about to be done here. What is it? What is different about it and what makes the fact that it is different perhaps more dangerous?

Dolores Cahill: So, that is a very good question. So, the thing is, this is a messenger RNA. So really what they are doing is injecting a viral component RNA that can go into human cells and express the viral protein and it can also go integrate into our genetic material and can perpetually potentially generate the viral protein. Whereas normally other vaccines would be a component of the virus or whatever the organism is a component of the actual thing or proteins. So, what's different about this with the messenger RNA is that it can use the machinery in our cells that we use to express proteins. So essentially why people get sick and die is that we have this beautiful immune system and we have the barrier of our mucosal layers and skin to protect us from viruses and virus proteins getting in and what the vaccine shockingly is doing is it's actually bypassing all that by putting a needle through your skin and injecting the viral genetics and that then can use our own body to express viral proteins and our beautiful immune system suddenly then sees that this virus protein is inside us which would never happen throughout of all our evolution and naturally.

And so, the viral proteins start expressing in all of our cells, the immune system tries to get rid of it but of course it can't because it's now part of us and we are, would essentially become genetically modified organisms, in reality and then you may survive. There are some like the first lady who got the first vaccine in the United Kingdom ended up chronically ill in hospital on the same day yesterday. So there are issues with immediate adverse effects associated with the vaccine but the significant danger is when the coronavirus may circulate in March next year, that the body's immune system has been super primed, it wants to get rid of the viral proteins. You start breathing in some viruses in March next year and the immune system then absolutely tries to get rid of the virus. It does this huge response, which is called a cytokine storm because suddenly it sees it in every cell of the human body. It starts attacking the virus but also your internal organs and people can die very quickly from organ failure, within three or four days and death within a week.-

Sam Rohrer: Dr. Cahill, what you're explaining here is significant. In our previous discussion, you compared it similar to a person perhaps with a peanut allergy. Your body is prepared inside. Unfortunately, when someone eats a handful of peanuts and they've got a response of that type it throws them into shock and they will die. Now, I'm looking at a chart [attached below] and I want you to say if there's a similar thing but I'm looking at a chart that's being produced right now, it's in articles across the world and it says: #1) about how this is done. The scientists take a part of the viruses genetic code, #2) These genetic instructions are placed in a fat droplet and injected in a patient. #3) Patient's immune cells make the spike protein. #4) Called into action by the spike protein, the immune system produces antibodies and it goes on. And then here's #5) So it's describing exactly what you said but here's the conclusion.

It says this, if that person ever meets the Coronavirus again, these antibodies and T-cells will fight it off in exactly the same way. But what you are saying is that when a person getting these vaccinations, doing the things I just said, and you said, when they meet that virus again, a second time, you're saying that that person could literally die because of what's in their system, similar to a peanut allergy person eating a handful of peanuts. Is that correct?

Dolores Cahill: Yeah. Well, it would be exactly. Like say, if you injected a protein that you could make peanuts in your body and then suddenly you could eat peanuts a month later and suddenly you have to super primal. So the little diagram that you showed talking about that the antibodies would be produced if you came across the virus. That is true, but what's the bit they're missing out in is that the immune system, because the virus has been in people's body all the time is actually been trying to get rid of this viral protein for the weeks and months before it came across the virus. So that it doesn't just stop getting rid of the virus. It's suddenly, then the antibodies that are made, cross-react and see, Oh my God, this viral protein is now in cells all over the human body, which it shouldn't be, and then the immune system starts to attack your own cells, which are in organs and then you start attacking your own organs within, we'll say five, six days.-

Sam Rohrer: And then we're in trouble and you get it, ladies and gentlemen. I have to go away for a break. We're going to come back for the final break. And so I'm going to take this information of which we've touched briefly but come back and say, what do we do? What's the moral, the medical, the wise response to this push for a vaccination? What do we do about it?

Segment 4: The Moral response to the Vaccination Push

Sam Rohrer: Earlier this week, ladies and gentlemen, on December 8th, I had Dr. Marlene McMillan on this program. We were talking about the Hegelian dialectic and how it would be that lies can be actually foisted on the people of the world, the American people. And we ultimately reject what we thought we knew and truth is thrown out and you believe a lie. The concept around this vaccination and the whole COVID issue is very much right in the center of that. And we're going to come into some solutions here right now, as we talk about the vaccination, okay. Now what do we do? And I'm going to share some very key information here. Now, in the face of a politically generated worldwide panic, which I've already described and we understand it's literally altered the lives of every person in the world. The pressure continues and seemingly it is increasing with threats of increased lock-downs, the pressure to take unproven and in reality - we just talked about it - a dangerous vaccination put forward as the only hopeful healer. Driven by the Hegelian dialectic, the controlled globalist narrative seeks to scare people, threaten their safety, increase their fears of life and living and then offer them a camouflaged killer solution that neither fixes the problem and by the way, in the process, it also encourages them to give up their Liberty in exchange for bondage. So, we've got to know what to do. Dr. Cahill, I have to lay out some of this here for you because of your comment, because it fits right into what we're talking about. In the earliest days of these vaccinations right now, as we're speaking now, the narrative is already being established to convince people to ignore the truth. This morning, instance, actually this morning, when I came in to work on this program from the UK news-Headline, UK issues allergy warning about that Pfizer COVID-19 vaccine after patients fall ill. Today, also from the UK Daily Mail says this, UK vaccine regulators warn people with "significant food and medicine allergies" not to take it after workers suffer anaphylactic reaction shock.

And then as if right on cue. And actually, it was because yesterday just hours before these reports came out of the UK, here, CNN released an article that I saw last night. And it said this, this is the headline from the CNN article. Last night, before the reports came out of the UK, they said this. "CNN says, Americans should not be alarmed if people start dying after taking the vaccine because deaths may occur that won't necessarily have anything to do with the vaccine." Wow. Well, you talk about coincidental and I say bizarrely arrogant but in light of these continuing attempts to deceive the public, Dr. Cahill which I believe is taking place, what guidelines do you give listeners right now in regard to, take the vaccine or don't take the vaccine and then I want to quickly, if you can answer that, I want to talk to you about masking and lock-downs, which are being forced it on us as well. So please, your response to the vaccine, take it.

Delores Cahill: Everyone has to be informed about the adverse events would say related to these but in anything in life, you have to do a harm benefit analysis. So, when the World Health Organization announced the issue of coronavirus, the chances of dying from it was 1 in 1.8 million. So that is the potential. So, in Ireland, for example, we've had 100 people die from COVID-19 in 8 months. So, the chance of dying, if you're under 65 is one and half a million with eight people in eight months out of a population of 5 million. So, it's one and half a million. The first lady who got the first vaccine, the 90-year-old, reported by the BBC. She was in hospital that evening after the vaccine in a critical condition with some inflammation of her spine. So that is one person out of one.

So, what I'm saying clearly is that I would not take a messenger RNA vaccine even if you gave me \$10 million. If it was mandatory, I would go to prison. I would not take it. If someone injected me forcefully, I would sue them for attempted murder. So, the deaths associated with MRNA's vaccines could be a chance of dying and potentially of 1 in 5 or 1 in 3. And in some of the animal studies, half of the animals died.-

Sam Rohrer: Doctor, I'm going to jump in and say, all right now, fine. There is a research-based result. If you're saying that 1 in 3 of the animal subjects died, up to 50% of them die. Think of this, is it illogical to project and say if a hundred million people take and get both of the vaccines- the one- two punch - and it changes their DNA we're talking about that based on that research, which is generally-

Dolores Cahill: ... Yeah. So, listen, I will just read you a line out of 2020, the title of this paper ["Immunization with the Coronavirus Vaccine...Leads to Pulmonary Immunopathology on Challenging with the SARS Virus"](#) and the quote is most of the children experienced severe disease with infection that led to high frequency of hospitalizations. Two children died from the infection. The conclusion from the experience was clear. The lung disease was enhanced by the prior vaccination. So, the issue people need to know is you can have significant illness after these vaccines. Groups are not safety tested but the deaths would come when the virus that you've been vaccinated against circulates. So, in this case with Coronavirus, it could be January, February, March, April and then there would be significant deaths. So, we don't know if it's 1 in 20 deaths or 1 in 10 but this is for a disease which the World Health Organization said, you a chance of dying of one in 1.8 million.

So that's a harm, but the harm from the vaccine could be 1 in 10, 1 in 20. So, there are multiple times. And also since we now know, if you take vitamins D, C and Zinc and hydroxychloroquine and zinc, it's the safest, it's on the World Health Organization- safest drugs in the world, they're one of their list of drugs that cannot be run out of because they're so valuable hydroxychloroquine and zinc and one of the safest but because we have prevention and treatment, the cure for Coronaviruses is to inform people there are vitamin D, C, and zinc hydroxychloroquine and zinc.-

Sam Rohrer: We're about out of time. I got to jump in. So, ladies and gentlemen, all right, vitamin C, vitamin D, zinc, hydroxychloroquine for treatment, take the other. It's a prevention-hydroxychloroquine, perhaps an inhaled steroid along with it, we talked about that as treatment. All right, not the vaccine. That increases your chances of dying. You're far better off doing the other, which will work as compared to that and we're about out of time, but I've got to ask a quick response. The world, and we're being told over here at mask up, mask up that works and then increasingly lock-downs. You don't have much time but give me a response on both of those, if you can quickly.

Dolores Cahill: So, the lock-down harms. So, there's studies that show it's been known for 30 years, we'll say for six months of lockdown because of the unemployment and the poverty associated with it, the six months of lockdown will cause everyone who's alive, six months loss of life. So, in America, you will be talking in the six months of lockdown, we have lost 116 million years of life lost by all of the Americans cumulatively that are alive today. So, the harm of the lockdown is much worse than this Coronavirus that can be successfully prevented and treated in the flu season and you don't need to wait for a vaccine and under the OSHA standards and around the world, if you wear a mask, you increase your carbon dioxide level to toxic levels. You

reduce your oxygen, which causes permanent brain damage. If you wear the masks for a long period of time without taking breaks and they do not at all protect you from a coronavirus, you protect yourself by boosting your immune system and breathing in full clear air. So I have never worn a mask. I would not recommend it.

Sam Rohrer: All right. Well, ladies and gentlemen, our time is up. Dr. Cahill. You've got to come back. I will ask you to come back. We've got to go further into some of these things, but I would like to think that we got a lot in on this topic. Thank you for being with us for all the work that you have done. Ladies and gentlemen, take this program, listen to it again, far too much information to grasp one time through, listen to it again, standinthegapradio.com. You can get it or on our app, pass it along to a friend, take this information, study it out, utilize it, come to an informed decision for yourself. Your reality, your life may well depend on it.

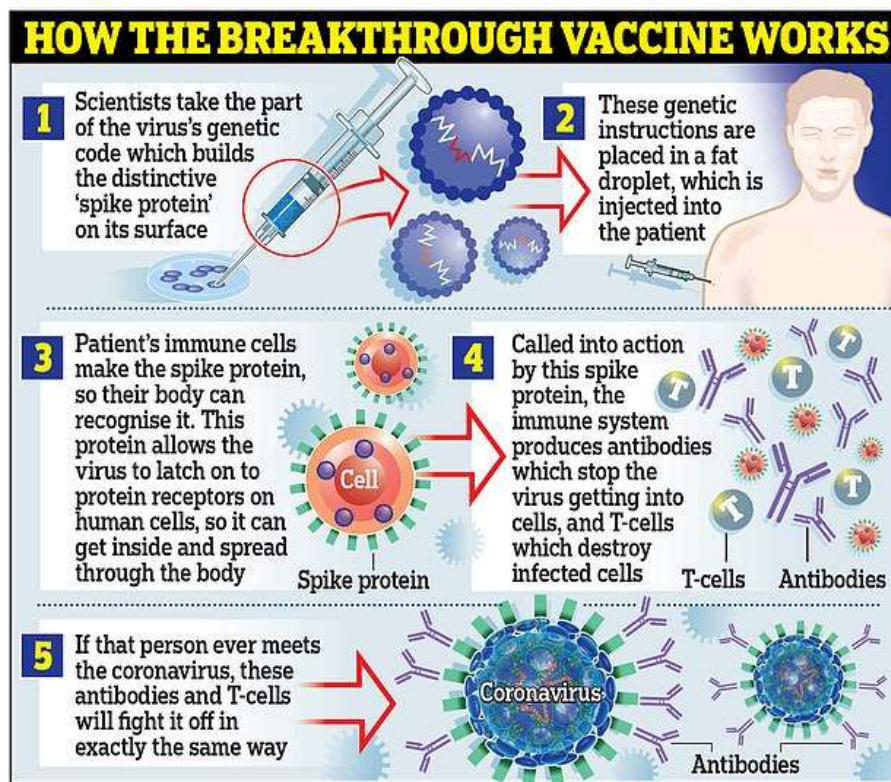
*****THE END*****

This program was transcribed by Rev.com

Chart referred to in the Interview: <https://www.dailymail.co.uk/news/article-9034479/Allergy-risk-Pfizer-jab-ahead-key-FDA-meeting-tomorrow.html>

This chart below is basically accurate as to how the oncoming Covid vaccines work. The BIG thing here is the conclusion in #5 is totally false. When the virus is encountered after vaccination rather than producing healing and life, it actually will trigger death by up 50% per the research as cited by Dr. Cahill. This is another illustration of Hegelian Dialectic process which is operating underneath the entire Covid policies and the entire political process for a generation.

Comments: Sam R.



ADDENDUM: Additional facts or information sources that may be of help. These were not discussed in the interview but I'm adding here to assist for those wanting further assistance.

Several Previous SIGTS programs on COVID related considerations:

- [July 15, 2020 Title: Health Freedom Update: Unmasking the Truth about Changing COVID 'facts'.](#) Topics covered: The Truth about Masks; The Truth about 'sky-rocketing cases';
- [Aug 20, 2020 Title: COVID Government Mandates: Killing the Sick, Threatening the Health.](#) Topics covered: Face Freedom Friday; Killing the Sick-Threatening the Healthy; Community Immunity – has it arrived?
- [Oct 15, 2020 Title: COVID Lockdowns, Mask, and the Great Barrington Declaration.](#) Topics covered: The President's amazing COVID Recovery; Lockdowns: WHO, Spain, and MI; Masking, Vaccinations, and the World Bank; The Great Barrington Declaration.

Two Previous SIGT programs focusing on the Hegelian Dialectic process to move people from accepting truth to embracing lies.

- [July 23, 2020 Title: The Deceit of Political Correctness: How Marxism is Collapsing America.](#) Guest: Dr. Marlene McMillan. Topics covered: Defining the Terms: The "Who", "Why" and "How"; Illustrating the Hegelian Dialectic; A Reality Check
- [Dec 7, 2020 Title: Beyond the Dialectic – The Empowerment of Words.](#) Guest: Dr. Marlene McMillan. Key areas addressed: Destroying Dialectic vs Empowering Words; Redefining "Safety" and.... Practical Solutions: Talking and Thinking Biblically.