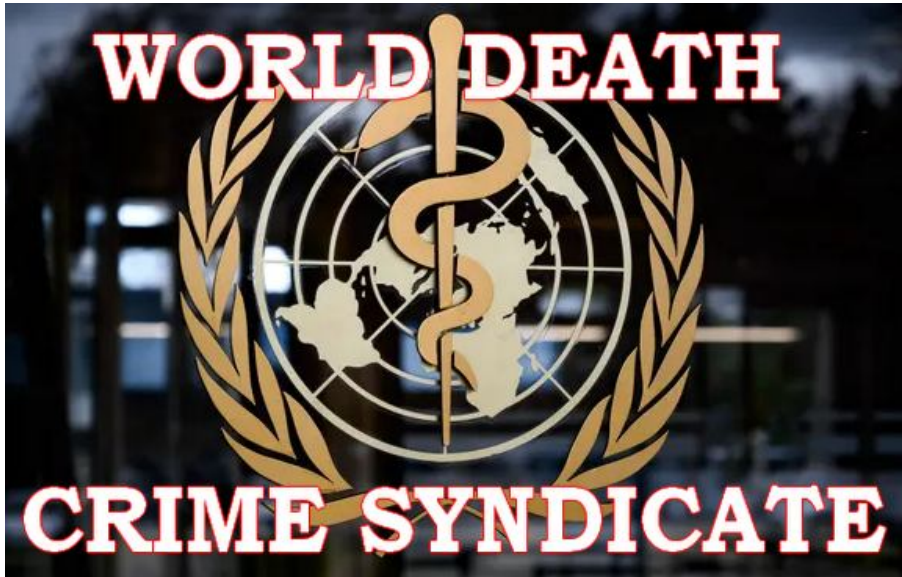


A Cautionary Tale About the WHO — UPDATE

<https://www.bluemoonofshanghai.com/politics/6566/>

By **Larry Romanoff**, March 31, 2022

This essay is part of my series on Big Pharma titled “A Litany of Pharma Crimes” (1) This is of special importance because it relates to our current COVID-19 catastrophe and all these separate segments form dots that need to be connected to fully appreciate and understand what is happening to our world today.



*In addition to my articles on COVID-19 specifically, these other segments illuminate **the criminality that pervades the entire pharma industry but which includes collusion at the highest levels of Western governments and UN agencies like the WHO and UNICEF, Foundations like the Rockefeller Institute and individuals like Bill Gates.** The extent of what can only be termed a homicidal criminality is almost impossible to believe at first reading.*

*On reading these stories, we have an instinctive tendency to tell ourselves that “**This cannot possibly be true. They would never do that.**”*

*It is painful and upsetting to be finally forced to the conclusion that “**Yes, they bloody well would do that.**”*

*There are several extremely shocking essays to come, not the least of which will cover the COVID-19 injections (vaccinations) and **Pfizer’s extensive criminal history.***

As shocking as the accusation appears at first reading, there appears to be no shortage of claims from multiple *informed and independent sources* that **the WHO has two primary functions:**

1. **The first as a tool for world population reduction on behalf of its masters,**
2. **The second as a powerful marketing agent for big pharma, specifically the vaccine manufacturers.**

Many critics have pointed out that the ‘vaccination experts’ at the WHO are “dominated by the vaccine makers standing to gain from the enormously lucrative vaccine and antiviral contracts awarded by governments.” And indeed, the advisory and other committees involved with the WHO’s vaccine programs seem heavily populated with those who profit directly from those same programs.

Equally, the claims and concerns about population control and reduction are far from conspiracy theories today, with far too much evidence, some of it frightening, that this is indeed a major agenda of the WHO today. We have already seen too much hard evidence of this body’s involvement in both areas to justify dismissing the concerns as implausible fears. Moreover, there is a disturbing list of individuals

closely associated with the WHO, who have had either population reduction or mass vaccinations as a pet project;

It is difficult, on the basis of all the evidence, to avoid the conclusion that the WHO is an international criminal enterprise under the control of a core group with European Khazar family dynasties at its center which, as one writer noted, “provides the strategic leadership and funds the development, manufacturing and release of synthetic, man-made viruses solely to justify immensely profitable mass vaccinations”.

We have seen so many instances of an unusual and apparently laboratory-made virus appearing without warning, the onset followed immediately by urgent worried pronouncements from the WHO of yet another mandatory mass vaccination.

*We have **the rampant production of deadly viruses in secretive labs around the world, and the repeated “accidental” release of those into various populations (think ZIKA)** – seemingly inevitably without explanation, apology or even a semblance of actual investigation, much less censure or criminal or civil charges.*

*We also have **the blanket legal immunity for all pharma companies in their creation and dissemination of deadly pathogens by vaccination.***

*When we add into this mix **the WHO’s history of criminality as with their now-famous tetanus/hCG international sterility program (the subject of this essay), the curious timing of the onset of AIDS, the release of SARS, MERS, and EBOLA,** and the many occurrences of the WHO’s vaccination programs perfectly coinciding with a sudden outbreak of yet another unusual disease in the same areas and populations, one would have to be a hard-core ideologue to not become damned suspicious.*

WHO Vaccinations and Population Control



During the early 1990s, the WHO had been overseeing massive tetanus vaccination campaigns in Nicaragua, Mexico, the Philippines, Tanzania and Nigeria.

All tell a similar story, one that almost beggars belief but with the facts too clear to refute. Tetanus is a disease whose onset we often associate with stepping on a rusty nail or some such event. It should be clear that men would be at least as likely, if not more likely, to encounter this circumstance than would women, and perhaps careless children more than adults, but the WHO vaccination program was directed only to females from 15 to 45 years of age – in other words, child-bearing ages.

In Nicaragua, the targets were females from 12 to 49 years of age.

Also, a single tetanus shot is universally accepted as sufficient to provide protective duration of ten years or more, but the WHO inexplicably insisted on vaccinating these women five times within several months. Shortly after the initiation of these programs, concerns began to emerge about spontaneous abortions and other complications arising exclusively within the vaccinated populations.

On suspicion, a group in Mexico had the vaccination serum analysed and discovered it contained the Human chorionic gonadotrophin (hCG) hormone.

This hormone is critical to the female body during pregnancy. It causes the release of other hormones that prepare the uterine lining for the implantation of the fertilised egg. Without it, a woman's body is unable to sustain a pregnancy and the fetus will be aborted. This hormone was injected into the subjects along with the tetanus serum, causing a female body to then recognise both as foreign agents and to develop antibodies to destroy either if they were to ever appear in the body in the future.

Upon becoming pregnant, a woman's body would fail to recognize hCG as a friend and would produce anti-hCG antibodies, the prior vaccination now inducing her body's immune system to attack the hormone that is needed to bring an unborn child to term, preventing subsequent pregnancies by killing the hCG which is necessary to sustain them.

This means each woman who received the WHO inoculation was vaccinated not only against tetanus but also against pregnancy. [2][3]

The WHO at first denied the facts and disparaged the results of the initial tests, claiming that Third-world labs were competent only to test urine samples. However, following this revelation, each nation conducted extensive tests by expert independent labs and in all cases the hCG hormone was identified as existing in the tetanus vaccination serum.

The WHO eventually went silent and discontinued their program but by this time many millions of women had been vaccinated – and rendered sterile. One important fact is that the three different brands of tetanus vaccine being used in this project were developed, produced, and distributed in secrecy and that none had ever been tested or licensed for sale or distribution anywhere in the world. The companies that produced them were Connaught Laboratories and Intervex from Canada, and Australia's CSL Laboratories.



Connaught is the same firm that, along with the **Canadian Red Cross, knowingly distributed AIDS-contaminated blood products for several years during the 1980s**, a criminal organisation that should have been executed along with its owners. [4]

You can read the essay, **“Canada’s Tainted Blood”**. Following its outstanding criminal history in Canada, **Connaught was sold to Rothschild and now forms part of his Sanofi Group**, the criminality clearly continuing and now on a worldwide scale.

Further damning evidence that the Western media censored, was the fact that **the WHO had been actively involved for more than 20 years prior in the development of an anti-fertility vaccine utilizing hCG tied to tetanus toxoid as a carrier** – precisely

the same combination as in these vaccines. According to the WHO's own reports, they had spent 20 years and more than \$400 million on this specific "reproductive health" research.

More than 20 research articles have been written on this subject, many of these by the WHO itself, that document in detail the WHO's attempts to create an anti-fertility vaccine utilizing tetanus toxoid. And they aren't alone; the **UNFPA, the UNDP, the World Bank** and of course – **whenever we encounter secret efforts at population control** – the ubiquitous **Rockefeller Foundation**, are all allied in this cause, as was the **US National Institute of Health. The Government of Norway** was also a partner in this travesty, contributing more than \$40 million to develop this **Tetanus-abortion vaccine**.

The Bill & Melinda Gates Foundation has been heavily funding the distribution of tetanus vaccine in Africa by **UNICEF**, which is the agency that provided Kenya with the vaccine laced with hCG. Gates said:

"The world today has 6.8 billion people. That's heading up to about nine billion. Now if we do a really great job on new vaccines, health care, reproductive health services, we could lower that by perhaps ten or fifteen percent." [5]

The Rockefeller Foundation also heavily funded this vaccine research and distribution. [6] All this amounts to genocide on a planetary scale.

I examined in detail the WHO website and discovered there were dozens of articles written by WHO researchers, documenting in detail the WHO's attempts to create an anti-fertility vaccine utilizing tetanus toxoid as a carrier. [7](*One need only search the WHO website for hCG to find the reports.*)Some leading articles included:

- *"Clinical profile and Toxicology Studies on Four Women Immunized with Pr-B-hCG-TT,"* *Contraception*, February, 1976, pp. 253-268.
- *"Observations on the antigenicity and clinical effects of a candidate antipregnancy vaccine: B-subunit of human chorionic gonadotropin linked to tetanus toxoid,"* *Fertility and Sterility*, October 1980, pp. 328-335.
- *"Phase 1 Clinical Trials of a World Health Organisation Birth Control Vaccine,"* *The Lancet*, 11 June 1988, pp. 1295-1298. "Vaccines for Fertility Regulation," Chapter 11, pp. 177-198, *Research in Human Reproduction, Biennial Report (1986-1987), WHO Special Programme of Research, Development and Research Training in Human Reproduction (WHO, Geneva 1988).*
- *"Anti-hCG Vaccines are in Clinical Trials,"* *Scandinavian Journal of Immunology*, Vol. 36, 1992, pp. 123-126.

As early as 1978, the WHO was actively exploring ways to eradicate much of the population of the Third World. A paper published by the WHO [8] was titled, *"Evaluating ... placental antigen vaccines for fertility regulation"*;

The paper acknowledged "substantial progress" in its worldwide eugenics program of culling non-whites, but yet identified "an urgent need for a greater variety of methods" of preventing fertility, and gushed over the fact that "immunisation as a prophylactic measure is now so widely accepted", that the employment of sterilisation vaccines would be widely appealing (to those dispensing the vaccines) and would offer "great ease of delivery".

If that isn't clear, the WHO is saying that vaccinations for other purposes – protection against diseases – are so common and widely-accepted, that inoculation is probably the easiest way to sterilise the populations of undeveloped countries.

The paper then notes the accumulation of evidence that "there exist proteins specific to the reproductive system" which "could be blocked" by vaccinations and provide a new method of "fertility regulation".

Among the stated advantages of a sterilisation vaccine is that it could prevent or disrupt implantation of the fertilised egg onto the uterus wall, and thereby guarantee that every (**non-white**) conception would result in a miscarriage or spontaneous abortion, i.e., an anti-hCG vaccine. The paper continues:

“Testing ... will reveal whether a single injection is sufficient to achieve the desired level of immunization, or whether several boosting injections will be required. The main desired effect is to achieve a degree of immunization sufficient to: (a) neutralize the hormonal activity of hCG in vivo; and (b) prevent or disrupt implantation at a very early stage of pregnancy. It is not yet established whether immunization with the β hCG peptide conjugate will cause an irreversible biological neutralization of hCG ... This will probably vary from individual to individual. In the first case, the indication for immunization will be restricted to sterilization, whereas in the second eventuality ... immunization may be considered as a long-lasting but reversible anti-fertility measure.”

On August 17-18, 1992, the WHO produced a report titled “**Fertility Regulating Vaccines**”, resulting from a large meeting in Geneva of scientists and ‘women’s health advocates’ “to review the current status of the development of fertility regulating vaccines.”

The meeting was from a joint Special Program of research in reproduction of the **UNDP, UNFPA, the WHO and the World Bank**.

The report stated, “... **applied research on FRV’s (fertility-regulating vaccines) has been going on for more than twenty years ...**”, and discussed not only the anti-hCG vaccines already receiving clinical trials, but the development of other vaccines such as an anti-GnRH vaccine that would extend the temporary infertility due to breast-feeding.

Even more chilling is that **one WHO report – still on their website – discusses the certainty of the vaccinations causing spontaneous abortions** since some significant number of the inoculated females would be pregnant at the time of vaccination.

The report offers no commentary on this. It was clear the WHO had no intention of performing pregnancy tests prior to administering the vaccines, thus **coldly accepting the fact that they would be killing at least some millions of unborn fetuses.**

This vaccine was also being field-tested at the time, with the possible intention of employing both antigens in the same vaccine on the assumption that a single vaccine might not sterilise all victims.

They also recognised the dangers of administering such a vaccine to women who were already pregnant, and expressed awareness **the antibodies would almost certainly be present in the milk and might therefore render the infants permanently sterile as well – with the massive understatement that this “might not be acceptable to all potential users ...”**

From the outset, WHO planners realised that during mass vaccinations, many pregnant women would also be inoculated with the anti-hCG serum, **which would inevitably result not only in sterilisation, miscarriages and spontaneous abortions but also incurable autoimmune disorders and birth defects.**

The same paper went on to state, “In addition to women being immunized inadvertently during an established pregnancy, fetuses could be exposed to potential teratological effects of immunization ...”. In other words, **WHO staff would freely inoculate pregnant women, those embryos or fetuses not spontaneously aborting would experience pathological growth from which would result various undefined birth defects.**

The WHO is not researching ‘reproductive health’, **but reproductive impossibility**, and their tetanus-hCG vaccine is not in any sense ‘regulating’ the fertility of women but rendering their fertility biologically impossible, which is not quite the same thing. Their own paper stated the vaccination likely

“will cause an irreversible biological neutralization of hCG”, which means the permanent sterilisation of innocent women who agreed to receive tetanus shots.

Try to understand what this means: **the WHO was for decades receiving hundreds of millions of dollars in funding (largely through Bill Gates) for research and testing, to produce a vaccine that would make a woman’s immune system attack and destroy her own babies in the womb,** a vaccine they would surreptitiously combine with a tetanus vaccination without informing the victims. To say their deceit was successful would be an understatement.

The WHO inoculated approximately 150 million women in 52 countries with this vaccine, permanently sterilising the entire lot of them without their knowledge or consent.

It was only when **an enormous number of women in all countries experienced vaginal bleeding and miscarriages immediately after the vaccinations, that the hormone additive was discovered as the cause.**

Suspicious were aroused when the WHO selected only females of child-bearing age and further specified the unheard-of practice of five multiple injections over a three-month period, but the health officials in these undeveloped countries still had faith in the white man’s medicine.

Upon the discovery of the hormone in the vaccine, **Nigerian physicians reported WHO doctors telling them the hCG hormone “would have no effect on human reproduction”,** statements they knew to be false. When this information reached the public, the WHO assumed an offensive and repugnant stand, mocking and ridiculing the nations that had performed the tests and revealed the contamination, condemning them as incompetent, having “unsuitable” testing laboratories, and using improper samples or procedures.

WHO officials claimed these nations had “Not the right kind of lab to do the test. The labs know only how to test urine samples . . .”

This is the standard response by Western agencies, governments, and corporations, when caught with adulterated products. **When Coca-Cola’s drinks in China were found to contain frightening levels of pesticides and chlorine, the immediate accusation was that China’s biological laboratories were all incompetent.**

When Nestle’s noodles in India were found to contain dangerously toxic amounts of lead, India’s laboratories were all incompetent.

The next step is to carefully produce a few samples known to be uncontaminated, provide them to an “independent” laboratory that inevitably pronounces them clean, then move the story off the front page.

When the discovery was made, many nations enacted immediate legal restraining orders against WHO and UNICEF vaccine programs.

WHO and UNICEF officials said the “grave allegations” were “not backed up by evidence”, which was nonsense.

UNICEF, USAID and the WHO refused to address the evidence like vaginal bleeding, miscarriages and spontaneous abortions.

They also refused to discuss the reasons for a series of five closely-spaced vaccinations when one had always been sufficient, **ignoring the content of their own published papers stating that multiple injections of a tetanus-hCG vaccine would be necessary for effective sterilisation.**

When faced with documented results, WHO officials admitted the hormone did indeed exist “in small amounts” in “some” of the vaccine material, but that this was an inconsequential result of “accidental contamination”.

Nobody at the WHO attempted to explain the source of the hCG hormone in sufficient volume to contaminate about 750 million doses of a vaccine, nor how that “contamination” could “accidentally” have inserted itself into all those vaccines.

Anyone familiar with large-scale vaccine or drug manufacture knows that the process is mechanical and fully-automated, essentially a closed system. It is not possible in such an environment to introduce contaminants of any kind, unless done deliberately. And the amount of hCG necessary to contaminate 750 million doses of a vaccine would have to consist of tens of thousands of liters, hardly ‘small amounts’.

The Lancet reported that the US National Institute of Health supplied much of the hCG hormone for WHO experiments and testing.

For the NIH to have submitted this amount of hormone to Canada, where **Connaught’s labs** are located, would absolutely have attracted the attention of Canada’s customs officials and thus Canada’s national government, which has to mean that **Canada was fully aware of what was happening**, and why.

Let me state again that **this vaccine was created surreptitiously, was never declared, was never tested, and was never approved for use on humans.**

Connaught labs would never have created such a vaccine, importing hormones from the US NIH, and manufacturing on such an immense scale while ignoring all Canadian and international law. **There is no way for Canada to avoid accusations of direct complicity in this immense human travesty.**

The media were too busy at the time telling us of the evils of Iran, to notice the small issue of **Rothschild** manufacturing 750 million doses of a vaccine meant to sterilise 150 million women.

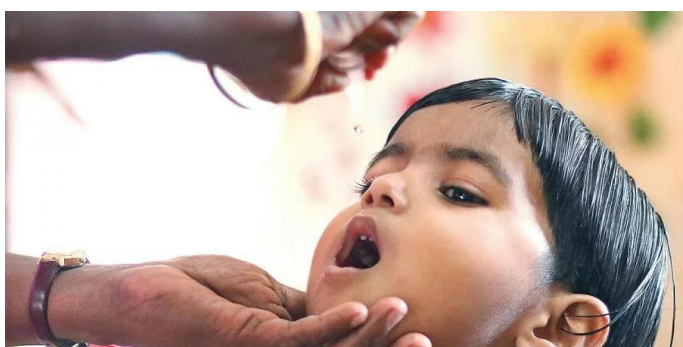
As I’ve often mentioned elsewhere, the **Western (Jewish)** media are excessively fond of demonising Hitler, but Hitler didn’t sterilise 150 million Jews without their knowledge or consent.

Yet Rothschild (a Jew) produced the vaccine to sterilise 150 million other women without their knowledge, so where is the moral outrage against the Jews?

The WHO went silent for a while, but in 2015, Vatican Radio charged that the **UN organisations WHO and UNICEF** were again **executing vast international programs of depopulating the earth by using vaccines to surreptitiously sterilise women in Third World countries**, this time in Kenya.

It stated that “Catholic Bishops in Kenya have been opposed to the nationwide Tetanus Vaccination Campaign targeting 2.3 million Kenyan women and girls of reproductive age between 15-49 years, terming the campaign a secret government plan to sterilize women and control population growth”.[\[9\]](#) In May of 2018, it was reported that fertility-regulating vaccines were being used in India.[\[10\]](#)

And Polio, Too



Something similar is true for polio. Few people are aware that polio cases in the world today no longer result from any natural spread of the disease but are now the result of WHO vaccination campaigns. [\[11\]](#)

The WHO's cheap and easily-administered oral polio vaccines have proven responsible for the increasing recurrence of polio in many countries. An independent medical group tasked with monitoring these events, wrote that polio (because of the WHO practices) was “spreading uncontrolled in West Africa, bursting geographical boundaries and raising fundamental questions . . .” It further described the WHO's attitude toward terminating this pandemic of vaccine-caused polio cases as “relaxed”. [10]. I might have used a stronger term.

In 2009, there was a spreading outbreak of Polio in Nigeria, a direct result of yet another WHO vaccination program, this time directly linked to the vaccine which was made from a live polio virus which always carries a risk of causing polio instead of protecting against it – as the Americans learned to their chagrin many years ago. Today in the West, polio vaccines are made from a killed virus that cannot cause polio.

This latest WHO-sponsored outbreak actually began several years prior, which the WHO blamed on the live virus in their vaccines that had somehow “mutated”. So once again, the WHO is causing polio in the undeveloped world, amid evidence that for every case of identified polio there are hundreds of other children who don't develop the disease but remain carriers and pass it on to others.

It has long been recognised that the live oral vaccine used by the WHO can easily cause the very epidemics it pretends to be eliminating. Of course there is no published evidence that the polio virus had in fact “mutated”. **The same occurred in Kenya, this time using the hCG hormone tied to polio vaccinations, with the same tragic results but with the added benefit of permanently sterilising the survivors.** [11]

In late 2013, Syria experienced a sudden outbreak of polio, the first in that country in about 20 years, and in an area that had been under the control of US-backed revolutionary mercenaries. The Syrian government claimed to have evidence that these foreigners brought the disease into the country from Pakistan, from Western (US) agencies.

The WHO was active in Pakistan in yet another of its “humanitarian vaccination programs” that strangely coincided in geographic area with a severe outbreak of polio, and **Syrian authorities were adamant that the West transmitted it to their nation when 1.7 million doses of polio vaccine were purchased by UNICEF, in spite of the fact that no cases of polio had been seen since 1999.**

After the mass vaccination program started, cases of polio began to reappear in Syria.

UNICEF began a similar mass vaccination program with 500,000 doses of live oral polio vaccine in the Philippines in spite of the fact there were no reported cases of polio in the Philippines since 1993.

This would fit the pattern from other instances of sudden disease emergencies.

I have not managed yet to reconstruct the WHO's vaccination and other programs in all locations, but sudden outbreaks of viruses are always suspicious since they cannot be created from nothing and must be introduced into a population, and with surprising regularity appear on the heels of some WHO vaccination program.

SOUNDS FAMILIAR? ANYONE? SO-CALLED 'COVID' VARIANTS?

The sudden and inexplicable appearance of the Bubonic plague in Peru and Madagascar are two such events and, increasingly often, the pathogens do not appear to be natural in origin. In particular, **the SARS-related camel virus in the Middle East** had some **obvious signs of human engineering as did the SARS coronavirus itself.**

There are many other such cases which are far too often linked with the presence of some program of the WHO. In the cases I have identified, it is uncanny that the outbreaks of all these new diseases appear to follow immediately upon yet another WHO vaccination campaign, and inevitably in the precise geographical locations of the WHO activities.

The WHO is also becoming active in China with alarming potential for disaster. As one example, in late 2013, a number of newborn Chinese babies died immediately after being inoculated by the WHO against hepatitis B. The WHO China representative, **Dr. Bernhard Schwartlander**, called China's program "very successful", but I find myself with knowing suspicions about his definition of 'success'. The infant deaths may indeed have been an unfortunate accident, but I was not encouraged by Schwartlander's comment that it is "difficult to establish a causal link between the vaccines and the babies' deaths".

Knowing the past history of the WHO and their infectious inoculations, the 'difficulty of establishing a causal link between the WHO vaccinations and civilian deaths', may have been the part that was 'successful'.

As a follow-up to this, you should read my essay (now posted) on Pfizer's Perfectly-Timed Epidemic. You will see the pattern of the WHO. And you might then want to consider the WHO's recommendation of Pfizer's COVID-19 injections.

Mr. Romanoff's writing has been translated into 32 languages and his articles posted on more than 150 foreign-language news and politics websites in more than 30 countries, as well as more than 100 English language platforms. Larry Romanoff is a retired management consultant and businessman. He has held senior executive positions in international consulting firms, and owned an international import-export business. He has been a visiting professor at Shanghai's Fudan University, presenting case studies in international affairs to senior EMBA classes. Mr. Romanoff lives in Shanghai and is currently writing a series of ten books generally related to China and the West. He is one of the contributing authors to Cynthia McKinney's new anthology 'When China Sneezes'. (Chapt. 2 — Dealing with Demons).

His full archive can be seen at <https://www.bluemoonofshanghai.com/> and <https://www.moonofshanghai.com/>
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Notes

(1) <https://www.bluemoonofshanghai.com/politics/6245/>

A Litany of Pharma Crimes

[1] <https://www.ncbi.nlm.nih.gov/pubmed/12346214>

Tetanus vaccine laced with anti-fertility drug

[2] <https://nexusnewsfeed.com/article/human-rights/hcg-found-in-who-tetanus-vaccine-in-kenya/>

HCG found in WHO tetanus vaccine in Kenya;

[3] <https://www.thelibertybeacon.com/are-new-vaccines-laced-with-birth-control-drugs/>

Vaccines and Population Control: A Hidden Agenda

[4] <https://www.bluemoonofshanghai.com/politics/5973/>

Canada's Tainted Blood

[5] <http://www.sfaw.org/newswire/2014/11/13/bill-gates-and-the-anti-fertility-agent-in-african-tetanus-vaccine/>

Bill Gates and the anti-fertility agent in African tetanus vaccine

[6] <https://www.globalresearch.ca/rockefeller-funded-anti-fertility-vaccine-coordinated-by-who>

Rockefeller-Funded Anti-Fertility Vaccine Coordinated by WHO

[7] One need only search the WHO website for hCG to find the reports.

[8] Clin. exp. Immunol. [1978] 33, (360-375); February 8, 1978

[9] <https://vaccinefactcheck.ca/2015/03/20/vatican-unicef-and-who-are-sterilizing-girls-through-vaccines/>

Vatican: UNICEF and WHO are sterilizing girls through vaccines

[10] <https://vactruth.com/2018/05/30/fertility-regulating-vaccines-india/>

Fertility-Regulating Vaccines are Being Tested in India;

[11] <https://abcnews.go.com/Health/wireStory/polio-cases-now-caused-vaccine-wild-virus-67287290>

More polio cases now caused by vaccine than by wild virus

More Reading

<https://www.youtube.com/watch?v=8ER0IUf5yNI>

Mass Force Sterilization – Kenyan Doctors Find Anti-Fertility Agent HCG In UN Tetanus Vaccine

https://www.huffpost.com/entry/kenya-catholic-tetanus-vaccine_n_6151946

Kenya's Catholic Bishops Claim Tetanus Vaccine Is Stealth Birth Control Project

<https://www.africanglobe.net/africa/sterilization-plot-kenyan-doctors-find-anti-fertility-agent-tetanus-vaccines/>

Sterilization Plot: Kenyan Doctors Find Anti-Fertility Agent In UN Tetanus Vaccines

<https://healthimpactnews.com/2015/polio-vaccines-laced-with-sterilizing-hormone-discovered-in-kenya-who-is-controlling-population/>

Polio Vaccines Laced with Sterilizing Hormone Discovered in Kenya – WHO is Controlling Population?

<https://www.telegraph.co.uk/news/health/3112841/Drugs-companies-fund-patient-groups-which-attack-NHS-decisions.html>

Drugs companies fund patient groups which attack NHS; Patient groups which have attacked decisions made by the NHS drugs watchdog are funded by pharmaceutical companies, an investigation claims.

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