Measles injections

- Previous shedding experiments
- Using Janssen for young people (NL)
- Using Janssen for indiginous people(KH)
- Using measles to get to the vaccine refusers.

BRIEFING ROOM

Executive Order on Adding Measles to the List of Quarantinable Communicable Diseases

SEPTEMBER 17, 2021 • PRESIDENTIAL ACTIONS

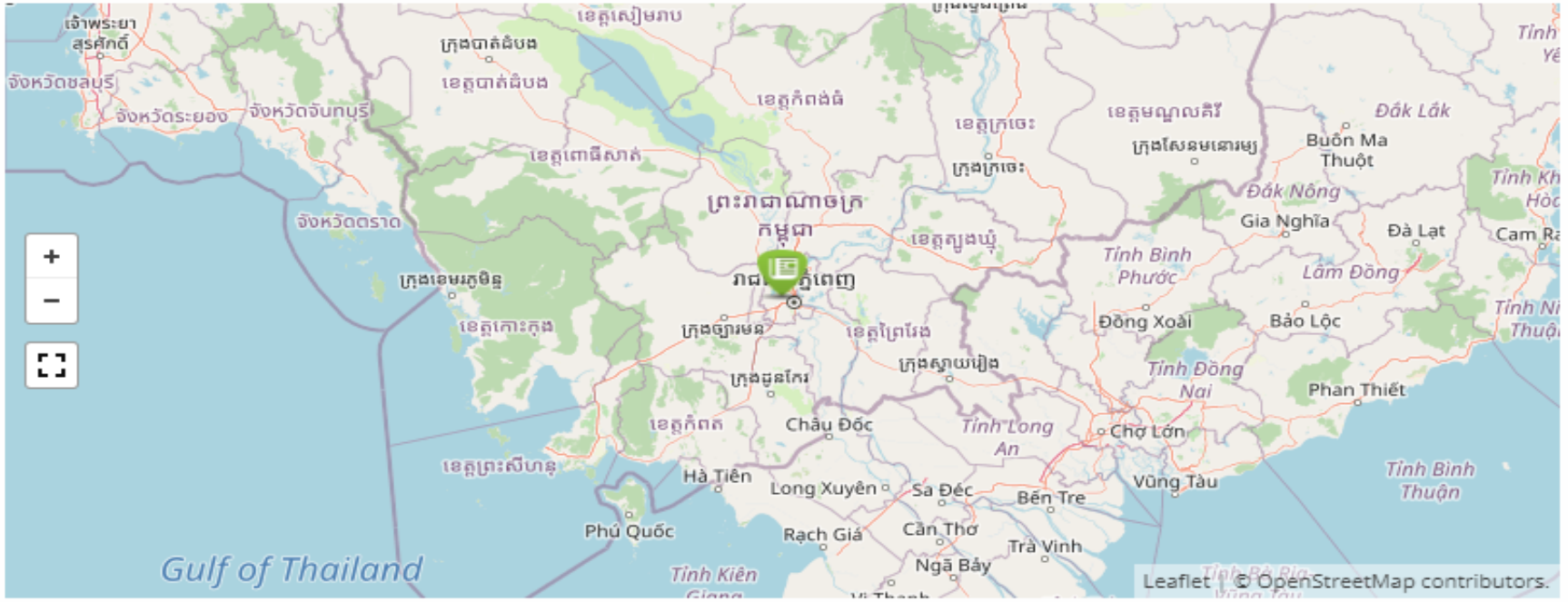
By the authority vested in me as President by the Constitution and the laws of the United States of America, including section 264(b) of title 42, United States Code, it is hereby ordered as follows:

Section 1. Amendment to Executive Order 13295. Based upon the recommendation of the Secretary of Health and Human Services, in consultation with the Surgeon General, and for the purposes set forth in section 1 of Executive Order 13295 of April 4, 2003 (Revised List of Quarantinable Communicable Diseases), section 1 of Executive Order 13295, as amended by Executive Order 13375 of April 1, 2005 (Amendment to Executive Order 13295 Relating to Certain Influenza Viruses and


HugoTelemarketing
OP=OP
HUGO DE JONGE
VACCINVERKOPER
JANSSEN VACCIN
DANSEN MET JANSSEN
VOOR MENSEN
MET PRIKANGST
SLECHTS 200.000
BESCHIKBAAR!
BEL NU!!
0800 12 95

Slightly more than 200,000 doses of Johnson & Johnson COVID-19 vaccines remain in Cambodia, alternatives considered for booster

26 August 2021 Khmer Times Government / Pandemics COVID-19 Vaccine / Johnson & Johnson



Cambodia remaining stock of Janssen's Johnson & Johnson vaccines, which was designated for frontliners and general population in remote, far lying places and hill tribes now stands at just above 200,000. ...

Khmer Times Staff

https://www.khmertimeskh.com/923318/slightly-more-than-200000-doses-of-johnson-johnson-covid-19-vaccines-remain-

Vaccine shedding

From Wikipedia, the free encyclopedia

Vaccine-induced viral shedding (erroneously termed **vaccine shedding**) is ordinary viral shedding with the distinction being that it followed administration of an attenuated vaccine (also known as a "live-virus vaccine"), which is a specific vaccine technology that uses an attenuated form of a live virus. The overwhelming majority of vaccines, however, are not attenuated (live virus) vaccines, and therefore cannot cause vaccine-induced viral shedding.

The specific use of the erroneous and ambiguous term "vaccine shedding" (erroneous because a vaccine itself does not shed, it is viruses that shed) has recently come into general parlance of anti-vaccine activists linked to misinformation relating to COVID-19, even though none of the many COVID-19 vaccines developed around the world use live-virus vaccine technology. Despite this, a COVID-19 "vaccine shedding" conspiracy theory has consequently emerged as one of many items of COVID-19 misinformation pushed by COVID-19 conspiracy theorists leading to vaccine hesitancy among some people.[1][2][3] With the exception of the oral polio vaccine (OPV), which was discontinued in the USA in 2000,[4] there have been few documented cases of vaccine-induced viral shedding that has infected contacts of a person vaccinated with an attenuated (live-virus) vaccine.[5]

Vaccine-induced viral shedding is no different to ordinary viral shedding during a regular infection with a virus, which is part of the normal mechanism of virus transmission.[6]

Shedding course of bovine respiratory syncytial virus and bovine parainfluenza 3 virus in calves vaccinated intranasally

Abstract

Shedding time of bovine respiratory syncytial virus (BRSV) and bovine parainfluenza virus 3 (BPIV3) in calves vaccinated intranasally with modified live Rispoval RS-PI3 vaccine was determined. Blood and nasal swabs were collected on selected days before and after vaccination. Antibodies against BRSV and BPIV3 were tested by Respiratory ELISA Pentakit and the viral RNA was detected by RT-PCR. Twenty eight days after administration of the vaccine, a marked increase of specific antibody titres to BRSV and BPIV3 was detected in vaccinated calves. All animals were RT-PCR positive both for BRSV and BPIV3. Both viruses were excreted with nasal discharges within 8 d after vaccination but the course of shedding in individual calves was variable.

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Unofficial table of contents

Law for the prevention and control of infectious diseases in humans (Infection Protection Law - IfSG)

§ 21 Vaccines

In the case of a protective vaccination ordered on the basis of this law or one publicly recommended by the highest state health authority or a vaccination according to § 17a paragraph 2 of the Soldiers Act, vaccines may be used that contain microorganisms that can be excreted by the vaccinated and absorbed by other people. The basic right to physical integrity (Article 2, Paragraph 2, Clause 1 of the Basic Law) is restricted in this respect.

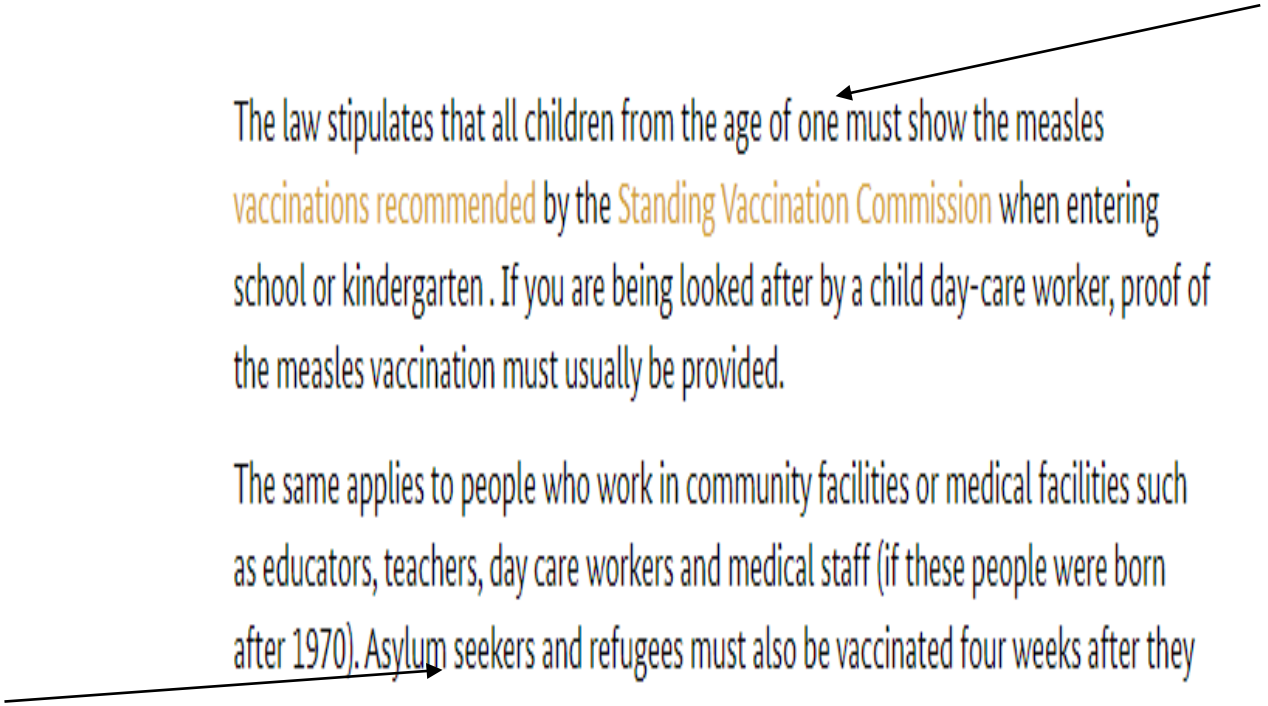
		compensation law of December 12, 2019 (Federal Law Gazette I p. 2652)
11/01/2021	(not yet in force)	Article 1 Measles Protection Act of February 10, 2020 (Federal Law Gazette I p. 148)
10/01/2021	(not yet in force)	Article 4 Act to update the structural reform of the federal fee law of July 18, 2016 (Federal Law Gazette I p 1666)

past and consolidated changes (change missed? Subscribe to IfSG!)

06/01/2021	Synopsis as a whole or individually for Section 5 , Section 5b (new) , Section 22 , Section 25 , Section 28c , Section 36 , Section 74 , Section 75a (new) , Annex (new)	Article 1 Second law amending the Infection Protection Act and other laws of May 28, 2021 (Federal Law Gazette I p 1174)
05/04/2021 (05/31/2021)	§ 28b	Article 1 Second law amending the Infection Protection Act and other laws of May 28, 2021 (Federal Law Gazette I p 1174)
04/23/2021 (05/31/2021)	Section 56	Article 1 Second law amending the Infection Protection Act and other laws of May 28, 2021 (Federal Law Gazette I p

Compulsory vaccination should protect children from measles

School and kindergarten children should be effectively protected against measles. This is the aim of the Measles Protection Act, which came into force on March 1, 2020.



The law stipulates that all children from the age of one must show the measles vaccinations recommended by the Standing Vaccination Commission when entering school or kindergarten. If you are being looked after by a child day-care worker, proof of the measles vaccination must usually be provided.

The same applies to people who work in community facilities or medical facilities such as educators, teachers, day care workers and medical staff (if these people were born after 1970). Asylum seekers and refugees must also be vaccinated four weeks after they have been admitted to communal accommodation

BACKGROUND Corona pandemic

Compulsory vaccination for teachers and educators - is that possible?

Status: 13.07.2021 11:04 a.m.

It is about health protection for everyone, but also about the physical integrity of the individual: The debate about compulsory vaccination for professional groups moves in this area of tension.

By Christoph Kehlbach, ARD legal editor

"Anyone who joins a group of vulnerable people by choosing a profession has a special job-related responsibility" - this is how the "Rheinische Post" quotes the human geneticist Wolfram Henn. And in this sense those who cannot be vaccinated against Covid-19 are vulnerable. So especially children under the age of twelve.

Synthetic construct ORF1ab, spike, ORF3, E, M, ORF6, ORF8, and N gene complete cds

GenBank: MT108784.1

FASTA Graphics

Go to:

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  JOURNAL   Unpublished
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  AUTHORS   Thao,T.N., Labroussaa,F., Ebert,N., Portmann,J., Stalder,H.,
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  TITLE     Direct Submission
  JOURNAL   Submitted (18-FEB-2020) Department of Infectious Diseases and
            Pathobiology, Institute of Virology and Immunology (IVI),
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spike [synthetic construct]

GenBank: QIG55857.1

Identical Proteins FASTA Graphics

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            Jores,J. and Thiel,V.
  TITLE     Rapid reconstruction of SARS-CoV-2 using a synthetic genomics
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  JOURNAL   Unpublished
REFERENCE   2  (residues 1 to 1273)
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            Jores,J. and Thiel,V.
  TITLE     Direct Submission
  JOURNAL   Submitted (18-FEB-2020) Department of Infectious Diseases and
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            Laenggassstrasse 122, Bern, BE 3001, Switzerland
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surface glycoprotein [synthetic construct]

GenBank: QJS57327.1

Identical Proteins FASTA Graphics

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  TITLE     SARS-CoV-2 Genetics Reveals a Variable Infection Gradient in the
            Respiratory Tract
  JOURNAL   Unpublished
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  AUTHORS   Hou,Y.J., Okuda,K., Edwards,C.E., Martinez,D.R., Asakura,T.,
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  TITLE     Direct Submission
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  AUTHORS   Hoerner,C., Schuermann,C., Auste,A., Ebenig,A., Muraleedharan,S.,
            Dinnon,K.H. III, Scholz,T., Herrmann,M., Schnierle,B., Baric,R.S.
            and Muehlebach,M.D.
  TITLE     A Highly Immunogenic and Effective Measles Virus-based Th1-biased
            COVID-19 Vaccine
  JOURNAL   Unpublished
REFERENCE   2  (residues 1 to 1273)
  AUTHORS   Hoerner,C., Schuermann,C., Auste,A., Ebenig,A., Muraleedharan,S.,
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            and Muehlebach,M.D.
  TITLE     Direct Submission
  JOURNAL   Submitted (09-OCT-2020) Abteilung Veterinaermedizin,
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Posted 29 March 2020. Last Updated 10 May 2020. v7.3

MMR Vaccine Appears to Confer Strong Protection from COVID-19: Few Deaths from SARS-CoV-2 in Highly Vaccinated Populations

Rubella component of MMR vaccine may prevent death or severe disease from COVID-19

Principal Investigator: Jeffrey E. Gold[1], President, World Organization (inset); Co-Investigator: Larry P. Tilley[2], Diplomate, ACVIM; Co-Investigator: William H. Baumgartl[3], MD, MSME; Correspondence: mmr@world.org Text/Call: 202-642-4445

Summary: Published epidemiological data suggests a correlation between patients who receive measles-rubella containing vaccines such as the commonly available MMR vaccine, and reduced COVID-19 death rate. Similar observations were recently noted in a Cambridge Study by Young et al, who noted protein homology between the COVID-19 virus and the rubella virus, corroborating the evidence in this report. The epidemiologic associations suggest that a measles-rubella containing vaccine, as currently produced, may be protective against severe disease and death from COVID-19 exposure.

Homologous protein domains in SARS-CoV-2 and measles, mumps and rubella viruses: preliminary evidence that MMR vaccine might provide protection against COVID-19

Adam Young[1], Bjoern Neumann[1], Rocio Fernandez Mendez[2], Amir Reyahi[3], Alexis Joannides[2], Yorgo Modis[4,5,*] & Robin JM Franklin[1,*]

[1]*Wellcome Trust- MRC Stem Cell Institute, Jeffrey Cheah Biomedical Centre, University of Cambridge, Cambridge UK, CB2 0AW, UK*

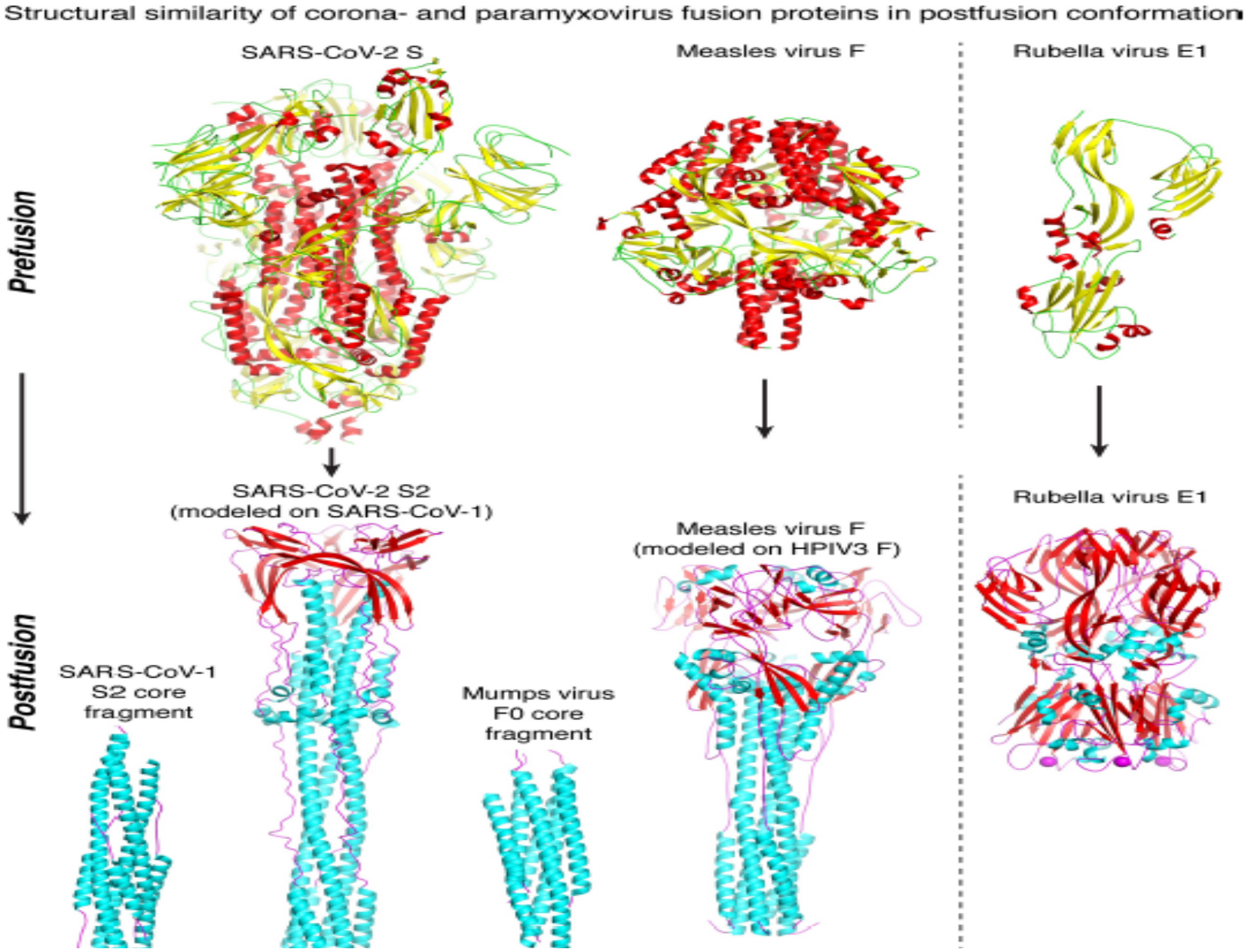
[2]*Department of Clinical Neurosciences, University of Cambridge, Cambridge Biomedical Campus, Cambridge, CB2 0QQ, UK*

[3] *Department of Emergency Medicine, Luton & Dunstable University Hospital NHS Foundation Trust,* Luton LU4 0DZ, UK

[4]*Molecular Immunity Unit, Department of Medicine, University of Cambridge, MRC Laboratory of Molecular Biology, Francis Crick Avenue, Cambridge Biomedical Campus, Cambridge, CB2 0QH, UK*

[5]*Cambridge Institute of Therapeutic Immunology & Infectious Disease (CITIID), Department of Medicine, University of Cambridge, Cambridge CB2 0AW, UK*

[*]Corresponding authors: Robin Franklin - rjf1000@cam.ac.uk; Yorgo Modis - ym10000@cam.ac.uk


Structural similarity of corona- and paramyxovirus fusion proteins in postfusion conformation
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Measles virus F
Rubella virus E1
Prefusion
Postfusion
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(modeled on SARS-CoV-1)
Measles virus F
(modeled on HPIV3 F)
Rubella virus E1
SARS-CoV-1
S2 core
fragment
Mumps virus
F0 core
fragment

Biomarkers of Trained Immunity Following MMR Vaccination

ClinicalTrials.gov Identifier: NCT04646239

Recruitment Status : Recruiting
First Posted : November 27, 2020
Last Update Posted : March 16, 2021

See Contacts and Locations

Sponsor:
Washington University School of Medicine

Information provided by (Responsible Party):
Michael Avidan, Washington University School of Medicine

Study Description

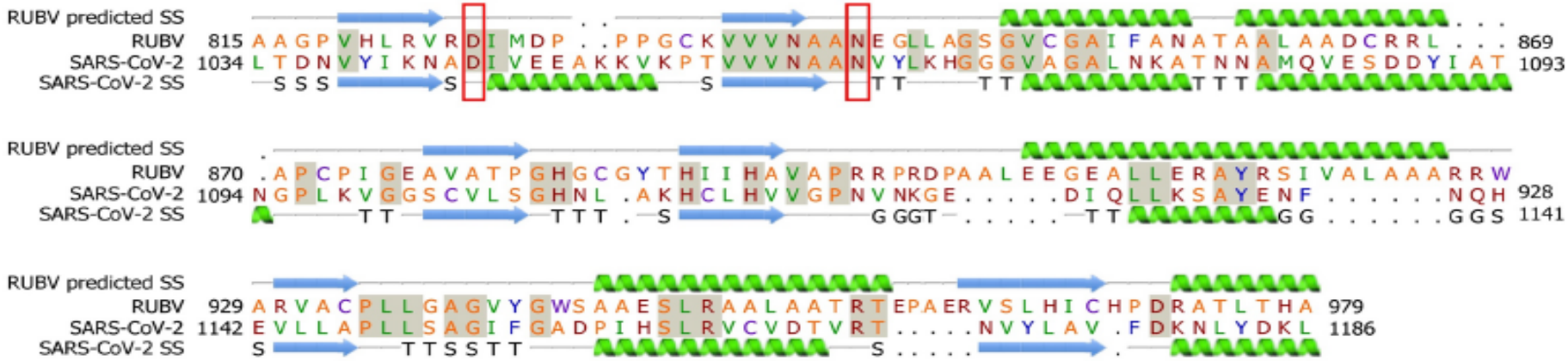
Go to

Brief Summary:

This is a substudy of NCT04333732. The goal of this sub-study is to identify and characterize biomarkers of trained immunity by measuring, in vitro, immune responses to heterologous products, especially viral associated products, in the MMR vaccinated compared placebo groups.

All participants are randomly assigned to MMR or placebo injection at baseline, followed by SARS-CoV-2 specific vaccination. Blood is drawn around 60 to 90 days after the last SARS-CoV-2 specific vaccine injection.

A Homologous Macro domains in SARS-CoV-2 and rubella virus



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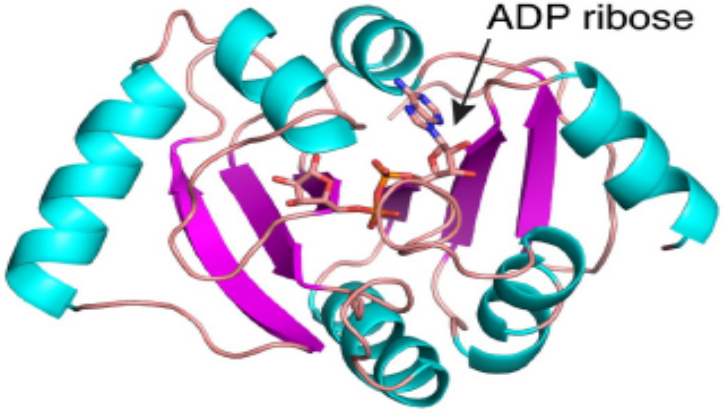
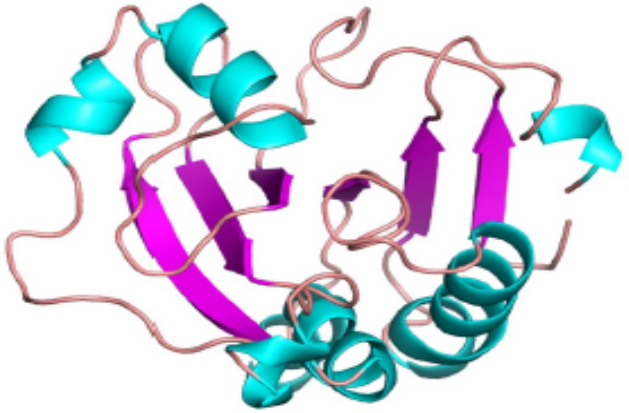
SARS-CoV-2
NSP3 Macro domain



Rubella virus p150
Macro domain
(modeled on SARS-CoV-2 Macro)



A highly immunogenic and effective measles virus-based Th1-biased COVID-19 vaccine

Cindy Hörner, Christoph Schürmann, Arne Auste, Aileen Ebenig, Samada Muraleedharan, Kenneth H. Dinnon III, Tatjana Scholz, Maike Herrmann, Barbara S. Schnierle, Ralph S. Baric, and Michael D. Mühlebach

[a]*Product Testing of Immunological Medicinal Products for Veterinary Use, Division of Veterinary Medicine, Paul-Ehrlich-Institut, D-63225 Langen, Germany;*

[b]*German Center for Infection Research, D-63225 Langen, Germany;*

[c]*Department of Microbiology & Immunology, University of North Carolina at Chapel Hill, Chapel Hill, NC 27599;*

[d]*Division of Virology, Paul-Ehrlich-Institut, D-63225 Langen, Germany;*

[e]*Pathogenesis of Respiratory Viruses, Division of Veterinary Medicine, Paul-Ehrlich-Institut, D-63225 Langen, Germany;*

[f]*Department of Epidemiology, University of North Carolina at Chapel Hill, Chapel Hill, NC 27599;*

[g]*Rapidly Emerging Antiviral Drug Discovery Initiative, University of North Carolina at Chapel Hill, Chapel Hill, NC 27599*

– Hide authors and affiliations