

The Spike Protein Fairytale: Stefano Scoglio and Torsten Englebrecht

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“That mRNA “vaccines” cause cells to produce spike proteins is a fairy tale”Stefano Scoglio, top expert in microbiology and Italy’s most prestigious and best-known critic of the Corona policy, interviewed by Torsten Engelbrecht

Torsten Engelbrecht: *Everybody seems to agree that the mRNA injections work by teaching our cells to make spike proteins. The only dispute is whether these spike proteins produced are harmless or harmful. But in your opinion, it is not the spike proteins that do these health damages. In fact, you say that the idea that spike proteins are produced is a kind of a chimera. What evidence is there to support your thesis?*

Stefano Scoglio: This is scientifically evident already from the fact that it’s impossible for mRNA to enter the cell and produce anything. Anybody who talks about spike proteins and embraces the story diffused by the pharmaceutical companies just accepts that as given. But nobody is reading the damned scientific literature.

In my book ***Apandemia: Dalla Falsa Scienza alla più Grande Truffa della Storia*** (“No Pandemic: From False Science to the Greatest Scam in History”, cover see below), I report all the scientific literature up to 2021. That is at the same time that the Corona “vaccines” were released.

TE: *Why, then, is it impossible for mRNA to enter the cell and cause it to produce spike proteins?*

SS: The first thing the researchers in the field state is that the living cell is a “formidable barrier”, very difficult if not impossible to penetrate. And then they list 5 factors that prevent the mRNA to enter cells, getting into the ribosomes where the spike protein is supposed to be produced:

First: As soon as the genetic material is injected, it is attacked by specific enzymes called extra-cellular ribonucleases, which degrade any foreign genetic material. Pharmaceutical companies claim that the lipid nanoparticles are supposed to protect the mRNA from the enzymatic attack: But nobody knows how much protection is offered. As the Pfizer “vaccine” injects 30 micrograms of mRNA, let’s say that about half, 15 micrograms, survive.

Second: At this point, the mRNA/lipids blend has to enter the cell, supposedly through endocytosis, i.e. the cell is forming an external pouch that brings in the material. But, the researchers state, often instead of endocytosis the cell produces exocytosis, that is the pouch is used to keep the foreign material outside: Let’s say that half enters and so we now have 7.5 micrograms inside the cell.

Third: At this point enters the endosomes/lysosome system: all scientists in the field know that this enzymatic endocellular system attacks, degrades and eliminates at least 98 percent of any foreign material entering the cells. We are now down to 0.15 micrograms, that 150 nanograms, an infinitesimal quantity.

Fourth: If this were the end, you could at least claim that a very minuscule dose would enter the ribosomes. But alas, the ribonuclease enzymes are also inside the cell, they are called endocellular ribonucleases, and they would dispose very quickly of the minuscule amount of mRNA.

Finally, the researchers mention a fifth element, the most important, the one that makes all the processes described so far completely useless and unnecessary. And that also explains why this material is so toxic without needing to introduce any spike protein. They indicate that these “vaccines” are so highly immunogenic. Indeed, they use this word immunogenic.

Immunogenic means able to irritate the immune system so much that it reacts very violently. So immunogenic means highly toxic. In fact, they describe the mRNA and synthetic lipids **as “self-adjuvants.”**

Whereas in other vaccines such as the ones for children, you have to introduce aluminum, for instance, to make the immune system respond. But here, you don’t need to add anything because this material is as toxic as aluminum or worse. It’s so highly toxic that as soon as you inject it the immune system attacks it and then it explodes into millions of nano-particles in the body.

This is actually what has been proven afterwards. Because the only study that has evaluated the biodistribution of the Pfizer Corona “vaccine” is a **Japanese study** done by the government in co-operation with Pfizer.

Pfizer tried to secrete this study, but it was released through a Freedom of Information Act, **in short FOIA, request.**

And in this study they found that in the mice into which they injected the material, especially the lipids were found unaltered, unmodified, unchanged. That means, if they had entered the cells, they would’ve been metabolized and you wouldn’t have found them in the same way you have injected them. That means they have not entered into any cell, but they diffused in all organs of the body, and particularly liver, spleen, female ovary and kidneys.

TE: *But even Robert Malone, for example, considered the inventor of the mRNA technology or gene injections, sees the danger in the spike proteins.*

*Or let's take the US cardiologist Peter McCullough – just like Malone a widely known critic of the Covid policy and gene injections – who recently **published a study** together with other researchers concluding that not only the SARS-CoV-2 spike protein is a neurotoxin, but the mRNA “vaccines” are also capable of delivering the protein to the brain, increasing the risk of neurodegenerative diseases. So how can it be possible that even these known critical scientists talk “bullshit”?*

SS: I would say that 99 percent of the scientists today talk bullshit essentially because they adopt a methodology that is bullshit methodology that has been there for a long time. Only nobody questions it.

Robert Malone might have been the inventor in the 1980s, which is 40 years ago, but hasn't worked on mRNA for decades. You don't find any article of him in the last 10, 15 or 20 years. So it's not really an authority in what's been going on with that. But apart from that, the point is how do they find the spike protein in the body?

Isolating a protein from the blood is a simple task. The methodology has been known since the 1980s. There are technologies, machines that you can buy and isolate proteins from the body. So we have hundreds of millions of people injected with the Corona “vaccines.”

So how much spike protein should be in the world? Like tons of spike proteins that you could actually be taken from the blood and be isolated. Did they ever do that? No!

When they say that there's spike protein, the only way they do it is through antibody tests. And the way the antibody test is being applied is a fraud. I can also explain why it's a fraud.

They take the blood and the serum of a patient who let's say has been vaccinated. Then they test it through this ELISA antibody test and they put it in touch with a spike protein in this case. But it's a spike protein made in the laboratory. It's an artificial one, they call it recombinant spike protein. It's a synthetic spike protein.

Now, the problem with antibodies is that they're really not specific. In other words: If we want antibodies to be specific, we should have like thousand or even tens of thousands of different antibodies, one for each disease. Instead, we only have five immunoglobulins, i.e. antibodies, and only two are tested: IgG and IgM. So how could you show that they are specific?

What you're supposed to do is you take this serum from a patient, which has a lot of antibodies because this person has been vaccinated, which means he or she has been injected with a very toxic material. And the immune system has reacted by generating a lot of antibodies. So you take this serum with a lot of antibodies.

Then you wanna do a proper test to see if it's specific. You take it and you put it in touch with the spike protein, with aluminum, with the original mRNA, i.e. with different toxins – and if it only responds to the spike protein you could see that it's specific. But has this test ever been done? No, it has never been done.

Instead, they take the material with the immunoglobulins, they put it in touch with the synthetic spike protein. And it reacts because it reacts to any toxin, so it'll react also to the synthetic spike protein. And then they say: *"Ah, that means there are specific antibodies for the spike protein. That means the body's full of spike protein."* But it's a fraud.

TE: *However, **a recent study** shows that the spike protein from the Covid gene injections remained in a person's tissue and immune cells for months after injection.*

The study examined blood samples from 50 vaccinated individuals who continue to suffer from persistent symptoms such as fatigue, brain fog, or headaches for weeks or months after "vaccination". These samples were compared with blood samples from 35 vaccinated individuals who had no such symptoms. And the researchers found significantly elevated levels of the spike protein in the blood immune cells of those who suffered from symptoms after vaccination. So doesn't that counter your view?

SS: That's explainable. They compared people who were sick and people who were not sick. And of course, the people who were not sick did not produce a lot of immunoglobulins, that is antibodies. Whereas the sick people intoxicated by the "vaccines" produced a lot of antibodies. And they kept doing the antibody test. So in fact, they did not find the spike protein.

The challenge to be mastered consists of two things, though I know, of course, they would never accept it. First, isolate a spike protein as such from a "vaccinated" person. It's

possible to do it. There are machines to do it. Why don't you do it? Why don't you take the blood and isolate the spike protein as such – and why do you do it indirectly through an antibody test instead?

The second thing is: If you wanna be a proper scientist using the antibody test and if you wanna show that it's specific for this spike protein, then test it together with other toxins and see if it is actually specific to that or if it responds to all the five toxins, which is exactly what will happen because antibodies are universal.

And not only that. Antibodies are so efficient that they actually are able to attack any antigen, any foreign antigen, any toxin in less than a nanosecond. So they don't even need to memorize anything because they're so fast in getting anything new that arrives in less than a nanosecond which is an unimaginable short period of time.

So all necessary things are there if you really wanna prove what is being claimed, i.e. that there is spike protein. So first, just isolate it physically from the blood. Two, if you do the antibody test, do it with the control by testing other toxins as well. Otherwise, it's all fraud.

And to conclude: The problem with mRNA and synthetic lipid nanoparticles, like the ones where the surface has been coated with polyethylene glycol (PEG), is that there's a huge literature showing that they're the most toxic material existing today on earth. They are inflammatory, they generate edema in all the membranes. They generate blood clots. They generate autoimmune reactions and lipodystrophy, i.e. a change of the subcutaneous fat tissue.

There's a huge list of what toxicologically they can do to the body. So anything that happens after "vaccination" doesn't need at all a spike protein as a cause. mRNA and synthetic lipids are more than sufficient to explain these health damages.

TE: *But someone showed me a laboratory report claiming to have found a SARS-CoV-2 spike protein. On the test result it says "the Anti-SARS-CoV-2 S test measures the adaptive humoral immune response against the spike protein of SARS-CoV-2." So what do you think about that?*

SS: That's exactly what I'm saying. They do not measure the spike protein itself. They measure the humoral immune response. In other words, again, antibodies, immunoglobulins, that's what they test. They all do that indirectly.

That's what humoral and humeral immune response means, it's antibody tests essentially. So it goes back to what I said before. Nobody finds the spike protein as such. While, other proteins like the C-reactive proteine is tested directly. So why don't they do it with the spike protein?

And just to add one comment. My position is more radical than whatever is proposed by the people who promote the idea of the spike protein. Because if I'm right – and I think I'm right because all the literature shows that – these injections cannot even be called "vaccines." They're just toxic bombs. Because if they're not able to produce any viral antigen, that means they don't perform as vaccines. So they're not vaccines, they're, again, just toxic bombs.

The criticism is much more radical and goes to the fact that they knew that because as I said, all the literature up to the time when they released the „vaccines“ shows what I said,

that they are not capable of entering the cell. So when Pfizer and Moderna released the “vaccines” they knew very well that no spike protein would be produced and they would only intoxicate people.

TE: *Are you alone with your view? Or is there at least a certain number of people thinking the same way you do and expressing it also?*

SS: I think I’m pretty alone. This is actually my first international interview in this area. There are some people I know in Italy, some researchers who agree with me, but of course, we are a minority.

TE: *What about the other experts saying that SARS-CoV-2 and other viruses have not been proven, like Andrew Kaufman, Samantha Bailey, and so on?*

SS: I haven’t talked to them about this. Maybe this interview will be a way of getting in touch with them and involving them in this debate. But I think I’ll try at least to translate into English the section of my book that talks about this.

So there will be also the bibliographical indications of the scientific studies that I’m quoting about this showing that it’s not just my idea, that this is based on the literature.

I have no interest in doing that differently. If there was production of spike proteins, I would probably join the group that says: *“Well, the spike protein is toxic and generates harms.”* But the thing is: When I went to look at the literature, and that’s what I do, I found that this is just a fairy tale.

TE: *And the spike protein itself, does it exist in nature in your view, or is it definitely only an artificial lab or in vitro product?*

SS: It is an artificial laboratory product, absolutely. Also because the virus doesn't exist. And the virus doesn't exist because it has never been proven to exist, has never been isolated. We have made almost 250 FOIA requests around the world asking "*can you show me the documentation about the isolation and therefore of the identification and therefore of the existence of the virus?*" – and we got the same answer 250 times: "*We do not have it.*"

TE: *But regarding the virus, it is said that it has not been proven, but the particles claimed to be viruses are real. And they may be particles being produced by the body itself. So the particles claimed to be spike proteins, what are they then?*

SS: It's a spike protein produced in the laboratory which doesn't exist in nature because the spike protein is supposed to be a part of the virus that has never been isolated and therefore doesn't exist. So in nature, there's no toxic spike protein, it has never been found, never been isolated, never been found in the blood.

As I said before, I repeat: All they do is that they take a synthetic lab made, lab created protein that is toxic and they put it in touch with the antibodies and say that the antibodies are specific, which is just fraud, as I said before. And then they claim that therefore there **MUST** be spike protein in the body. But if the virus has not been proven to exist, there is no spike protein of the virus, either. And that's actually the case because the only spike protein existing is the one made in the lab.

In fact, sometimes I advance a challenge to the people, who support this thesis. When I then confront them with my criticism, they react by saying, *“Oh, but there’s a lot of studies showing that the spike protein is toxic.”* Then I say, *“just go and read them!”* The truth is that there are only studies on the recombinant spike protein, on the protein made on the laboratory.

So again, the challenge is to find this spike protein directly in the blood. If this has been done, then we talk. But such a thing has not been done yet. There’s not a single study of this kind. It’s only indirect through antibodies and an artificial spike protein. It’s always the recombinant protein made in the lab, mainly in Chinese labs.

TE: *Regarding the lipid nanoparticles that you say are the actual toxic component, fact checkers of the German television network ARD **reported that** a study showed that these lipid nanoparticles in **fact caused inflammation in mice**, but that the nanoparticles studied are not identical to the ones used by BionTech and Moderna in their mRNA “vaccines.” And therefore, as an expert named Gregor Fuhrmann, quoted by the ARD, said, one should be cautious about drawing conclusions about other vaccines.*

Also, the study was on mice, so the results cannot be directly transferred to humans, as Fuhrmann who is a full professor of pharmaceutical biology at the university Nurnberg-Erlangen adds. Moreover, local inflammation may well be desirable in a vaccination.

SS: I could agree with professor Fuhrmann, but then we would have to close toxicology. In other words, toxicology should be closed tomorrow because toxicological studies are always done on animals. Why don't they do it on humans? Why don't inject poison on humans to test it?

Well, they've done it with the Corona "vaccines." But, in terms of toxicological studies, the standard is animal studies because the idea is that if something is toxic to the body of an animal, it may be toxic to a human, too. There are parameters like the safety reduction standard. So when you use a dose on a mice, then you reduce that by a factor of 10 because of inter species variation.

These are mechanisms to transfer the effect on an animal to that on a human. That's the standard of toxicology. If you don't accept that, then toxicology should close tomorrow.

And the other thing is: I would ask this Mr. Fuhrmann: If the toxicological studies on animals are not valid – which, as mentioned, would actually mean that toxicology has to be closed tomorrow – why would the study that Pfizer did on the new omicron "vaccine" and which has been done on eight mice should be valid?

In fact, that shouldn't be valid, either. Moreover, it is not just the lipid nanoparticles that are toxic, the mRNA is toxic in itself as well. In fact it is more toxic than the lipids.

TE: So what, in your view, is the hardest evidence that the lipid nanoparticles are toxic?

SS: There are a lot of studies in literature showing that PEG and the other lipid nanoparticles are toxic. It's in the literature, done on mice or other animals because you don't do toxicological studies on humans by definition.

TE: *recently, a globally unique **study has been published** showing that the toxic components, mainly metal elements such as cesium, barium, titanium, and aluminum, are contained in all samples of of covid gene injections from AstraZeneca, Pfizer and Moderna. And another ingredient of concern mentioned by critics of these gene injections is graphene oxide.*

*But the European Medical Association EMA writes us that “it has not seen any credible evidence from its evaluations or from ongoing testing that any Covid-19 vaccine is contaminated with graphene oxide, which is not a recognized excipient in medicines.” **What is your knowledge about graphene oxide?***

SS: I don't exclude that besides this two very toxic components that are declared, i.e. synthetic mRNA and synthetic lipid nanoparticles, that there may be something else.

We had the Japanese government sent back 4 million doses of Moderna because they found particles of steel in the vaccine, though this may be also due to contamination. So it's possible that there's something else.

But other toxic components are not necessary to explain the toxicity, as I said, because synthetic mRNA and synthetic lipids are enough to explain all the toxic results of these “vaccines.” But there may be something else, may be some other metals.

As to graphene oxide, I tend to be suspicious in the sense that I believe that so far there's no credible evidence of the presence of it. I've seen studies by a few researchers like the ones

from Spain or other researchers doing dark field microscopy. And dark field microscope is a very good tool. I use it, too.

In fact, I'm a certified dark field microscopist among other things. And in fact, you can see the blood that is like rotten. You can see these images of blood really reduced and with a lot of blood clots and a lot of dark material. It looks really bad after you have been vaccinated with these "vaccines."

But the thing is, that in the studies from the Spanish researchers and from the ones from Italy that I saw dark particles have been found that look like graphene oxide, that resemble graphene oxide. But this is not a conclusive finding. These results from Spain are saying that they tested the presence of graphene oxide also with a vibrational methodology and that the vibration of this thing seemed to correspond graphene oxide as a whole.

But here we're entering a field that is not really solidly scientific anymore. And why do we need to get into this very shaky ground so that we are more liable to being accused of being charlatans or anything like that? We don't need that.

If you really wanna work on graphene oxide, take the blood, take the particles that are dark and test them chemically to find if it's graphene oxide or not. You cannot come up by saying *"Oh, it looks like graphene oxide,"* and then everybody is saying, *"Oh, there's graphene oxide in the vaccine."* This is not the way it should work. It's not a serious way of proceeding.

TE: *There are also fears that "vaccinated" people are contagious. Biomedical expert Philippe Van Welbergen, for example, recently claimed that unvaccinated have graphene and nanoparticles in*

*their blood that are transmitted by people who have received the gene injections against Covid. Are fears that “**vaccinated**” people **are contagious** justified?*

SS: No, they're not contagious because for one thing, since there's no production of spike protein, how can they be contagious to anybody else? And again, there's no proof that there's graphene oxide in these Covid injections. And all these stories about the graphene being a transmitter and so forth are all in the stage of storytelling, but there's not really anything substantial that has come out yet. Furthermore, I personally I don't believe in the contagion theory in general.

TE: *But Van Welbergen is also referring to the nanoparticles. So, again, can something toxic from the “vaccines” transmit from the vaccinated person to another person?*

SS: No. In fact, all the scientific literature explains that these nanoparticles, they're deposited. An example is the mentioned Japanese biodistribution study that showed that lipid nanoparticles are deposited in all the organs and that it's very difficult for the body on its own to take them out of the organs and the tissues where they are stuck. So they cannot be transmitted to anyone.

In fact, I've seen people getting sick after getting close to a “vaccinated” person. But who are these people? People who listen to people who are saying that the “vaccinated” people are contagious. They get into paranoia and two days later they're sick. Why? It's the mind.

Thank you, Stefano, for this conversation.

Thank you very much.

