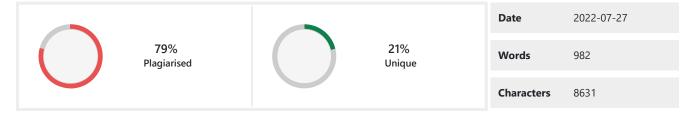


PLAGIARISM SCAN REPORT



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The goal of all vaccines is the same: to activate the immune system to be prepared to fight against the actual infectious agent (e.g. a virus) should the individual become infected.

If we take the approach to never miss an opportunity to vaccinate, we will more easily end this pandemic. Because vaccines are a safe way to prevent viral infections, including Covid-19, physicians and scientists generally recommend that individuals take the authorized vaccine that s/he is being offered. In special circumstances such as pregnancy or immunocompromised individuals, a doctor should be consulted. Inserting mRNA into cells is not new technology. Both BioNTech (collaborator of Pfizer) and

Moderna (Mode "rna") are established companies with years of expertise in mRNA therapeutics. Scientists simply implemented the mRNA technology into the already established vaccine platforms. The novelty was in merging the mRNA technology with available vaccine platforms.

The Pfizer and Moderna mRNA vaccines (as well as the not yet approved Novavax and Inovio vaccines) were not made from fetal cells that came from aborted fetuses. The vaccines were tested in culture against fetal cells to help ensure that they would not harm a fetus as well as to ensure that the technology works in a human cell. These tests were done with cells derived from the 1960's and 1970's from therapeutic abortions. No new fetuses have been sacrificed since that time for any vaccine tests. Different from the mRNA vaccines, many of the other Covid-19 vaccines (e.g. AstraZeneca and Johnson and Johnson) are grown using the same fetal cell line. To "grow" the vaccine in fetal cells is a term that scientists use because all viruses are dependent on cells for "growth", which for a virus means to replicate, and thus, the production of viral vaccines will require cells for production. Most vaccines do not "grow" well in adult cells, and therefore require the use of fetal cells. Importantly, mRNA vaccines are synthesized without cells. Vaccine synthesis and vaccine production are two separate steps in the vaccine making pipeline.

Some vaccines (e.g. Rubella, chicken-pox) used in the United States also come from viruses grown in aborted fetal cells (again, from those cells from the 1960's and 1970's). The United States government has banned the generation of any new cells or the sacrifice of any embryos for the purpose of investigation. Nevertheless, it is recognized that some vaccines would not be possible without growth of the viral vaccines in these fetal cells.

Several significant factors lead to the conclusion that the vaccines present the best ethical option to promote health and life, despite their connection with the use of aborted fetal cells. These factors are:

- (1) The fetal cells in use today are derived from two or three therapeutic abortions performed several decades ago. The abortions were NOT for the purpose of the development of vaccines, and all parties (including the US government) have agreed that no new fetuses will be aborted or used for this purpose.
- (2) Many vaccines (other than COVID) that we use in the US and world-wide are made from these cells, and other substitute cell lines have not proven to be effective for growing the vaccines; this has been the only alternative. (3) Most Church leaders have agreed that the many lives saved by vaccination are an important factor in permitting the use of these vaccines. While it is a sad reality that the origin of these cell lines is from these very few therapeutic abortions, the cell lines are already in existence, no new fetuses

will be used, and as such it is far preferable to cure diseases as a result of the use of these cell lines than to totally forbid the use of these cell lines. The vaccines in no way legitimize or promote abortion; rather they combat disease and death, support health, and enable life—not death—to prevail, all of which are of the highest ethical value.

: No. Although the use of "more" fetal cells in one type of vaccine than another (for example, by growing the vaccine in the cells as opposed to simply testing them using the cell line) appears to suggest that more fetal deaths occurred or that more fetuses were involved, this is NOT accurate. All the cells used are clones from the same original fetal cell lines, and whether a few cells or many are used, there are NO new fetuses involved. The ethics of taking one vaccine is essentially no different from that of another. No. First and foremost, today's microchips are too large to be implanted through a vaccine.

This false rumor is discussed by Dr. Gayle Woloschak in the following article

The reason for this is because the endpoint or goal of the Covid-19 vaccine clinical trials were to prevent severe Covid-19. Therefore, we do not yet know whether the vaccine will prevent transmission of virus. However, we will find out soon

The Moderna and Pfizer vaccines are mRNA vaccines. mRNA is short-lived in all cells lasting only hours before being degraded. The mRNA in both the Pfizer and Moderna vaccines is protected by (1) stabilizing molecules and (2) a lipid coat allowing it to live up to 5-7 days before degradation by human cells. In the time before the mRNA degrades it will remain in the cell to make the spike protein that will provide immunity. mRNA cannot alter DNA and thus provides no danger to the host DNA.

Future vaccines from AstraZeneca, Johnson and Johnson, vaccines made in China, and others use an Adenovirus (see figure, question 10) to introduce DNA from the spike protein into human cells. These vector-based vaccines have the novel coronavirus spike protein encoded within the Adenovirus (a vector). Adenoviruses are DNA viruses which are recognized by the human body, and thus, cannot cause us harm. They are used as vehicles to deliver the genetic message to "make a spike protein" in our cells.

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Because vaccines are a safe way to prevent viral infections, including Covid-19, physicians and scientists generally recommend that individuals take the authorized vaccine that s/he is being offered. In special circumstances such as pregnancy or immunocompromised individuals, a doctor should be consulted. 2.

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No new fetuses have been sacrificed since that time for any vaccine tests [NOTE: A valid point but irrelevant to the sacrifice of the two aborted babies who provided the original KEK-293 and PER.C6 cell lines.]. Different from the mRNA vaccines, many of the other Covid-19 vaccines (e.g. AstraZeneca and Johnson & Johnson) are grown using the same fetal cell line. To 'grow' the ...

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banned the generation of any new cells or the sacrifice of any embryos for the purpose of investigation. Nevertheless, it is recognized that some vaccines would not be possible without growth of the viral vaccines in these fetal cells. 4. Are the vaccines unethical because of their use of aborted fetal cells?

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Answer: No. Although the use of "more" fetal cells in one type of vaccine than another (for example, by growing the vaccine in the cells as opposed to simply testing them using the cell line) appears to suggest that more fetal deaths occurred or that more fetuses were involved, this is NOT accurate.

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