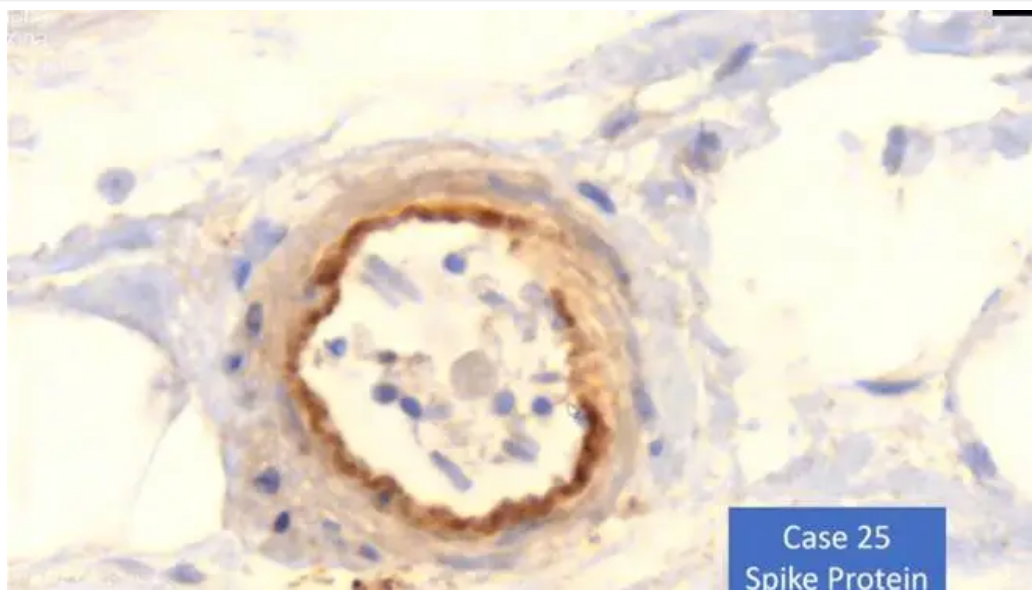


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## Covid Vaccine Injuries: The German Pathologists' Findings



A blood vessel damaged by vaccine-induced spike protein (brown)

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**New histopathological insights into covid vaccine injuries.**

A group of German pathologists, led by Prof. Dr. Arne Burkhardt and Prof. Dr. Walter Lang, have studied tissue samples of about two dozen people who had died after covid vaccination. They presented their preliminary results at [three press conferences](#) in September 2021, December 2021 and in March 2022. SPR referred to their findings in a [previous review](#) of vaccine injuries.

Using state-of-the-art immunohistological technology, the German pathologists detected vaccine-induced spike protein in the endothelium (inner lining) of blood vessels for at least four months after vaccination. They also found that the spike protein triggered local inflammation and lymphocyte (immune cell) infiltration that caused endothelial damage (endotheliitis) in blood vessels of the heart, lungs, brain, spleen, liver and other organs.

In some cases, this endothelial inflammation led to thrombus formation (i.e. blood clots) or to the rupture of blood vessels. In other cases, the pathologists found embolus-like, compartmentalized structures which they believe could be coalesced nano lipid particles from mRNA vaccines. They also found cases of severe heart muscle inflammation (see microscope images below).

The German pathologists do not yet know if the endothelial cells absorbed spike protein that was produced at the vaccine injection site (i.e. in muscle cells) or if they absorbed leaked vaccine mRNA and produced the spike protein locally themselves. Previous studies showed that both vaccine mRNA and spike protein do indeed [get distributed](#) throughout the body.

The tissues examined by the German pathologists belonged to people who did in fact die after covid vaccination. In most of these cases, the pathologists concluded that these people likely (80%) or possibly (15%) died from vaccine-induced endothelial damage that caused blood clots, stroke, heart attack, cardiac arrest or organ failure. In contrast, prior official forensic examinations reported the cause of death to be “natural” or “unclear” in all cases.

The **most important question**, however, may be this: do covid vaccines cause such endothelial injuries only in a few unlucky people, who then suffer severe or fatal adverse events within days or weeks, or do these vaccines cause such endothelial damage in larger segments of the population, but only a few people suffer immediate adverse events (e.g. frail people and [active athletes](#)), while many others might suffer subclinical long-term damage that could cause health issues months or even years later (e.g. premature heart attacks)?

Another important question concerns covid itself. The people whose tissues the German pathologists examined had been vaccinated but had not had covid. To what extent can a severe or even a mild coronavirus infection cause similar endothelial

damage? In particular, it seems plausible that key aspects of **true “long covid”** – such as persistent shortness of breath, lung perfusion and gas exchange issues, “brain fog”, fatigue and POTS – could be caused by similar spike protein or autoimmune-mediated endothelial injuries, especially in the lungs.

In sum, the evidence provided by the German pathologists and other recent studies indicates that the use of experimental first-generation covid vaccines should likely be limited to people at high risk of severe acute covid. In healthy children and in healthy and lean adults younger than 40 or perhaps even 60 years, the overall long-term health risks of covid vaccines appear to outweigh any covid-related health benefits, especially since vaccination cannot prevent coronavirus infection.

## References

- [Press conferences of the German pathologists](#)
- [Their latest presentation](#) (March 11, 2022, 50 min.)
- [German manuscript of their presentation](#) (CB)

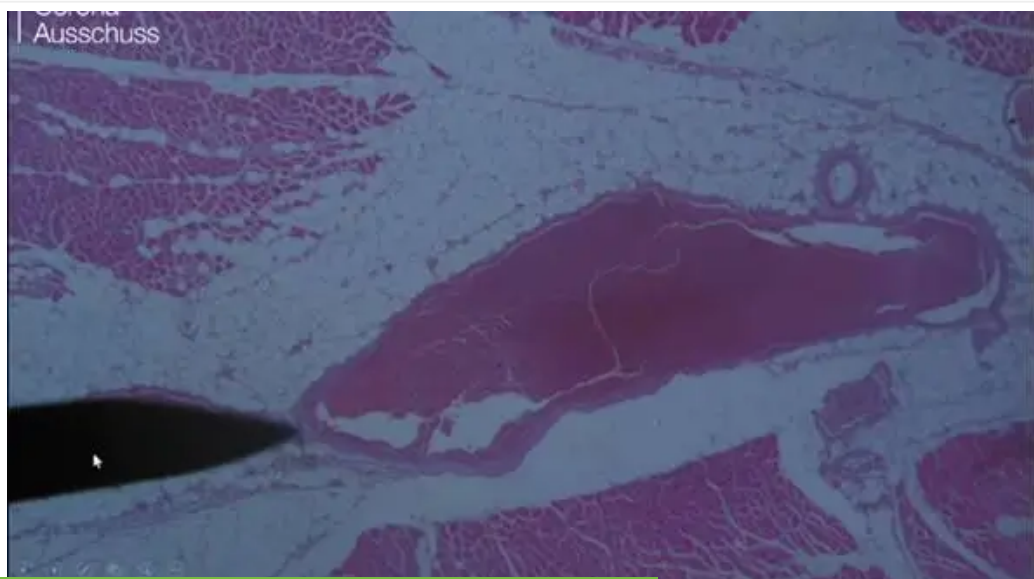
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## Microscope images

The following microscope images were **taken** by the German pathologists. **Blue dots** indicate lymphocyte infiltration (i.e. inflammation), **brown staining** is vaccine-induced spike protein.

### 1) Tip of a needle on top of blood vessels and muscle cells (true size)

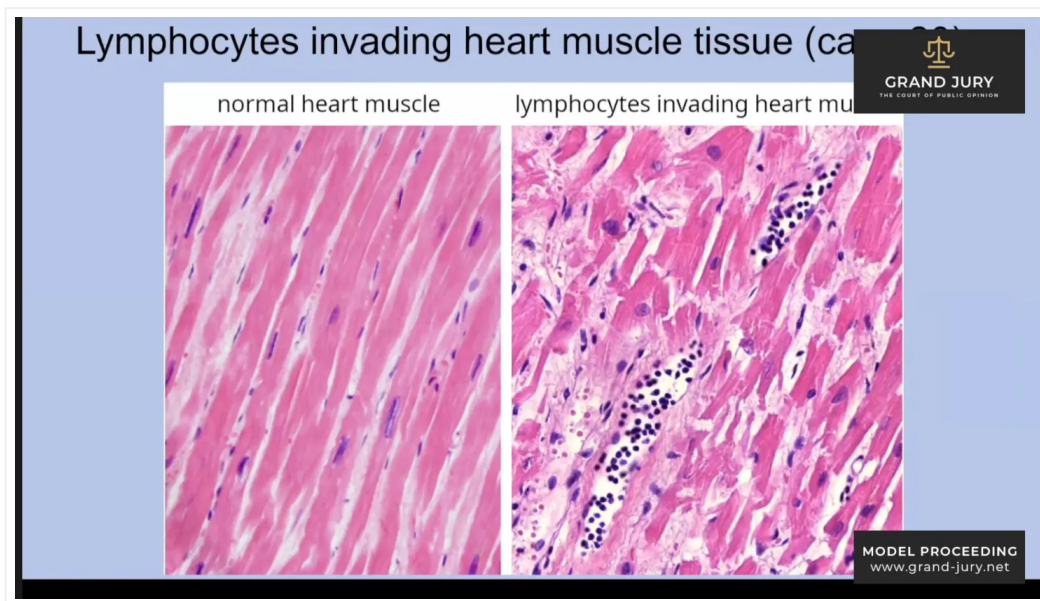
Injection of covid vaccine into a blood vessel must be avoided.



<https://swprs.org/covid-vaccine-injuries-the-german-pathologists-findings/>

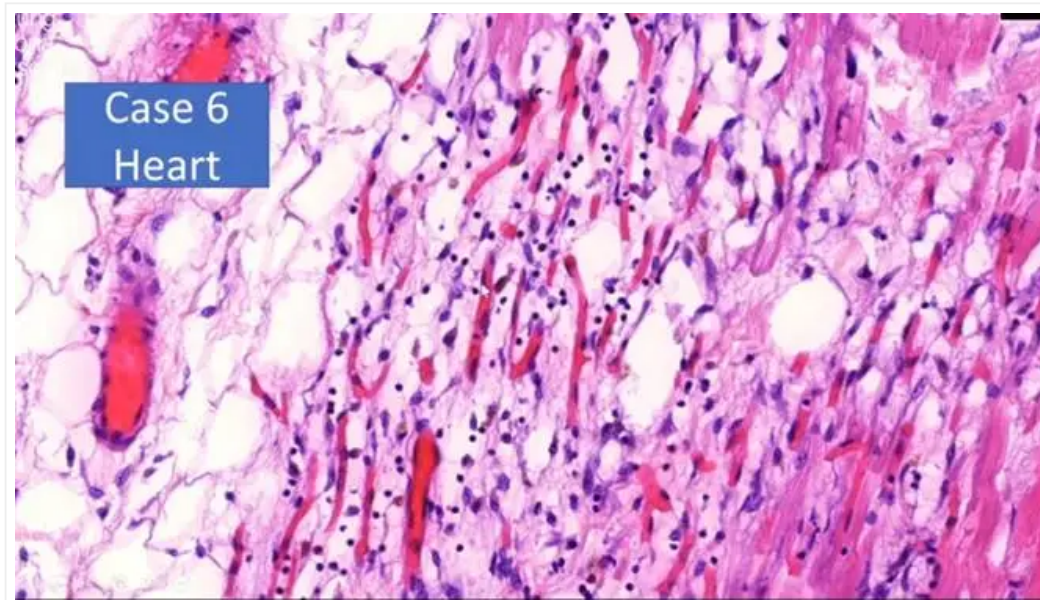
Tip of a needle on top of a muscle cell blood vessel (true size)

## 2a) Myocarditis (heart muscle inflammation)



Myocarditis (heart muscle inflammation)

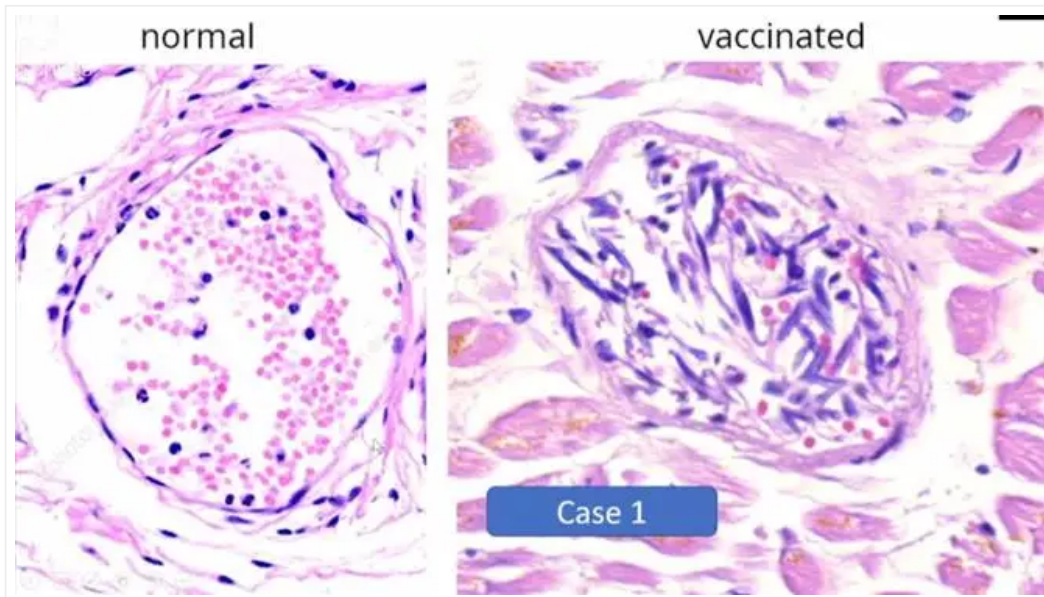
## 2b) Myocarditis (heart muscle inflammation)



Myocarditis (heart muscle inflammation)

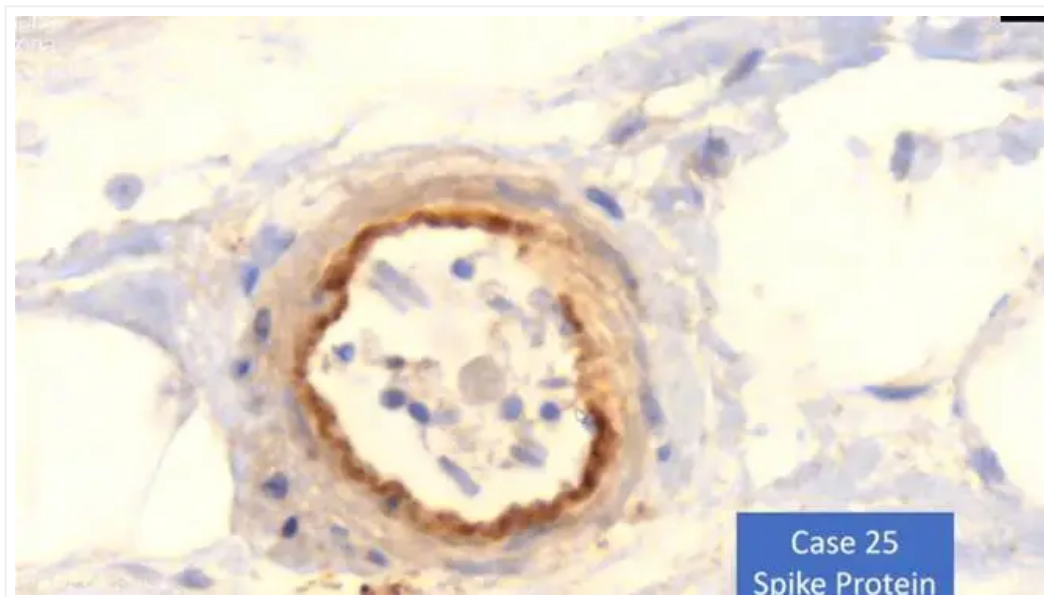
## 3a) Blood vessel with detached and swollen endothelial cells (blue)





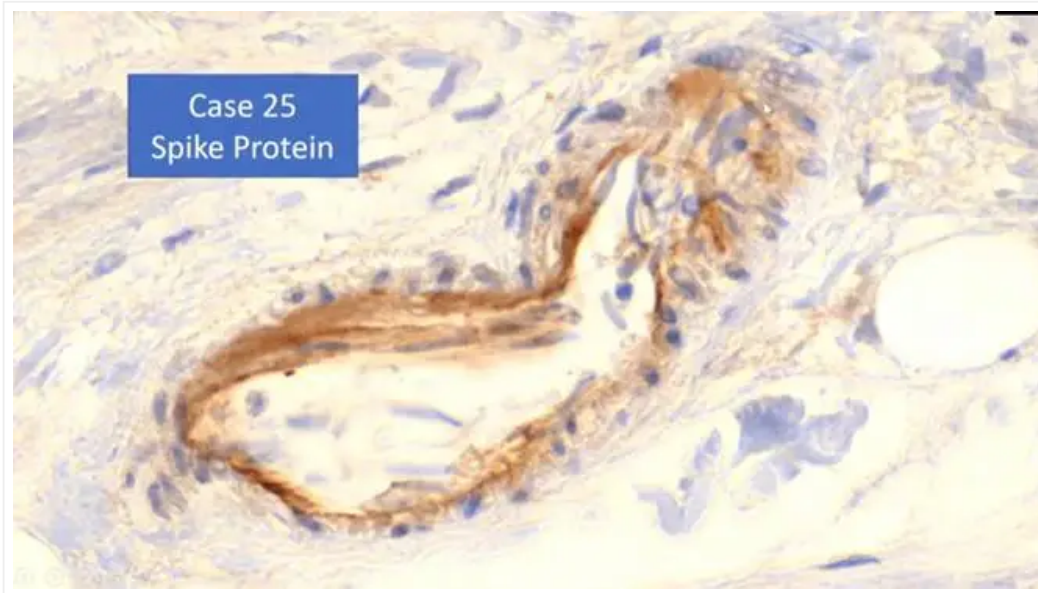
Blood vessel with detached and swollen endothelial cells (blue)

**3b) Blood vessel damaged by vaccine-induced spike protein (brown)**



Blood vessel damaged by vaccine-induced spike protein (brown)

**3c) Blood vessel damaged by vaccine-induced spike protein (brown)**



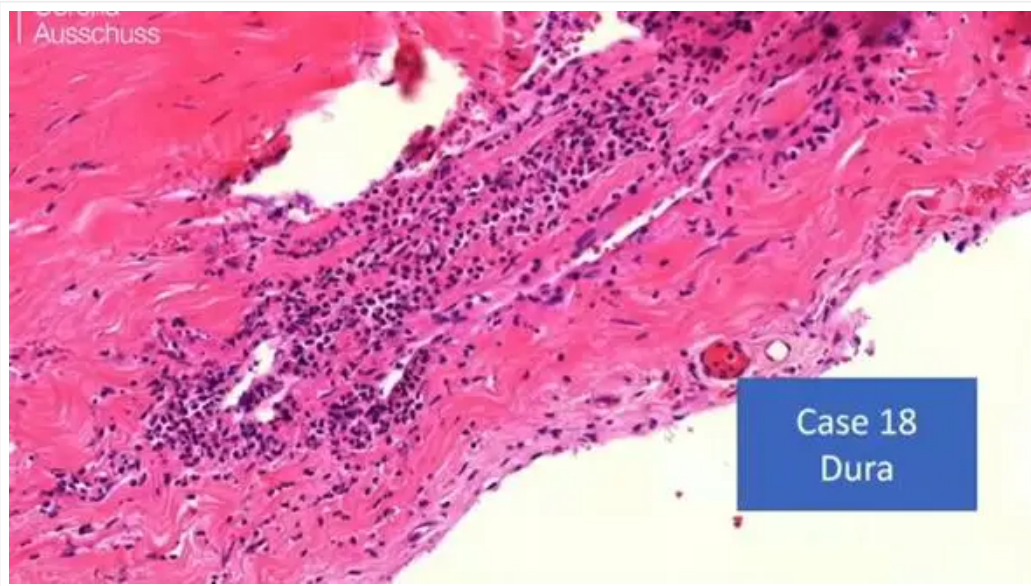
Blood vessel damaged by vaccine-induced spike protein (brown)

**4a) Brain: blood vessel inflammation (26-year-old patient who died from a brain bleed)**



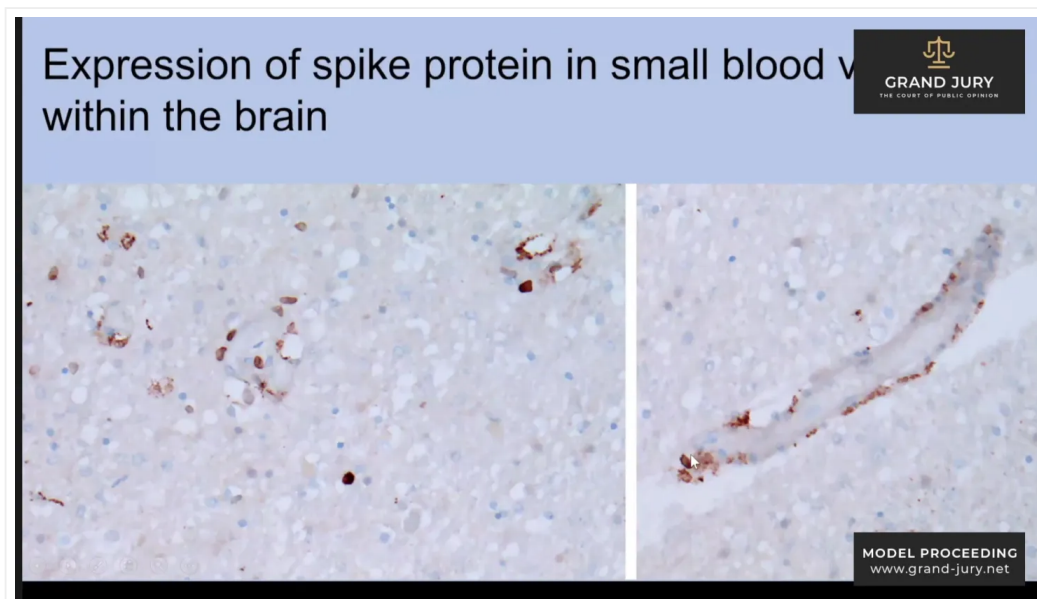
Brain: blood vessel inflammation (26-year-old patient who died from a brain bleed)

**4b) Meningitis (inflammation of the outer brain membrane or dura mater)**



Meningitis (inflammation of the outer brain membrane or dura mater)

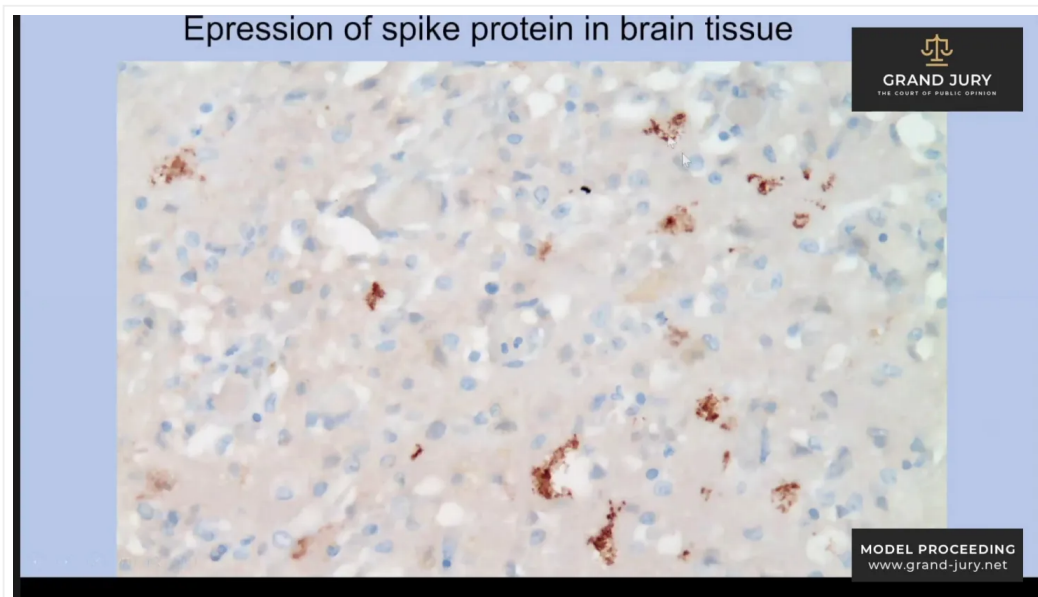
#### 4c) Spike protein (brown) in small blood vessels within the brain



Spike protein in small blood vessels within the brain

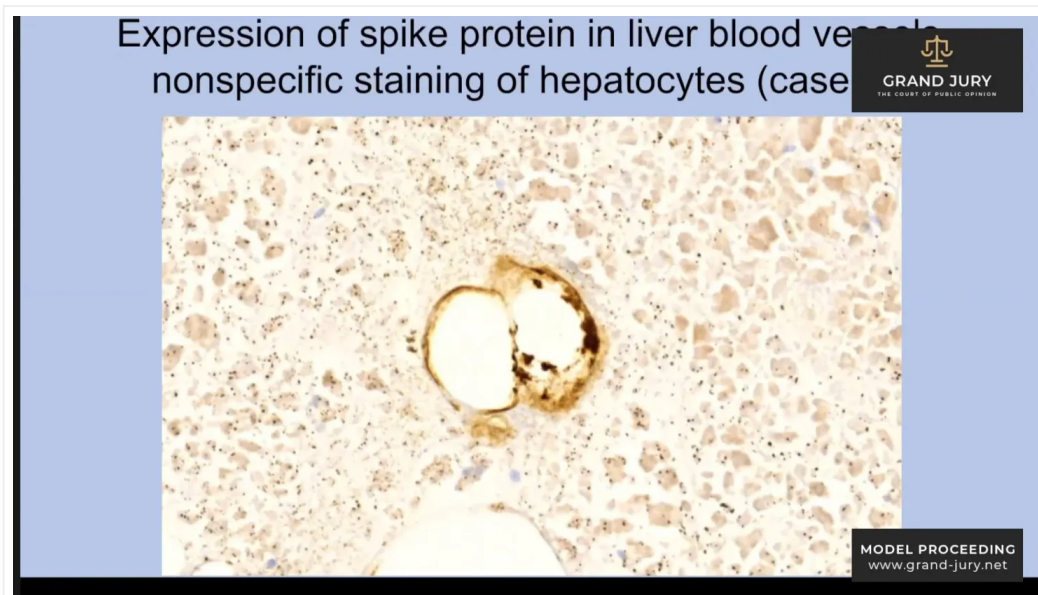
#### 4d) Spike protein (brown) in brain tissue





Spike protein in neuronal brain tissue

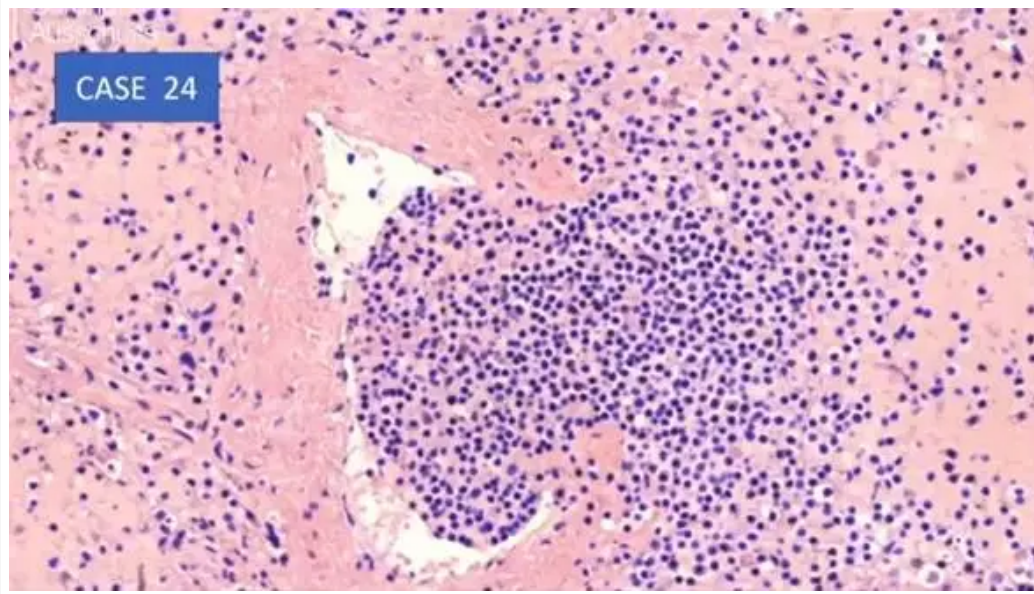
**5) Liver: Spike protein in endothelium of liver blood vessel**



Liver: Spike protein in endothelium of liver blood vessel

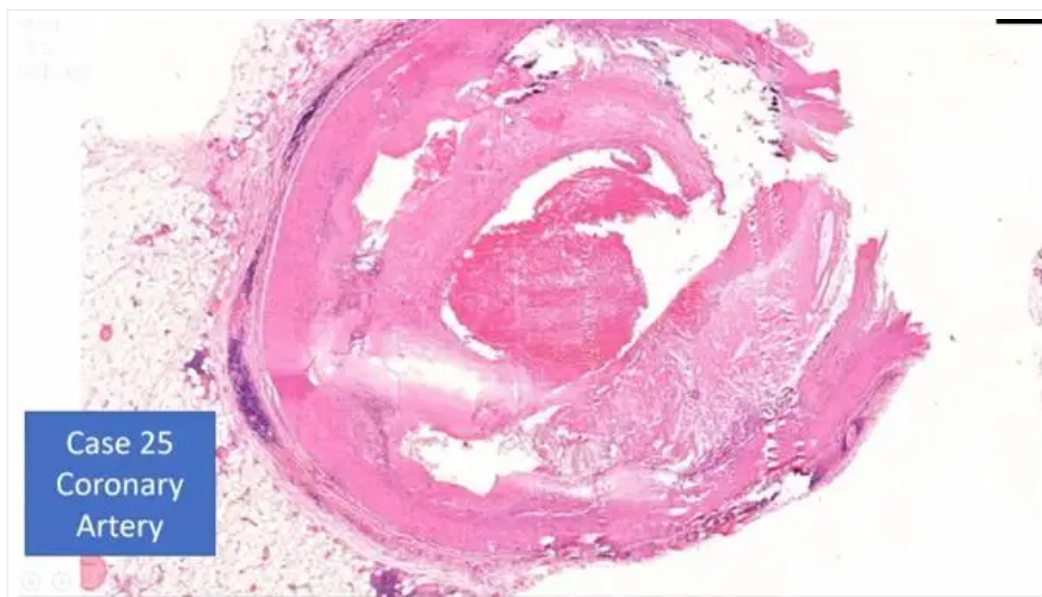
**6) Spleen: Destruction of blood vessel (lymphocyte infiltration)**





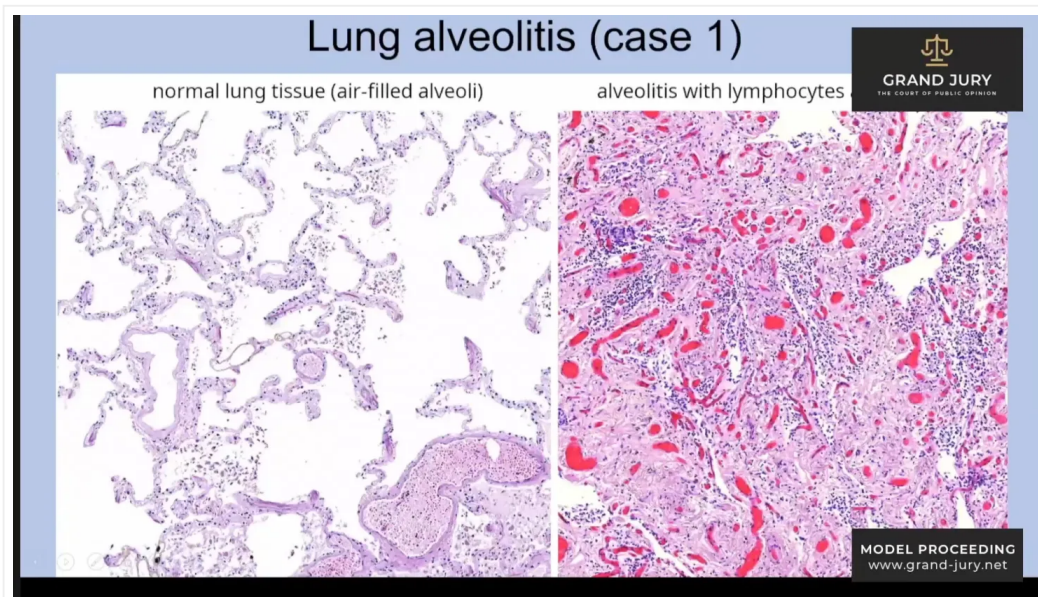
Spleen: Destruction of blood vessel (lymphocyte infiltration)

## 7) Coronary artery inflammation and thrombosis



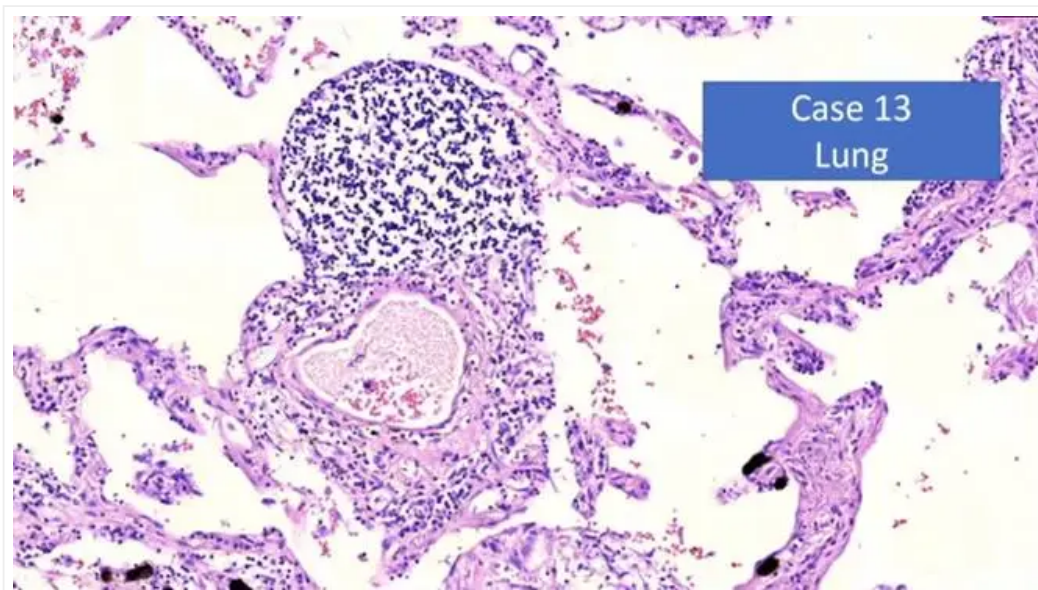
Coronary artery inflammation and thrombosis

## 8a) Lungs: Inflammation of lung tissue (pneumonitis/alveolitis)



**Lungs: Inflammation of lung tissue (pneumonitis/alveolitis)**

**8b) Lungs: Inflammation of lung tissue (pneumonitis/alveolitis)**



**Lungs: Inflammation of lung tissue (pneumonitis/alveolitis)**

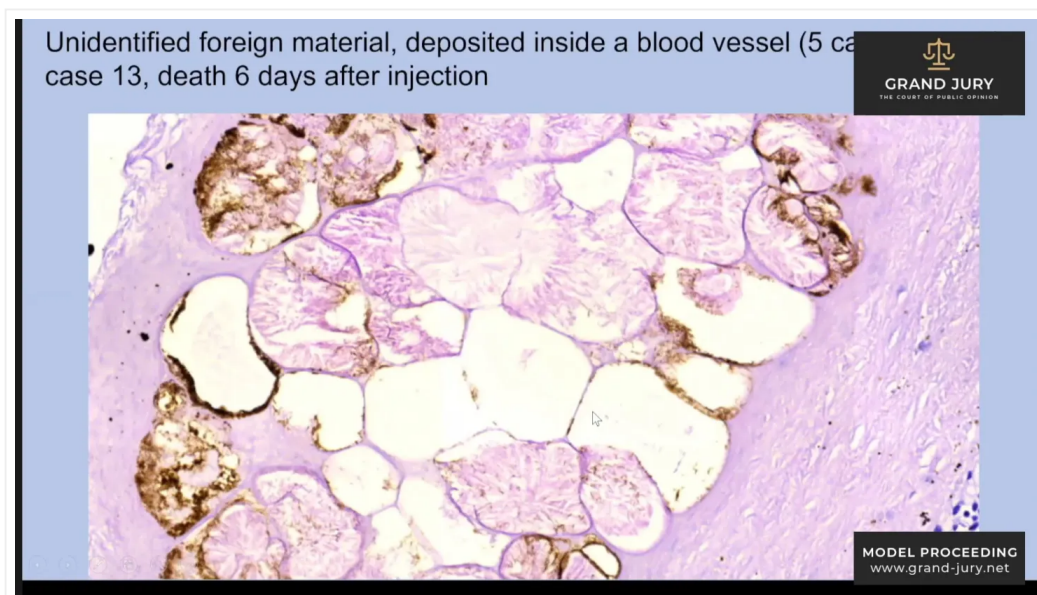
**9a) Possibly coalesced mRNA vaccine nano lipids in a blood vessel**





Possibly coalesced mRNA vaccine nano lipids in a blood vessel

#### 9b) Possibly coalesced mRNA vaccine nano lipids in a blood vessel



Possibly coalesced mRNA vaccine nano lipids in a blood vessel

#### 10a) Professor Arne Burkhardt (pathologist)



**Professor Arne Burkhardt (pathologist)**

**10b) Professor Richard Lang (pathologist)**



**Professor Richard Lang (pathologist)**

Video presentation by Prof. Burkhardt (March 11, 2022; 50 min.)



### Video compilation of “live on TV” vaccine adverse events (18+; 2 min.)

The video shows mostly cardiovascular events (cardiac arrest, stroke, syncope) and some neurological and allergic events. Most of these events were likely caused by covid vaccines. They all occurred in late 2021 or early 2022, with the exception of the last one (Tiffany Dover, Dec. 2020).

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