

Exhibit 22

The greater number of COVID mRNA technology vaccine doses, the more likely to become infected with COVID virus.

Shrestha et al. (Cleveland Clinic study)

[https://palexander.substack.com/p/shrestha-et-al-cleveland-clinic-study?utm_source=%2Fsearch%2Fcleveland clinic&utm_medium=reader2](https://palexander.substack.com/p/shrestha-et-al-cleveland-clinic-study?utm_source=%2Fsearch%2Fcleveland%2Fclinic&utm_medium=reader2)

Shrestha et al. (Cleveland Clinic study): (repost) The greater number of COVID mRNA technology vaccine doses, the more likely to become infected with COVID virus; a clear dose response; I reshare

Among 51011 working-aged Cleveland Clinic employees, the bivalent COVID-19 vaccine booster was 30% effective in preventing infection; what does this mean? Clear damage to IMMUNE system (P53, TLR 7, 8)



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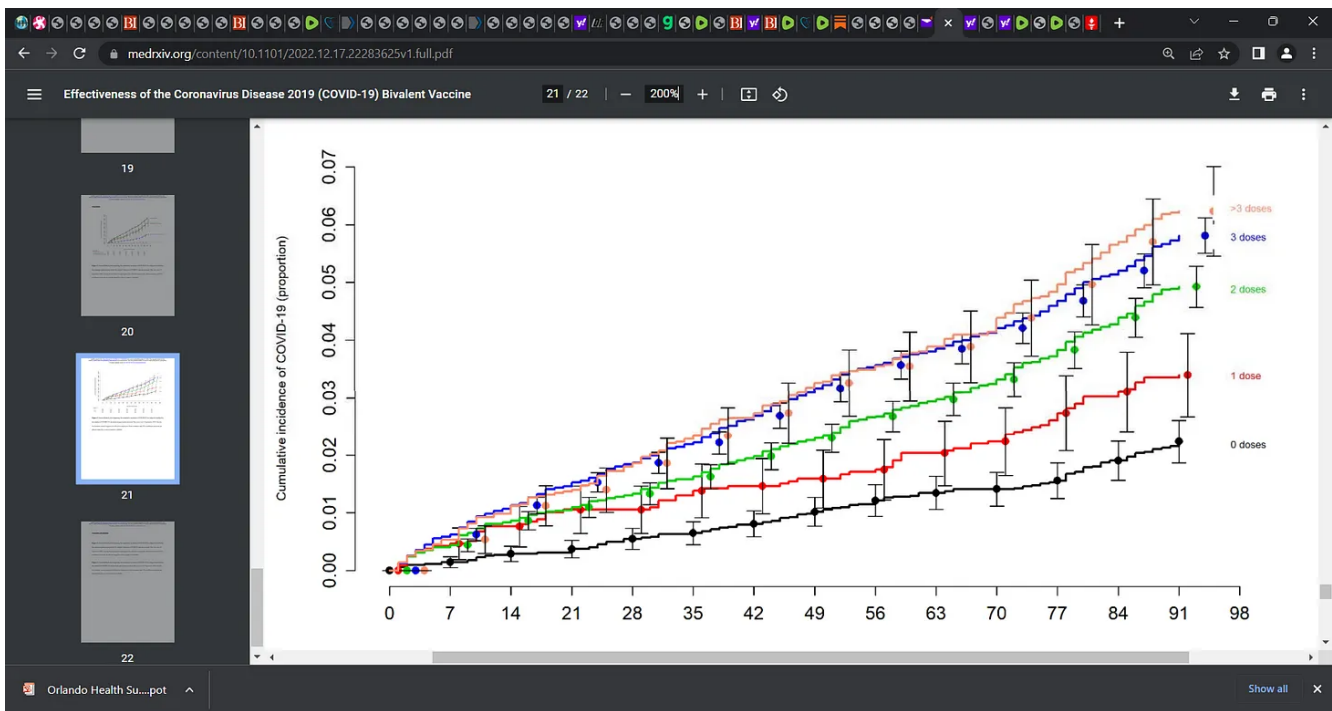
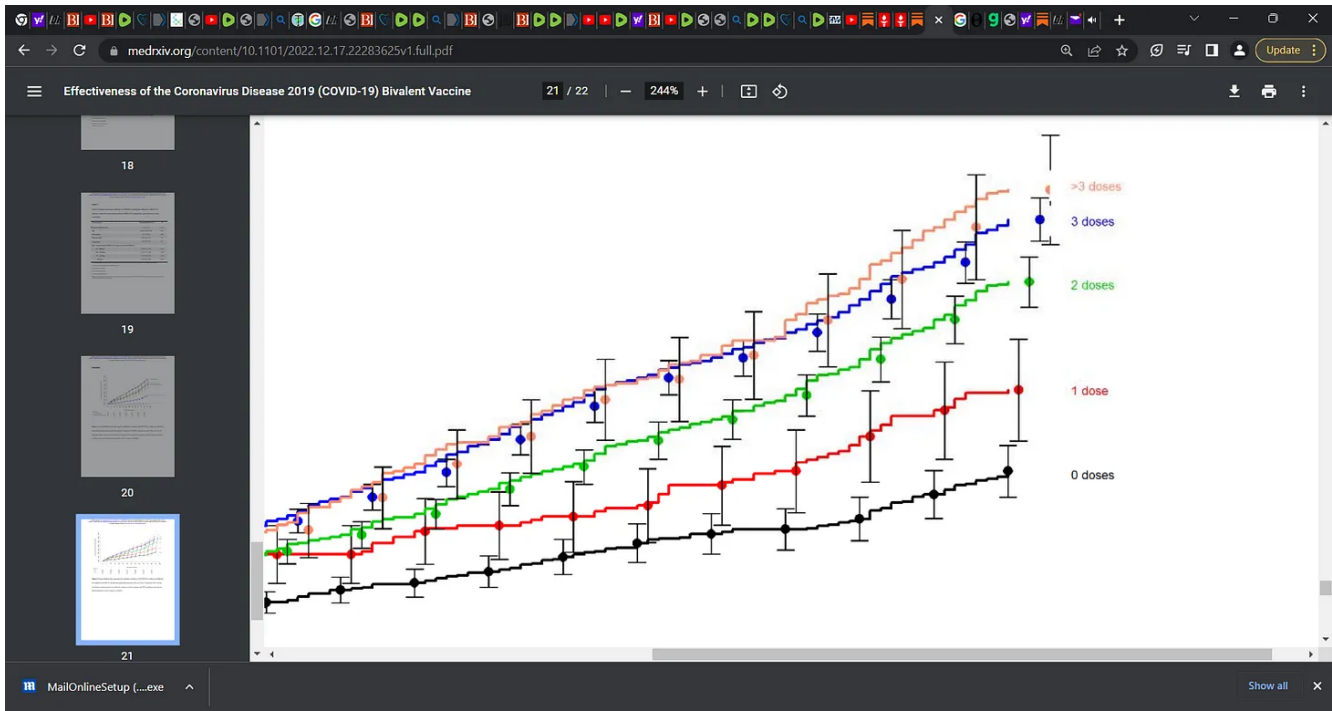
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SOURCE:

<https://www.medrxiv.org/content/10.1101/2022.12.17.22283625v1>

Critical graph (key is that with '0' vaccine, this caused the lowest cumulative incidence of infection and there is a clear dose response; also, there is the issue that the longer duration of follow-up, the greater risk of infection; even if you try to account for healthy vaccinee effect bias, the data is stunningly clear):



Shrestha et al.: "Effectiveness of the Coronavirus Disease 2019 (COVID-19) Bivalent Vaccine"; potent Cleveland Clinic personnel study on the COVID gene injection (mRNA/DNA), the bivalent COVID-19

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Posted December 19, 2022.

Effectiveness of the Coronavirus Disease 2019 (COVID-19) Bivalent Vaccine

 Nabin K. Shrestha, Patrick C. Burke, Amy S. Nowacki, James F. Simon, Amanda Hagen, Steven M. Gordon

doi: <https://doi.org/10.1101/2022.12.17.22283625>

This article is a preprint and has not been peer-reviewed [what does this mean?]. It reports new medical research that has yet to be evaluated and so should not be used to guide clinical practice.

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