

Moderna Plans Three More mRNA Vaccines, Not All for Infection

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✓ Fact Checked

STORY AT-A-GLANCE

- › Moderna announced they were developing three vaccines using mRNA technology for cancer, shingles and herpes. Yet, the current mRNA shot has not proven to be successful, nor are the long-term effects of genetic therapy known
- › Moderna and BioNTech, the two companies that developed mRNA vaccines with emergency use authorization in the U.S., had not produced an approved product before the COVID injection
- › Some authorities believe the shot is successful. Yet, it doesn't stop recipients from getting the illness or from being hospitalized, and it has a significant risk of adverse side effects, including permanent disability and death
- › Dr. Robert Malone, who discovered how to prepare mRNA so human cells could incorporate the genetic code and use it, warned the FDA that the shot could be dangerous, and he is warning parents they should carefully consider injecting children, which is an irreversible decision

Moderna produces one of three COVID shots available in the U.S.¹ In November 2021, Moderna released data on third-quarter sales showing phenomenal profits from the vaccine of \$5 billion worldwide and forecasted \$18 billion for the year just from the mRNA vaccine.² To take advantage of this revenue stream, the company announced they are developing three new mRNA vaccines for shingles, cancer and herpes.³

At the start of the vaccine race, the Health and Human Services Operation Warp Speed pledged to deliver 300 million doses of the vaccine by 2021.⁴ This was just months after the pandemic had been declared in early 2020. Yet, developing a safe and effective vaccine normally takes years and begins with animal studies.⁵

In addition to the speed at which the vaccine was developed, the shot did not fit the definition of a vaccine at that time, as the mRNA product the pharmaceutical companies were planning does not induce immunity in and of itself; rather, it delivers instructions to the recipient's cells to do that by producing their own proteins to fight the targeted disease. So what did the CDC do? They changed the definition of vaccine.

Vaccine Definition Changed to Cover mRNA Shots

To fully understand the importance of the change, it's crucial to note that before the COVID pandemic, the definition of a vaccine hadn't changed much through the years. For example, according to an archived snapshot of the CDC's website, the definition of a vaccine February 24, 2011, was:⁶

"A product that produces immunity therefore protecting the body from the disease. Vaccines are administered through needle injections, by mouth and by aerosol."

By July 2015, the wording had changed to:⁷

"A product that stimulates a person's immune system to a specific disease, protecting the person from that disease. Vaccines are usually administered through needle injections, but can also be administered by mouth or sprayed in the nose."

The wording was the same in June 2017⁸ and likewise in June 2019⁹ and June 2020.¹⁰ By August 26, 2021,¹¹ however, the definition had changed slightly to add the words "to produce immunity":¹²

“A product that stimulates a person’s immune system to produce immunity to a specific disease, protecting the person from that disease. Vaccines are usually administered through needle injections but can also be administered by mouth or sprayed into the nose.”

Then, less than a week later, just days after the FDA gave final approval to Pfizer’s mRNA jab, the definition changed again – this time, significantly. The definition of a vaccine now reads:¹³

“A preparation that is used to stimulate the body’s immune response against diseases. Vaccines are usually administered through needle injections, but some can be administered by mouth or sprayed into the nose.”

Notice that the words “protecting the person from disease” is now taken out, so the definition now says that a vaccine is to “stimulate the body’s immune response against diseases.” Isn’t that just what a natural infection does? So, if a vaccine no longer protects you from disease or gives you immunity from it, but merely stimulates your immune response, why do you need the so-called “vaccine” – especially since you can still get the disease it’s supposedly stimulating a response to?

As has been made obvious in the past months, the shot developed to “stimulate” the body’s immune response against COVID-19 does not effectively reduce a person’s ability to catch the virus or to transmit the virus.^{14,15} According to the CDC, all the shot does is supposedly keep you from getting a more severe case of the virus.

However, data¹⁶ and whistleblowers¹⁷ reveal people who have been vaccinated are still hospitalized with COVID-19 and in some areas at rates that are higher than those who are unvaccinated. In other words, the mRNA vaccine against SARS-CoV-2 does not appear to effectively protect you from or fight against the virus.

This is important to note since Moderna recently announced they would be producing three new vaccines using the same technology to fight against shingles, cancer and herpes. Isn’t it reasonable to expect that taxpayers will pay millions of dollars and see the same results?

One-Trick Pony Moderna Announces Three New Vaccines

In the world of science, Moderna's announcement may raise a red flag. The company is 10 years old with billions in market valuation,¹⁸ but until their COVID-19 vaccine, they had no approved products.

The company was founded by two scientists and a venture capitalist who recognized the commercial potential of mRNA as a drug delivery technology. In November 2020, Stat News¹⁹ reported that despite having not produced a single product, the company had made the founders hundreds of millions of dollars.

Originally, modified mRNA was thought to hold the key to a new source of embryonic stem cells that researchers planned to use to treat anything from Parkinson's disease to spinal cord injuries. Using modified mRNA, they hope to sidestep the controversy of using stem cells from aborted fetuses.

The promise hinged on safe dosing, but in animal studies scientists ran into a now-familiar problem with the mRNA doses. The therapy triggered dangerous immune reactions, yet the lower doses were too weak to show benefit.

It was just 42 days after the genetic code for SARS-CoV-2 was released that Moderna was set to deliver a box of a few hundred vials of the experimental vaccine to the National Institute of Allergy and Infectious Diseases (NIAID). At this point, they had still not overcome the abnormal immune responses in animal studies using the novel genetic therapy.

Yet, they were the first to deliver drug vials for human clinical trials. Stat News reports that a May 18, 2020, Moderna press release claimed they had positive interim clinical data from eight volunteers. But, they did not provide any raw data to scientists. Despite this, their share price rose 20% in one day, the FDA approved an emergency use authorization for the drug and the rest is history.

A mere one year later, Moderna is still working at warp speed, now announcing that they are developing three new vaccines based on the same mRNA technology that, so far,

doesn't appear to stop disease or prevent the spread of it.

The vaccines are for cancer, shingles and herpes.²⁰ Pfizer has an mRNA shingles vaccine they expect to have in clinical trials sometime after July 2022. Pfizer's partner in the mRNA vaccine race is BioNTech, a company with a similar history to Moderna, having produced no approved drugs before they teamed up with Pfizer – which in 2009 was hit with the largest health care fraud settlement in the history of the U.S. Department of Justice²¹ – to produce the COVID-19 shot.

How Is 'Success' Measured for mRNA Vaccines?

NewsMax reports, “The success of COVID-19 vaccines based on messenger RNA (mRNA) technology from Moderna and rival Pfizer has prompted efforts to use the novel technology in other vaccines and therapeutics targeted at hard-to-treat diseases.”²²

Considering the announcement of the development of three new vaccines by Moderna, and Pfizer's goal of clinical trials by the second half of 2022, the question must be asked, how is the success of the mRNA vaccine being measured?

As I discussed above, the current vaccine for COVID-19 does not stop recipients from getting the illness. It also does not stop recipients from being hospitalized for the illness, and the CDC warns that those who have been vaccinated can still transmit the illness.

Yet, even if the vaccine only had a minimal effect on reducing illness or severity of illness, you have to consider the adverse side effects that are being reported by the hundreds of thousands to the Vaccine Adverse Event Reporting System (VAERS).

As of February 11, 2022,²³ the system had logged over 1.1 million reports, which include 23,990 deaths, 43,476 people who have been permanently disabled, 33,590 diagnoses of myocarditis or pericarditis and 12,452 diagnoses of shingles.

Considering the high number of individuals who have developed significant adverse events or have died in the days and weeks after receiving an mRNA shot, you have to

wonder what the interaction between two or three different types of mRNA vaccines will be within the complex environment in the human body.

mRNA Scientist Warns of Vaccine Dangers

In 1987,²⁴ Dr. Robert Malone mixed mRNA with drops of fat and found that human cells exposed to this soup absorbed the mRNA and created proteins based on the genetic code in the RNA. At the time, Malone was a graduate student at the Salk Institute. Recognizing that this discovery could very well have some far-reaching potential, he jotted down his notes and then signed and dated them.

In early 1988 Malone had another lab member sign the notes as well. Over 30 years later, this discovery was the platform on which BioNTech and Moderna were founded. Yet, in the past year, as Malone has spoken out against the COVID-19 vaccine, left-leaning web “encyclopedia” Wikipedia scrubbed his name from the history of the technology.²⁵

Subsequently, a web search for who invented the mRNA technology returns a Wikipedia page that acknowledges he had some contribution to the research but focuses on his promotion of “misinformation about the safety and efficacy of COVID-19 vaccines.”²⁶ In other words, Malone has spoken out about the dangers of the shot despite efforts to keep him from getting credit for his work, and much more.

As Malone explained in an interview on the Dark Horse podcast,²⁷ it was many months ago that he warned the U.S. Food and Drug Administration that the spike protein — which the COVID-19 “vaccines” instruct your cells to make — could be dangerous. The FDA dismissed his concerns, saying they did not believe the spike protein was biologically active, and that vaccine makers designed the injections so the spike protein would stick and not float about freely.

Well, they were wrong on both accounts. It’s since been well-established that the SARS-CoV-2 spike protein gets free, and that it is biologically active and causes severe

problems. It is responsible for the most severe effects seen in COVID-19, such as bleeding disorders, blood clots throughout the body and heart problems.

These are the same problems we now see in a staggering number of people who have received one or two shots of COVID-19 “vaccine.” For more in-depth information about how the spike protein causes these issues, please see my interview on BitChute with Stephanie Seneff, Ph.D., and Judy Mikovits, Ph.D.²⁸ In the months after the shot was released, Malone characterized the research and development of the shot, writing:²⁹

“... if I were to propose a clinical trial involving children and entice participation by giving out ice cream to those willing to participate, any institutional human subjects safety board (IRB) in the United States would reject that protocol.

If I were to propose a clinical research protocol wherein the population of a geographic region would lose personal liberties unless 70% of the population participated in my study, once again, that protocol would be rejected by any US IRB based on coercion of subject participation. No coercion to participate in the study is allowed.

In human subject clinical research, in most countries of the world this is considered a bright line that cannot be crossed. So, now we are told to waive that requirement without even so much as open public discussion being allowed? In conclusion, I hope that you will join me; stop to take a moment and consider for yourself what is going on. The logic seems clear to me.”

Molecular mimicry may be one of the reasons why mRNA COVID-19 injections are causing autoimmune conditions.³⁰ It occurs when similarities between different antigens confuse the immune system.

"Indeed, antibodies against the spike protein S1 of SARS-CoV-2 had a high affinity against some human tissue proteins," researchers wrote in the Journal of Autoimmunity.³¹ "As vaccine mRNA codes the same viral protein, they can trigger autoimmune diseases in predisposed patients."

Malone's Warning to Parents

In an interview with WND,³² Malone discussed two grassroots projects he's involved with. The first is the Unity Project, which opposes vaccine mandates, and the second is the International Alliance of Physicians and Medical Scientists, launched by the Global COVID Summit.³³

Malone also highlighted the second Physicians Declaration³⁴ by the International Alliance of Physicians and Medical Scientists, dated October 29, 2021, in an article for the Defender.³⁵

The declaration³⁶ has been signed by more than 17,000 doctors and scientists and states that "healthy children shall not be subjected to forced vaccination" as their clinical risk from SARS-CoV-2 infection is negligible and long-term safety of the shots cannot be determined prior to such policies being enacted.

Not only are children at high risk for severe adverse events, but having healthy, unvaccinated children in the population is crucial to achieving herd immunity. The declaration also demands that health agencies and institutions "cease interfering with physicians treating individual patients."

In the article,³⁷ Malone also warned parents that the decision to inject their children is "irreversible," and that they need to be aware of "the scientific facts about this genetic vaccine, which is based on the mRNA vaccine technology I created." Here's an excerpt from that written warning:³⁸

"Before you inject your child – a decision that is irreversible – I wanted to let you know the scientific facts about this genetic vaccine, which is based on the mRNA vaccine technology I created.

There are three issues parents need to understand: The first is that a viral gene will be injected into your children's cells. This gene forces your child's body to make toxic spike proteins. These proteins often cause permanent damage in children's critical organs, including:

- *Their brain and nervous system.*
- *Their heart and blood vessels, including blood clots.*
- *Their reproductive system.*
- *This vaccine can trigger fundamental changes to their immune system.*

The most alarming point about this is that once these damages have occurred, they are irreparable:

- *You can't fix the lesions within their brain.*
- *You can't repair heart tissue scarring.*
- *You can't repair a genetically reset immune system.*
- *This vaccine can cause reproductive damage that could affect future generations of your family.*

The second thing you need to know about is the fact that this novel technology has not been adequately tested. We need at least 5 years of testing/research before we can really understand the risks. Harms and risks from new medicines often become revealed many years later."

It is crucial to pay attention to the warnings and the growing list of people who have experienced adverse effects as Big Pharma starts rolling out new mRNA shots. Although Moderna has announced three new mRNA shots coming, this is only the beginning of how pharmaceutical companies will take advantage of technology to line their profit margins while indemnified³⁹ and without regard to human health.

It should come as no surprise that the drugs under development using mRNA technology are being developed as vaccines since the companies will also likely be given the same protection against criminal and civil action as they have for the COVID-19 shot.

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