From: Pauli Halstead

To: BOS Public Comment

Cc: Sherilynn Cooke; Ryan Gruver; Public Health; Alison Lehman; Sue Hoek; Hardy Bullock; Ed Scofield; Dan Miller; Heidi Hall

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Key message-Be prepared!

"I SERIOUSLY expect that a series of new highly virulent and highly infectious SARS-CoV-2 (SC-2) variants will now rapidly and independently emerge in highly vaccinated countries all over the world and that they will soon spread at high pace. I expect the current pattern of repetitive infections and relatively mild disease in vaccinees to soon aggravate and be replaced by severe disease and death. Unfortunately, there is no way vaccinees can rely on assistance from relevant1 innate or acquired IgM antibodies to protect against coronaviruses2 as these antibodies are increasingly being outcompeted by infection-enhancing vaccinal Abs, which are continuously recalled due to the circulation of highly infectious Omicron variants. In contrast, Omicron's high infectiousness would enable the non-vaccinated to train their innate immune defense against SC-2 while the infectious and pathogenic capacity of the new SC-2 variants would be debilitated in the non-vaccinated for lack of infection-enhancing Abs in their blood. Unless we immediately implement large scale antiviral prophylaxis campaigns in highly vaccinated countries, there shall be no doubt that the pandemic will end by taking a huge toll on human lives."-Geert Vanden Bossche

What we should do.

A mass antiviral prophylaxis campaign to reduce infectious transmission is a fundamental priority. An informed public can make critical health choices about early treatment options or continuing vaccination. Many protocols developed by doctors treating Covid use synergistic approaches that include antibiotics, Zinc, vitamins D3 and C and other therapeutics in addition to using antivirals alone. People should prepare themselves with at home kits.

Pauli Halstead

Geert Vanden Bossche received his DVM from the University of Ghent, Belgium, and his PhD degree in Virology from the University of Hohenheim, Germany. He held adjunct faculty appointments at universities in Belgium and Germany. After his career in Academia, Geert joined several vaccine companies (GSK Biologicals, Novartis Vaccines, Solvay Biologicals) to serve various roles in vaccine R&D as well as in late vaccine development.

Geert then moved on to join the Bill & Melinda Gates Foundation's Global Health Discovery team in Seattle (USA) as Senior Program Officer; he then worked with the Global Alliance for Vaccines and Immunization (GAVI) in Geneva as Senior Ebola Program Manager. At GAVI he tracked efforts to develop an Ebola vaccine. He also represented GAVI in fora with other partners, including WHO, to review progress on the fight against Ebola and to build plans for global pandemic preparedness.

Back in 2015, Geert scrutinized and questioned the safety of the Ebola vaccine that was used in ring vaccination trials conducted by WHO in Guinea. His critical scientific analysis and report on the data published by WHO in the Lancet in 2015 was sent to all international health and regulatory authorities involved in the Ebola vaccination program. After working for GAVI, Geert joined the German Center for Infection Research in Cologne as Head of the Vaccine Development Office. He is at present primarily serving as a Biotech / Vaccine consultant while also conducting his own research on Natural Killer cell-based vaccines

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