

# The Surge in Childhood Infections: Are mRNA Vaccines the Solution — or the Cause?

*Censored scientists and doctors have long warned that the mRNA COVID-19 vaccines are destroying people's immune systems, and that we're going to see an avalanche of infections as immune system failure sets in.*

By **Dr. Joseph Mercola**

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## Story at a glance:

- Hospitals around the U.S. are suddenly struggling to keep up with surging rates of respiratory infections among children, such as respiratory syncytial virus (RSV), COVID-19, rhinoviruses and influenza.
- Moderna is working on an mRNA jab for RSV, which is scheduled for release in 2023. They're also working on a combination mRNA jab for COVID-19, RSV and the flu.
- Censored scientists and doctors have long warned that the mRNA COVID-19 jabs are destroying people's immune systems, and that we're going to see an avalanche of infections as immune system failure sets in.
- The COVID-19 jab causes innate immune suppression, which makes you more susceptible to all kinds of infections and chronic diseases. Suppression of Type 1 interferon signaling appears to be one of the primary mechanisms by which the shot destroys immune competence, and repeated booster shots can reliably be anticipated to amplify adverse effects.
- The more shots you get, the more likely you are to die from COVID-19. While only 34% of Canadians have received three or four doses of the COVID-19 jab, triple and quadruple jabbed made up 81% of all COVID-19 deaths in June. Excess mortality among young children, teens and young adults is also skyrocketing.

Hospitals around the U.S. are suddenly struggling to keep up with [surging rates of respiratory infections among children](#), such as [RSV](#), COVID-19, rhinoviruses and influenza. Hospital staff feign confusion, saying they have no idea what's going on.

Meanwhile, censored scientists and doctors have long warned that the mRNA [COVID-19 jabs](#) are destroying people's immune systems, and that we're going to see an avalanche of infections as immune system failure sets in.

## Many hospitals at or near capacity

As of the third week of October, several children's hospitals in Washington, D.C., Maryland, Connecticut and Virginia reported being [at or near capacity](#). To expand capacity, officials in Hartford, Connecticut, are seeking help from the National Guard and FEMA.

According to Dr. Margaret R. Moon, co-director of Johns Hopkins Children's Center in Baltimore, the hospital "is experiencing a surge of patients due to an increase in cases of RSV, as well as other reasons, and [many surrounding hospitals](#) are facing the same."

RSV typically causes mild cold-like symptoms that last for a week or two. While harmless in adults, in infants the virus can cause more severe infections such as bronchiolitis (inflammation of the smaller branches of the bronchial airways) and pneumonia.

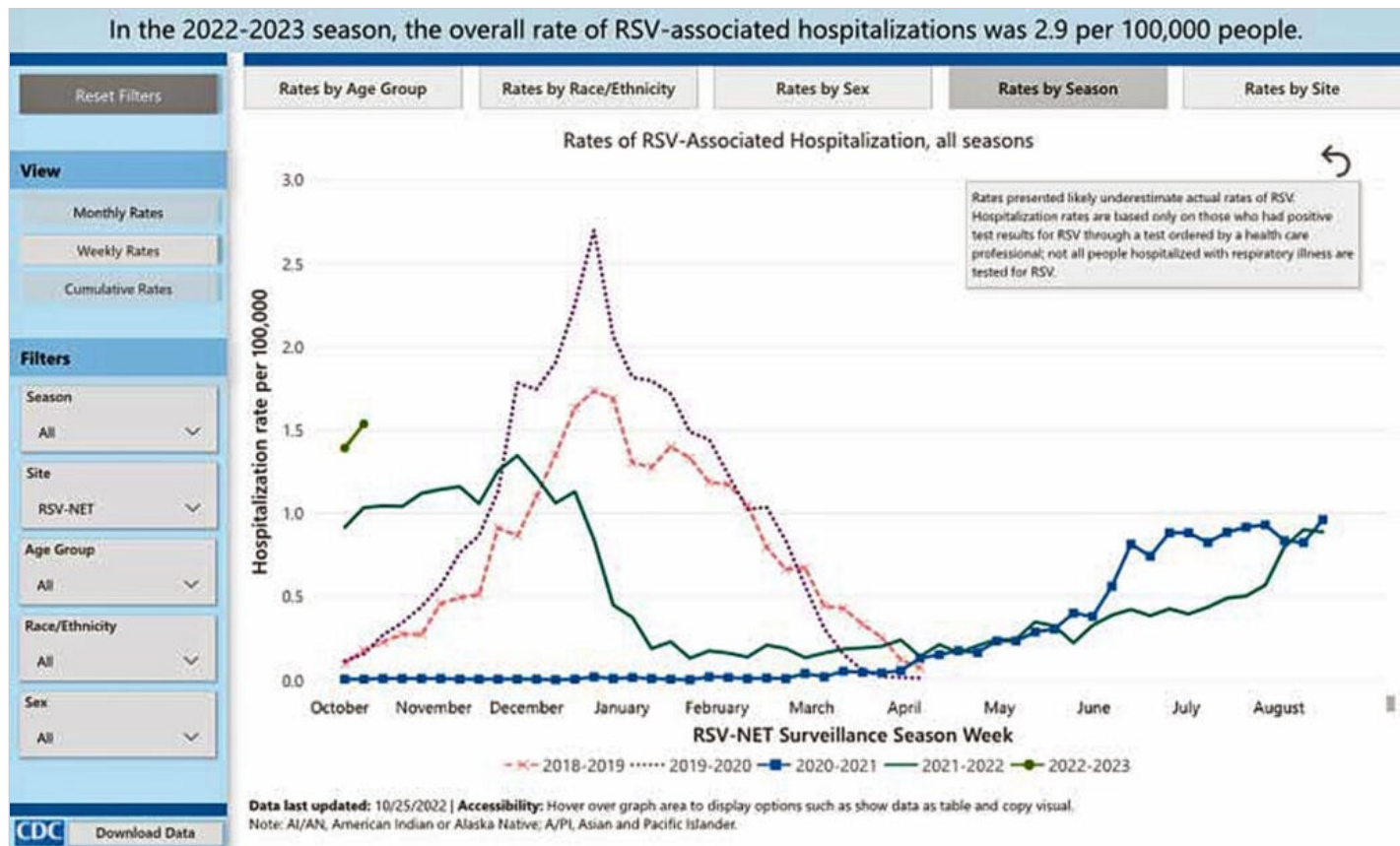
According to Centers for Disease Control and Prevention (CDC) data, more than 58,000 children under age 5 are [hospitalized for RSV each year](#), and the [CDC's RSV dashboard](#) (screenshot below) does show that RSV is

acting unseasonably.

Could this out-of-season emergence of RSV have something to do with the fact that the U.S. Food and Drug Administration (FDA) authorized the [COVID-19 shot for children under 5](#) in June?

Maybe, maybe not. It's not a clear parallel, as RSV also rose out of season during the summer of 2021, when young children did not yet have access to the COVID-19 shot.

Parents and older siblings, however, were eligible, and there are still many open questions surrounding the issue of shedding. It's possible that spike protein shedding from the shots was affecting younger children, suppressing their immune systems.



Credit: Centers for Disease Control and Prevention

## mRNA RSV jab in the works

Considering hospitalization rates for RSV are actually lower than historical seasonal highs, one also wonders whether the media's attention on RSV might be related to the fact that Moderna is working on an [mRNA jab for RSV](#), which is scheduled for release in 2023.

They're also working on a combination mRNA jab for COVID-19, RSV and the flu. Ultimately, Moderna wants to create an [annual mRNA shot](#) that covers all of the top 10 viruses that result in hospitalizations each year. If the COVID-19 shot is any indication, such an injection could be catastrophic.

## COVID jab causes innate immune suppression

There's now ample evidence showing the COVID-19 jab causes innate immune suppression, which makes you more susceptible to all kinds of infection, not just COVID-19, as well as any number of chronic diseases.

In June 2022, Stephanie Seneff, Ph.D., Dr. Greg Nigh, Dr. Anthony Kyriakopoulos and Dr. Peter McCullough published a [paper in Food and Chemical Toxicology](#), reviewing the mechanisms by which the shots suppress

immune function and trigger disease. As noted in the abstract:

“The utilization of mRNA vaccines in the context of infectious disease has no precedent. The many alterations in the vaccine mRNA hide the mRNA from cellular defenses and promote a longer biological half-life and high production of [spike protein](#).

“However, the immune response to the vaccine is very different from that to a SARS-CoV-2 infection.

“In this paper, we present evidence that vaccination induces a profound impairment in type I interferon signaling, which has diverse adverse consequences to human health.

“Immune cells that have taken up the vaccine nanoparticles release into circulation large numbers of exosomes containing spike protein along with critical microRNAs that induce a signaling response in recipient cells at distant sites.

“We also identify potential profound disturbances in regulatory control of protein synthesis and cancer surveillance.

“These disturbances potentially have a causal link to neurodegenerative disease, myocarditis, immune thrombocytopenia, Bell’s palsy, liver disease, impaired adaptive immunity, impaired DNA damage response and tumorigenesis.”

Suppression of Type 1 interferon signaling appears to be one of the primary mechanisms by which the shot suppresses and destroys immune competence, and repeated booster shots can reliably be anticipated to amplify any and all adverse effects.

### **Type 1 interferon suppression is a recipe for ill health**

Type 1 interferon plays an important role in the immune response to viral infections, cancer and autoimmune diseases. So, the fact that we’re now seeing significant increases in all of these conditions is not surprising.

When a cell is invaded by a virus, it releases Type 1 interferon alpha and Type 1 interferon beta. They act as signaling molecules that tell the cell that it’s been infected. That, in turn, launches the immune response and gets it going early in the viral infection.

It’s been shown that people who end up with severe SARS-CoV-2 infection have a compromised Type 1 interferon response. Those who get the jab have an even more suppressed response.

Importantly, the antibody response you get from the COVID-19 shot is exponentially higher than what you get from natural infection, and the level of antibody response rises with disease severity. So, the shot basically mimics severe infection, and this is why boosters can spell disaster.

If your Type 1 interferon response is already deficient, your immune cells are not very capable of stopping the spread of a virus in your body. Hence, the more shots you get, and the more your Type 1 interferon response is impaired, the more likely you become to develop severe infections, be it COVID-19 or any other infection.

This also means that you’re more likely to die, and rising excess mortality statistics, which I’ll review in a moment, confirm this.

Type 1 interferon also keeps latent viruses like herpes and varicella (which causes shingles) viruses in check, and when your interferon pathway is suppressed, these latent viruses can also start to emerge.

And, indeed, the Vaccine Adverse Event Reporting System (VAERS) database reveals many who have been jabbed do report these kinds of infections.

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## Don't be fooled by 'reframing' efforts

Disturbingly, researchers and mainstream media are still pushing the idea that COVID-19 shot side effects are a sign that the shot is working well. As [reported by CNN](#) Oct. 24:

"People who reported experiencing side effects to the Pfizer/BioNTech and Moderna COVID-19 vaccines such as fever, chills or muscle pain tended to have a greater antibody response following vaccination, according to new research.

"Having such symptoms after vaccination is associated with [greater antibody responses](#) compared with having only pain or rash at the injection site or no symptoms at all, suggests the paper published Friday in the journal JAMA Network Open.

"In conclusion, these findings support reframing postvaccination symptoms as signals of vaccine effectiveness and reinforce guidelines for vaccine boosters in older adults,' the researchers ... wrote in their paper."

To be clear, feeling terrible after your COVID-19 shot is not to be taken as evidence that the shot is providing you with protection. What you're experiencing is akin to having severe COVID-19. The shot is suppressing your Type 1 interferon, and continuing with additional jabs is a recipe for ill health. It's just that simple.

As suggested in that JAMA article, they really want to "reframe postvaccination symptoms" to stop people from reconsidering the wisdom of taking subsequent jabs, but don't fall for it. You're feeling terrible because your body is being harmed.

## The more shots you get, the more likely you'll die of COVID

As noted by [Dr. Charles Hoffe](#) in a Sept. 15 interview with Laura-Lynn Tyler Thompson, "The more shots you get, the more likely you will die from COVID-19." An excerpt from the interview is included below. You can find the full interview on [Bitchute](#).

According to the latest data from Canada, summarized by Hoffe, 85% of Canadians have received at least two COVID-19 shots, and in June, 92% of all COVID-19 deaths were in fully jabbed individuals. And, while only 34% of Canadians had received three or four doses, they made up 81% of all COVID-19 deaths in the month of June.

Hoffe said:

“This is the clearest evidence that the more shots you have, the more likely you will die of COVID. These [shots] are severely damaging the immune system. And so, the discrimination against those who have chosen to be vaxx free is absolutely absurd because those are the people who are going to survive.”

### **Youths are dying at frightening rates**

In the video below, [nurse educator John Campbell](#), Ph.D., reviews the latest U.K. and U.S. data on excess deaths in the young. The U.K. is now seeing 20 to 30 excess deaths per week in the age group of birth to 24.

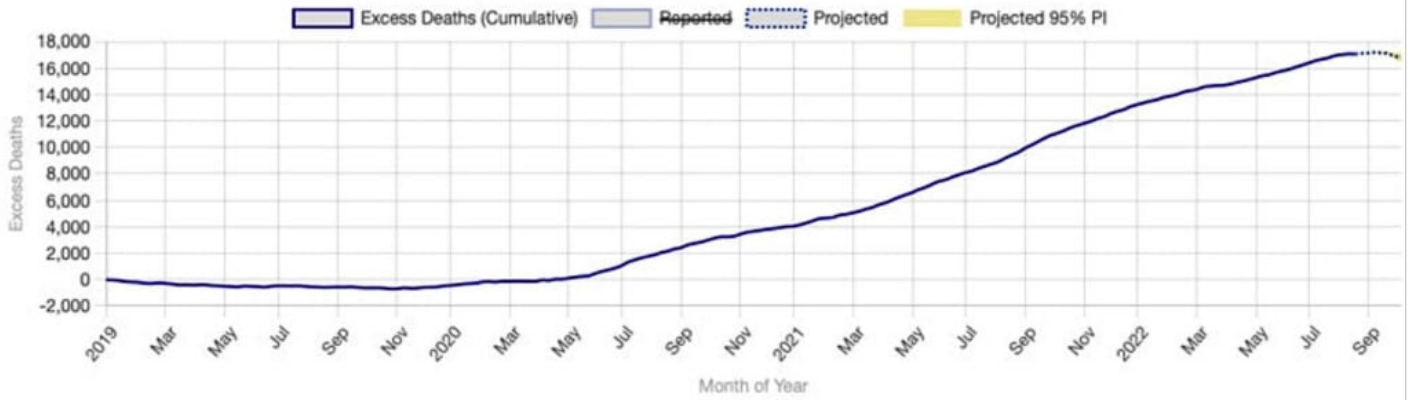
Excess deaths are also statistically higher in the U.S. than expected. For the age group of birth to 24, [cumulative all-cause excess deaths](#) were 16,747 as of week 35. The screenshot below, from USmortality.com, illustrates how the cumulative excess deaths among our children, teens and young adults have skyrocketed since June 2020.

Recall the [FDA authorized the first COVID-19 shot](#) Dec. 11, 2020, for individuals aged 16 years and older. If the excess deaths from June through December were related to COVID-19, the shots certainly have NOT improved the situation or made youths less likely to die. Quite the contrary.

## Cumulative Excess Deaths [United States, 0-24 years]

Weekly, All-Causes

USMortality.com



Sources: CDC.gov, Census.gov

Show Months | CSV | JSON | ▲

Credit: US Mortality

Excess deaths among all age groups follows a similar but more step-like rise.

## Cumulative Excess Deaths [United States]

Weekly, All-Causes

USMortality.com



Sources: CDC.gov, Census.gov

Show Months | CSV | JSON | ▲

Credit: US Mortality

Excess young deaths, UK and US



## Medical abuse of women and children is rampant

The medical system has mistreated and abused infants for decades, forcing a number of completely useless and harmful interventions on them. [Antibiotic eye treatment](#) and the [hepatitis B vaccine](#), both administered on the day of birth, are but two examples.

The fact that [U.S. child mortality](#) ranks worst among the 20 wealthiest nations speaks to the effects of all this medical mistreatment and overtreatment of infants.

The U.S. also has the [highest maternal death rate](#) in the developed world, and according to medical investigators, [84% of all these maternal deaths are preventable](#). Clearly, we're doing a lot of things wrong.

## CDC takes child abuse to a whole new level

With its [decision to add COVID-19 shots](#) to the U.S. childhood, adolescent and adult vaccine schedules, the CDC is taking the abuse of infants and pregnant women to a whole new level.

As reported by The Defender:

“Commenting on [the CDC’s unanimous] vote, Robert F. Kennedy, Jr., chairman of the board and chief legal counsel for Children’s Health Defense (CHD), said:

“This reckless action is final proof of the cynicism, corruption and capture of a once exemplary public health agency. ACIP [Advisory Committee on Immunization Practices] members have again demonstrated that fealty to their pharma overlords eclipses any residual concerns they may harbor for child welfare or public health.

“This is an act of [child abuse on a massive scale](#).’ ...

“Adding the COVID-19 vaccines means 18 more shots — one per year between the ages of 6 months and 18 years — will be added to the schedule, according to Toby Rogers, Ph.D.

“‘So overnight the childhood schedule would go from 54 injections (72 antigens because of combined shots like MMR) to 72 injections (90 antigens),’ Rogers said. ‘This has absolutely nothing to do with health — it’s all about profit and power.’ ...

“Brian Hooker, Ph.D., P.E., told The Defender, ‘Given the high risk of vaccine injury for a product that provides little or no benefit to children, this represents a criminal enterprise solely to ensure a revenue stream for COVID-19 vaccine manufacturers.’ ...

“As of Oct. 7, the VAERS data for 6-month-olds to 5-year-olds who received a COVID-19 vaccine showed reports of 4,279 adverse events, including 182 cases rated as serious and 7 reported deaths.

“For 5- to 11-year-olds, there were 14,622 reports of adverse events, including 692 rated as serious and 29 reported deaths.”

## Can children survive this many mRNA shots?

The following COVID-19 jab recommendations will go into effect in 2023:

- Age 6 months to 4 years — a two-dose primary series for Moderna, or a three-dose primary series for Pfizer, plus an annual booster.
- Age 5 to 11 years — a two-dose series of either Moderna or Pfizer plus an annual booster.
- Age 12 to 18 years — a two-dose series for Moderna, Novavax or Pfizer plus an annual booster.

For children with moderately or severely compromised immune systems, the recommended primary series is increased from a two-dose series to a three-dose series, which is madness heaped upon insanity.

I really don't see how young children will get through their primary education alive if they have to take annual boosters on top of a primary series.

### Rules upended for vaccine injury compensation

Adding insult to injury, while the COVID-19 jab makers get a permanent liability shield through the addition of the jabs to the childhood vaccination schedule, those injured by these mRNA shots will not get compensation through the National Vaccine Injury Compensation Program (VICP), which covers nearly every other vaccine on the schedule.

#### The Defender explains:

"Vaccine makers are not liable for injuries or deaths associated with EUA [emergency use authorized] vaccines but can be held liable for injuries caused by a fully licensed vaccine — unless that vaccine is added to the CDC's childhood vaccination schedule.

"Parents of children injured by vaccines listed on the childhood schedule typically can seek compensation through the taxpayer-funded National Vaccine Injury Compensation Program (VICP), a no-fault alternative to the traditional legal system for resolving vaccine injury claims.

"However, the revisions voted on today by the [committee explicitly state](#) (slide 24) that the newly added ... COVID-19 vaccines are not covered under the VICP.

"Instead, the COVID-19 vaccines added to the childhood schedule will remain covered by the Countermeasures Injury Compensation Program (CICP). To date, only six claims filed with the CICP have been approved for compensation."

In closing, if you care about your children, do not allow them to be injected with these immune-destroying shots. If you're still on the fence, please read the cited paper by [Seneff, Nigh, Kyriakopoulos and McCullough](#), to get an understanding of how these shots can utterly decimate your child's health.

*Originally published on [Dr. Mercola's Substack page](#).*

*The views and opinions expressed in this article are those of the authors and do not necessarily reflect the views of Children's Health Defense.*

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### Dr. Joseph Mercola

Dr. Joseph Mercola is the founder of Mercola.com.

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