

COVID Jab Spike Protein Remains Six Months After Jab

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✓ Fact Checked

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STORY AT-A-GLANCE

- According to recent research, there may be no off switch for spike protein production in some individuals who got the COVID jab
- Recombinant spike protein was detectable in half the blood samples of jabbed individuals for at least 69 days, and up to 187 days (about six months, which was the end of the study period)
- The authors present three “likely” mechanisms behind the persistent spike production: mRNA may be integrated into cells; the spike protein may remain constitutively active; or the mRNA may be integrated into bacteria present in the blood, which then continuously produce spike protein. All three mechanisms could result in never-ending spike production (or spike activity)
- In-vitro research published in 2022 found the mRNA in Pfizer’s COVID jab could integrate into human cellular DNA by reverse transcription
- By producing spike protein for months and perhaps years on end, your body starts to view the SARS-CoV-2 virus as an environmental irritant rather than the potentially lethal invader that it is. This is called immune tolerance. Your body basically ignores the irritant. However, this can become deadly when your body is assaulted by replicating pathogens

How long will your body produce modified spike protein after the COVID jab? That’s been a question people have been asking ever since the rollout of the first mRNA shots.

A paper published in the Proteomics Clinical Applications journal in mid-August 2023¹ tried to answer that question, and it’s not great news, as the answer, for some people, as

we said long before the jab was released, could be "indefinitely." What we can say for sure is that spike is being produced for far longer than "experts" initially believed.

Fact Versus Fiction

The idea behind the mRNA jabs was that the modified RNA would trigger temporary production of a spike protein similar to that of the wild-type SARS-CoV-2 spike to induce antibodies. We were told that mRNA is fragile and doesn't last long, which is true of natural mRNA. The mRNA in the shots, however, has been modified to resist degradation.

As explained in a mid-August 2023 Proteomics Clinical Applications paper,² the recombinant spike found in the mRNA COVID shots "is distinguishable from the wild-type protein due to specific amino acid variations introduced to maintain the protein in a prefused state."

And, while authorities admitted they didn't know exactly for how long the mRNA would last, they insisted it certainly wouldn't linger for more than a few days at most.^{3,4} In fact, to this day, the Centers for Disease Control and Prevention website falsely maintains that "The mRNA from the vaccines is broken down within a few days after vaccination and discarded from the body."⁵

Chronic immune activation can be a very serious problem, so you really don't want your body to be producing antibodies daily for months at a time.

The spike protein is also responsible for the pathogenicity of COVID-19 and is the main driver of jab-related injuries and deaths,⁶ so you don't want this spike protein to linger longer than what is necessary to trigger an initial antibody response. Unfortunately, that's what we're now finding.

Spike Detected for Up to Six Months

According to a recent investigation, published in the *Proteomics Clinical Applications* journal in mid-August 2023,^{7,8} recombinant spike protein was detectable in half the blood samples of jabbed individuals for at least 69 days, and up to 187 days (about six months).

To be clear, this doesn't mean spike production ends at six months. That was just the end of the study period. What's more, two of the proposed mechanisms of action, which I'll review below, suggest spike production could continue indefinitely.

To make sure they were only measuring jab-related spike proteins and not spike protein from natural infection, the scientists used a mass-spectrometry test to detect a specific amino acid sequence — two prolines — found only in the jab-induced spike.

They also included two unjabbed control groups to make doubly sure — one consisted of unjabbed individuals who had never had COVID and had no antibodies; the other were unjabbed who'd had COVID and did have antibodies.

As expected, only those in the jabbed group had vaccine-derived spike protein in their blood. Only half of them had it, though, which is interesting considering Danish evidence suggesting that one-third of Pfizer's shots were placebo. (The data for this claim were published in a March 2023 Letter to the Editor of the *European Journal of Clinical Investigation*.⁹)

So, to be clear, not everyone who got one or even more jabs will have spike production. Many, in this case half, have no detectable spike in their systems and are therefore unlikely to experience any adverse effects. That's the good news. The bad news is that the other half do have persistent spike production, and in some, it may never stop.

Potential Mechanisms Behind Persistent Spike Production

The *Proteomics Clinical Applications* paper goes on to present three "likely" or potential mechanisms behind the persistent spike production — some of which are worse than others:¹⁰

1. *"It is possible that the mRNA may be integrated or re-transcribed in some cells.*
2. *It is possible that pseudo-uridines at a particular sequence position ... induce the formation of a spike protein that is always constitutively active ...*
3. *It is possible that the mRNA-containing nanoparticle will be picked up by bacteria normally present at the basal level in the blood ..."* (These bacteria would then continuously produce spike protein)

Disturbingly, all three mechanisms could result in never-ending spike production (or spike activity, for as long as the spike remains in the body). Now, if spike production can end up being lifelong in some individuals, what does that mean for people who have received multiple shots containing several different mRNA sequences?

Pfizer mRNA Appears to Have Ability to Reprogram Human DNA

If mRNA is integrated or re-transcribed in cells (the first hypothesis above), that means the modified, synthetic mRNA in the jab can become part of and permanently rewrite a section of your DNA with instructions to produce the spike.

In addition to affected cells producing spike indefinitely, this genetic alteration may also be transferred to your offspring, the effects of which are wholly unknown. We could expect affected infants and children to have chronic health problems, however, and likely impaired immune response to coronaviruses, including those responsible for the common cold.

Disturbingly, the reverse transcription hypothesis has already been demonstrated in in-vitro experiments,¹¹ so it's not as far-fetched as fact checkers — or even the CDC — would like you to believe. According to the CDC, "These vaccines do NOT enter the nucleus of the cell where our DNA (genetic material) is located, so it cannot change or influence our genes."¹² But in vitro experiments prove otherwise.

“ In vitro research published in 2022 found the mRNA in Pfizer’s COVID jab could integrate into human cellular DNA by reverse transcription.”

In February 2022, a research paper¹³ titled "Intracellular Reverse Transcription of Pfizer BioNTech COVID-19 mRNA Vaccine BNT162b2 In Vitro in Human Liver Cell Line" described how the mRNA is being integrated into human cellular DNA by reverse transcription – something that was absolutely not supposed to happen and was written off as a "conspiracy theory."

In a nutshell, what this study found was that the genetic code of Pfizer’s COVID jab was reverse transcribed into and became part of the human liver cells used. Somehow, the shot triggers cells to produce a natural reverse transcriptase enzyme called LINE-1, which allows this reverse transcription to take place.

Genetic Integration Can Occur Through Other Means as Well

Incidentally, studies^{14,15} have also shown that RNA from SARS-CoV-2 can be reverse transcribed into the genome of virus-infected cells, and if viral RNA can do it, why not the synthetic RNA?

On top of that, the COVID shots have also been found to be **contaminated with DNA**,¹⁶ and this too could lead to genomic integration and alteration, without the need for reverse transcription. As explained by Igor Chudov:¹⁷

"Normally ... the cell nucleus, where the DNA is, expresses certain DNA code based on conditions of the cell, and produces natural, human messenger RNA.

That messenger RNA travels out of the nucleus, where it is expressed into proteins needed for cell building. This is how growing organisms express different genetic programs to grow muscle cells or brain cells, etc. This process is called 'transcription.'

For many years, Central Dogma of Molecular Biology stated that the 'reverse transcription' – moving genetic code from RNA back into the sacred cellular nucleus and recoding the DNA – was impossible.

Eventually, scientists realized that it is possible under various conditions ... To effect reverse transcription, enzymes called 'reverse transcriptases' are needed. One of them is called LINE-1. Apparently, per [the] study, the Pfizer mRNA vaccine causes cells to produce that LINE-1 enzyme ...

As I explained in response to a questioner: Pfizer mRNA vaccine changes our genetic code that determines how our organisms operate, that you inherited from your mom and dad.

Now your DNA was changed from what your mom and dad gave you, by adding a little mysterious 'edit' from Pfizer. Your organism acts in accordance with your DNA program, and now, well, the program has been hacked and modified by Pfizer.

Considering that Sars-Cov-2 'spike protein' has cancer code from Moderna 2017' patent 9,587,003,¹⁸ it is imperative to find out the implications of this reverse transcription, and whether the vaccinated now have any undesirable genetic code embedded into their DNA.

Of particular interest is whether this mRNA-induced reverse transcription affects the 'germ line,' such as eggs and sperm cells, and whether it also affects the fetus of pregnant mothers."

Can Chronic Spike Production Explain Immune Tolerance?

As noted in Chudov's August 31, 2023, Substack article, in which he reviews the ramifications of the hypotheses put forth in the Proteomics Clinical Applications paper,¹⁹ Nos. 1 and 2 may also explain why jabbed individuals are so prone to COVID reinfection.

In short, by producing spike protein for months and perhaps years on end, your body starts to view the SARS-CoV-2 virus as an environmental irritant rather than the potentially lethal invader that it is. This is called immune tolerance and is how allergies typically work.

Basically, your body simply ignores the irritant, and you suffer the symptoms for as long as the irritant is present. However, immune tolerance can become deadly when your body is assaulted by replicating pathogens and fails to launch an appropriate immune response.

Resources for Those Injured by the COVID Jab

[Autopsy assessments, case reports of harms, job statistics, disability claims, life insurance claims and all-cause mortality statistics](#) all tell the same story: The COVID jabs are having a devastating effect.²⁰

If you got one or more jabs and suffered an injury, first and foremost, never ever take another COVID booster, another mRNA gene therapy shot or regular vaccine. You need to end the assault on your body.

The same goes for anyone who has taken one or more COVID jabs and had the good fortune of not experiencing debilitating side effects. Your health may still be impacted long-term, so don't take any more shots. You're also playing Russian Roulette every time you get another dose, so quit before your luck runs out.

When it comes to treatment, one of the most important aspects is to detoxify the spike. As explained by Dr. Peter McCullough in an August 26, 2023, America Out Loud podcast and accompanying article:²¹

"The spike protein is responsible for the pathogenicity of the SARS-CoV-2 infection and drives the development of adverse events, injuries, disabilities, and death after vaccination through immunologic and thrombotic mechanisms.

The long-lasting spike protein has been found in the brain, heart, liver, kidneys, ovaries, testicles, and other vital organs at autopsy in cases of death after vaccination. In the case of vaccine-induced thrombotic injury, the spike protein has been found within the blood clot itself.

Thus, there is a strong rationale for considering residual SARS-CoV-2 spike protein as a treatment target in post-COVID-19 and vaccine injury syndromes ...

While specific syndromes (cardiovascular, neurological, endocrine, thrombotic, immunological) will require additional therapies, we propose the clinical rationale for a base detoxification regimen of oral nattokinase, bromelain, and curcumin for patients with post-acute sequelae from SARS-CoV-2 infection and COVID-19 vaccination.

The empiric regimen can be continued for 3-12 months or more and be guided by clinical parameters:

- *Nattokinase 2000 FU (100) mg orally twice a day without food*
- *Bromelain 500 mg orally once a day without food*
- *Curcumin 500 mg orally twice a day (nano, liposomal, or with piperine additive suggested)"*

McCullough and two other coauthors recently published this advice in the Journal of American Physicians and Surgeons.²² Personally, I would recommend using lumbrokinase rather than nattokinase (or rotate between both), as lumbrokinase is a far more potent fibrinolytic enzyme. You can learn more about the use of these proteolytic enzymes in "[Are Enzymes a Key to COVID Endothelial Injury?](#)"

Other supporting compounds mentioned in McCullough's paper include N-acetylcysteine (NAC) at a dose of 400 mg to 1,000 mg per day, ivermectin and hydroxychloroquine (both of which bind to and help eliminate spike protein), selenium, Irish sea moss, green tea extract (*Camellia sinensis*), *Nigella sativa* (black cumin), dandelion extract (*Taraxacum officinale*) and glutathione.

For a more comprehensive treatment plan, see the Front Line COVID-19 Critical Care Alliance (FLCCC) [I-RECOVER](#) protocol. It's continuously updated as more data become available, so be sure to download the latest version straight from the FLCCC website at covid19criticalcare.com.²³ Additional detox remedies can be found in "[World Council for Health Reveals Spike Protein Detox](#)."

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