https://www.youtube.com/watch?v=kEE5OfiVS7o

<a href="https://www.youtube.com/watch?v=kEE5OfiVS7o
"> German Pathology

German Pathology

Dr. John Campbell

2.75M subscribers

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German pathology, John's text book on pathophysiology and more, free download on this link, https://drjohncampbell.co.uk

Post vaccine, post mortem blood clots

Not blood clots

Formed after death (incompatible with life)

Blood from a living patient with acute peripheral circulation ischaemia,

(after cooling the blood sample)

Might be a consolidation of proteins previously dissolved in the blood

Professor Arne Burkhardt (Walter Lang)

https://twitter.com/ArneBurkhardt

https://prabook.com/web/arne.burkhard...

https://swprs.org/covid-vaccine-injur...

Original German language presentation

• Prof. Arne Burkha...

Link page to translated version

http://docs.shortxxvids.com/burkhardt...

2nd conference on vaccine adverse events (English translation)

https://odysee.com/@LongXXvids:c/Prof...

Relatives turning to pathologists March 2022 onwards

Suspecting deaths might be vaccine caused

A disturbing and very complex histological picture

15 pathologic studies in the series so far

Found patterns that can be attributed to vaccinations

Methods

Involved a range of other analytical specialists

We have a toxicological problem before us

Things have been overlooked in the past

There is a poison at work which is produced in the body

Which means we must look of it in the tissues

Infection has been excluded

Methodology test

We have proved that spike protein in produced in the muscle it is injected into

We are able now to prove that this can occur I almost all cells and organs the body

Diffuse endothelialitis

Endo thelial itis

Active spike protein produced in adipose tissue

Clustering around capillary endothelium

(Biopsy from living patient, 8 months post vaccine)

Left, swollen blood vessels with SP

Right, brown stained SP with obliterative vasculitis

Damage to vascular endothelium, thrombogenic exposure

Foreign bodies in the lungs but not in the alveoli

Also FBs found in the spleen, pancreas, heart

Probably FBs are cholesterol

? Cholesterol released from atheromatous plaques

Accumulation of protein, amyloid like deposits

Found in tissues including the brain

0:01
well a warm welcome to today's talk it's
0:03
Sunday the 16th of April
0:06
now there's some um fascinating and

0:08
somewhat uh frightening pathology uh
0:11
coming out of Germany looking at
0:13
possible post-vaccination pathology
0:17
the obvious question is why isn't this
0:19
being done in the United Kingdom why
0:20
hasn't been done in the United States
0:22
but let's go straight on to one specific
0:24
example and you can see if you want to
0:25
watch the rest of the video now the
0:28
first example I want to look at and I'll
0:30
be giving you all the reference
0:31
references for this shortly this is
0:34
post-vaccine post-mortem blood clots
0:38
now I first heard of this from imbalmers
0:42
contacted by embalmers who were washing
0:45
out lots of blood plots well what they
0:47
thought was blood clots it was like long
0:49
white sort of strandy things and they
0:51
hadn't seen it before this appears to be
0:53
a new pathology these embalmers some
0:56
some with Decades of experience hadn't
0:58
seen it before

1:00
and the Pathologists don't seem to have
1:01
seen it before either so let's look at
1:04
what this is now here's a picture of it
1:07
here that was given in in Professor uh
1:09
burkhart's talk
1:11
and it's these long strandy things this
1:13
particular one's from Adams 2022 took
1:15
the photo these long strands coming out
1:19
of the blood vessels are the people that
1:21
died
1:22
now the thing here is
1:24
um there's masses of these things
1:27
um whatever they are and they can't have
1:29
formed in life because they were so
1:31
extensive that the circulatory system
1:32
would have been completely blocked off
1:34
so there are some post-mortem phenomena
1:37
they they are developing after death
1:40
but they appear to be new this is a new
1:43
pathology which is really remarkably
1:45
strange that we're seeing new diseases
1:47
after

1:48
the centers of pathological studies that
1:50
we've had so there's the stringy things
1:52
there now it's been identified by
1:54
Professor Burkhart and his team and I
1:56
should say he's got various people
1:58
working from physical chemists and
2:00
Pathologists and histologists and you're
2:03
basically heading this team in German
2:05
that's doing his research
2:07
um so they hadn't seen this before but
2:09
they are saying it's not blood clots so
2:11
they've been able to kind of eliminate
2:12
that possibility it's formed after death
2:15
because it's not compatible with Life
2:17
but what Professor Burkhart is doing now
2:20
is colleagues in surgery and Medicine
2:23
are sending in biopsies from living
2:26
patients so he started off looking at a
2:29
series of 15 postmortem patients from
2:31
people that died uh post vaccine whether
2:34
that was the cause or not although he
2:36
did eliminate SARS coronavirus to

2:39
infection in all of these patients and
2:40
did identify the spike protein so that
2:44
is indicating that it's a vaccine
2:46
related rather than infection related
2:48
because it would be hard to see how all
2:50
the other parts of the SARS coronavirus
2:52
2 Were Somehow eliminated and only the
2:54
spike protein was left so very
2:57
suggestive of a vaccine induced
3:00
etiology or cause
3:02
now this is blood from a living patient
3:04
so as we say is physician colleagues and
3:07
surgeon colleagues are sending biopsis
3:09
now this patient had quite severe
3:11
ischemia reduce blood supply to her um
3:16
to her feet now there is a picture in
3:19
the lecture if you want to see I haven't
3:20
shown it because it's not it's a bit
3:22
distasteful and so but it's there if you
3:25
want to see it look on the original
3:26
lecture of course and I'll give you the
3:28
links to that so they took a blood

3:30
sample from this living lady
3:32
and uh when they looked at the blood
3:35
they spun the blood down as the
3:37
hematologists normally do and after
3:39
they'd cooled it down
3:41
what they found is so what we're looking
3:44
at here you expect to see this nice
3:45
clear serum on the top you expect to see
3:48
this bloody but what the heck is this
3:49
Big Blob
3:51
that developed after the blood was
3:53
cooled is the question
3:55
so there it is again in a bit of a blow
3:58
up it's a very strange phenomena
4:01
um I have only worked uh part-time in
4:04
hematology I'm no specialist but I've
4:06
never seen anything like this and um
4:07
more importantly the Pathologists
4:09
haven't seen anything like this either
4:12
so he took it out and he put it on a he
4:14
put it on a that's the blob there taken
4:17
out from the blood

4:19
and uh is sending it round uh is uh
4:22
colleagues who are specialist chemists
4:24
and things like that and they are
4:26
analyzing this to see what it is
4:28
so it really is a bit of a medical
4:30
pathological mystery just work quite
4:33
what is going on here but we have a
4:34
little more information
4:35
this is in section here so this is a
4:38
physical entity from his tour this is
4:40
the slide from his talk
4:42
um very few cells in it and what it
4:46
seems to be it seems to be protein so it
4:49
seems to be a consolidation of protein
4:51
previously previously dissolved in the
4:53
blood
4:53
so what this blob seems to be let's just
4:56
have a look at that blob again because
4:57
it really is quite um
4:59
it's quite amazing and we've never seen
5:01
anything like it it's just a blob that
5:03
formed in the blood when the blood was

5:04
cooled
5:05
this really is a new pathology I can't
5:08
think of any diseases
5:10
where anything like this would would
5:12
occur if your pathologist watching and
5:15
I'm Consulting pathologist at the moment
5:17
but so far we don't know about this
5:20
do let me know because it's currently a
5:23
mystery it seems to be protein
5:25
so what seems to happen is
5:28
um after the blood sample is taken these
5:31
proteins were previously in solution in
5:33
the blood
5:34
like in a solution and then when the
5:36
blood is cooled they precipitate out of
5:39
solution and form these blobs and of
5:41
course if it's if it's in blood vessels
5:43
this was formed in a centrifuged
5:46
um blood specimen bottle so it became
5:48
globular we came round if it forms in
5:51
long thin blood vessels then of course
5:53
just like a mold it will mold to the

5:55
shape of the blood vessels it forms in
5:57
and this seems to explain these long
5:58
stringy things
6:00
that the embalmers were reporting to me
6:02
probably 18 months ago
6:05
so where are we getting all this
6:06
information from so it's Professor on
6:10
the uh
6:11
uh Burkhardt and working with Walter
6:14
Lang I know that pathologist now
6:15
Professor Burkhardt is um a pathologist
6:19
with over 40 years experience over 150
6:22
primary source research Publications and
6:25
international reputable pathologist
6:27
medical doctor
6:29
and when people like this Express
6:30
concerns I think we're pretty stupid to
6:33
be quite honest if we don't listen
6:35
we've had the privilege on this channel
6:37
of talking to some of the world's best
6:38
scientists and doctors and if we don't
6:40
listen to those why bother having

6:42
scientists and doctors we have to listen
6:43
to them and at least take their
6:45
questions seriously if the minimum that
6:47
the authorities in the UK do is take
6:50
this question seriously and and
6:52
commission our own Pathologists to do
6:54
this work then that's the minimum
6:55
response that we would expect from any
6:58
competent or authorities if they don't
7:00
do that I think we're free to question
7:02
the competence of our authorities
7:04
anyway this is this professor Burkhart
7:07
here this is his talk as we say highly
7:09
experienced highly reputable senior
7:13
professor of pathology
7:16
um original German language presentation
7:17
of his lecture is there check it out for
7:19
yourself it's called autopsy autopsy and
7:23
histopathology studies on Adverse Events
7:26
and deaths leading to covered due to
7:28
covid-19 vaccine
7:30
conducted at uh rootingling in Germany

7:33
where I was currently working
7:35
so um
7:37
a lot of this work is predicated on this
7:39
uh immunohistopathology
7:42
so they're able to identify the
7:44
histology which is sort of the tissues
7:46
the immunity in the in in the tissues
7:48
and they look for particular proteins
7:50
and what they're finding in these
7:51
lesions is Spike protein but not the
7:53
nucleocapsid protein they're not finding
7:56
the whole virus they're just finding the
7:58
part of the
8:00
part of the virus which is synthesized
8:03
in the body after it's being stimulated
8:05
by the vaccines that's how we know we're
8:08
not dealing with the post-covert
8:09
syndrome here
8:11
we're dealing with a post-vaccine
8:13
syndrome and more needs to be found out
8:14
about this
8:16
fairly

8:17
urgently that's the link to the
8:20
translated page it's the second
8:21
conference on vaccine Adverse Events
8:23
English translation to check it out
8:26
now relatives start to turn into
8:28
Pathologists in March 2022 onwards
8:30
because they had loved ones dying
8:32
and uh that their deaths were just not
8:35
making uh any any sense to them so they
8:37
uh clearly uh wanted to know why their
8:40
relatives were dying and Pathologists
8:42
make definitive postmortem diagnoses
8:44
unfortunately
8:45
but the quality of the diagnoses are
8:47
very good it's pure pathology is a pure
8:51
fairly pure science and uh it's the by
8:55
far the best way to find out why why an
8:57
individual is as uh as a deceased
9:02
so that happened in 2022 suspected
9:05
deaths might be vaccine caused some of
9:07
the relatives thought
9:09
uh disturbing and very complex

9:11
histological picture Professor Burkhart
9:13
says 15 pathology studies but as we say
9:16
now is also getting biopsies and blood
9:18
samples from other colleagues who've
9:20
heard about his work
9:21
and want to use it to diagnose their
9:24
living
9:24
patience
9:26
right more examples uh found patterns
9:29
that can be attributed to vaccination
9:31
now methods
9:32
before we do examples histology staining
9:34
specimens immunohistochemistry Advanced
9:37
chemical methods toxicological problem
9:40
and he's easy as I say he recruits a lot
9:43
of them
9:44
differentiated lesions so the spike
9:46
proteins there they know it's not the
9:48
true viral infection they're doing all
9:51
of these studies with a range of
9:53
specialist colleagues as as we've said
9:56
in Germany

9:58
um
9:59
analytical toxicological problems things
10:03
that have been overlooked in the past
10:04
now uh he'd see says this is a poison at
10:08
work which is produced in the body
10:10
this is a translation from German of
10:12
course but we think it's pretty accurate
10:14
which means you must look into the
10:16
tissues which of course is what
10:17
histopathologists do infection has been
10:20
excluded I don't think we can stress
10:21
that strongly enough
10:23
he has been a great pains to exclude the
10:26
possibility that this is infectious
10:27
causes
10:30
um now one methodology test he did which
10:33
we would expect is this is the muscle
10:35
where the vaccine is injected into and
10:38
you can see the brown Spike protein
10:40
being produced now this is what we
10:43
expect to happen this is what should
10:45
happen

10:46
so what we should what should happen is
10:47
the vaccines injected into the arm it
10:49
stays local which we now know it doesn't
10:51
and and the cells in the arm should and
10:54
properly a few in your armpits in in the
10:56
uh in the lymph nodes should produce the
10:58
spike protein so that is confirmed and
11:00
that confirms that these techniques are
11:02
in fact working
11:03
that we see the brown staining of the
11:06
spike protein in the muscle cells where
11:08
it's supposed to be but he says we are
11:10
able now to prove that this can occur in
11:12
almost should be in or most cells in the
11:15
organs in the body so we saw this from
11:17
the uh Freedom of Information request
11:19
Australian data this is happening all
11:22
over the body not just in the place
11:25
where it was injected and what he finds
11:28
is a diffuse
11:29
endothelialitis so Endo is in athelial
11:32
is the epithelial lining or the

11:34
endothelial lining and itis is
11:36
inflammation of so what's happening is
11:39
that the vaccine is circulating around
11:41
the body and and the vaccines going into
11:44
the cells which line our blood vessels
11:47
could be anywhere could be in the brain
11:48
could be in the heart
11:49
the value the vaccine mRNA is going into
11:53
those cells those cells are expressing
11:55
the spike protein so you get Spike
11:57
protein expressed in cells for example
12:00
in capillaries uh perfusing The
12:02
myocardium the heart muscle and because
12:05
the spike protein is far in the immune
12:07
system then attacks these cells and
12:09
we're getting this inflammation
12:11
in different parts of the body
12:14
that is what is happening active Spike
12:17
protein is produced for example in
12:18
adipose tissue clustering around the
12:20
capillary endothelium now again this is
12:23
fatty tissue here now that there is what

12:26
we are seeing here this is the capillary
12:28
here so we're seeing the brown uh Spike
12:30
protein produced in the capillary and
12:32
fatty tissue
12:33
now this starts and stops here because
12:35
it goes in and out the plane of the
12:37
picture which often happens in
12:38
pathological specimens but there is some
12:40
spike protein being produced in the
12:42
adipose tissue as well because
12:44
the vascular layer is so damaged
12:48
that the MRNA is leaking out
12:51
into the tissues
12:53
the very tissues of the body going into
12:55
body cells in this case adipocytes in
12:58
the fatty tissue
12:59
and producing Spike protein there and of
13:02
course that's going to have the
13:04
associated
13:05
inflammatory response
13:09
here's another example here that this
13:12
patient had a again this is a living

13:14
patient left swollen blood vessel with
13:17
Spike protein on the right brown stain
13:19
Spike protein with obliterative
13:21
vascularitis obliterated means that the
13:24
inflammation in the blood vessels the
13:25
vasculitis is so severe
13:27
is blocked off the vessel so here we see
13:30
a very swollen vessel in this one here
13:32
we see the brown Spike protein in this
13:35
cross section of the blood vessel and
13:36
here we see the Sprite protein has
13:38
blocked off
13:39
the uh the blood vessel so damage to
13:42
endothelium
13:44
thrombogenic exposure now this diagram
13:47
here is a bit complicated but these flat
13:49
cells here are the normal endothelial
13:51
cells now I'm not going to go through
13:52
the pathological State just because
13:54
we'll be here all day
13:55
but what is basically happening is the
13:57
spike protein is being produced by the

14:00
vascular endothelial cells the cells
14:02
that line the blood vessels
14:03
as you would as uh yeah that's what
14:06
happens it's not what's supposed to
14:08
happen but you would expect that if the
14:10
systemic distribution of the vaccine
14:12
the immune system is then attacking
14:13
these cells destroying these cells and
14:16
what that means is you've taken away
14:18
this top layer you've taken away the top
14:20
layer so the under layers is exposed and
14:23
that can cause uh clots because it the
14:27
basic that the body thinks it's been cut
14:28
it's um it's induced thrombosis so you
14:32
get a thrombosis induced due to the
14:34
vascular damage because the underlayer
14:36
underlying layers are
14:38
thrombogenic so that is um
14:41
that is what's happened uh there in that
14:46
example foreign bodies are also found in
14:49
the lungs but not in the alveoli
14:51
uh the foreign bodies may be cholesterol

14:54
they appear to be cholesterol so here's
14:55
a foreign body there that's not supposed
14:56
to be there but the airspaces are okay
14:59
it's not in the air spaces
15:01
and um also the foreign bodies the
15:04
cholesterol can produce uh crystals
15:07
so here we see some uh here we see
15:10
crystalline uh crystals of cholesterol
15:15
and the idea is that because the um the
15:18
idea here is because the spike proteins
15:20
damage the surface of the blood vessel
15:22
any blood any cholesterol which restored
15:25
in the atheromatous plaques has been
15:27
released now this could in future I
15:30
suppose be a potential treatment because
15:31
you don't want the cholesterol and the
15:33
atheroma to splacks but it it it it
15:35
shows it shows that um it shows that the
15:38
endothelium is being damaged and
15:40
cholesterol is being released and in
15:43
this case forming uh in this case
15:46
forming these crystals

15:50
um accumulation of protein is amyloid
15:52
type proteins being produced as well so
15:55
what is also finding is strange proteins
15:58
it's not actually amyloid protein it's
15:59
other types of protein but protein seems
16:01
to be accumulating in other parts of the
16:02
body
16:03
particularly the brain and the concern
16:05
there is dementia so um do look at these
16:09
original sources for yourself
16:12
um make sure my I think my translations
16:14
are fairly good I am I am taking more
16:17
consultations on this but the uh the
16:19
video translation I think is fairly
16:20
accurate
16:21
as far as I'm able to tell I recognize a
16:24
lot of the pathological terms because
16:25
they're much the same in German and
16:27
English and uh
16:28
a spattering of German so um it does
16:32
seem to seem to be good if you're a
16:33
native German speaker or a bilingual or

16:36
competent in German do again tell me
16:38
about the quality of the translations
16:40
we're on a learning exercise here
16:41
questions have been asked
16:43
and authorities really need to answer
16:45
these questions because we appear to be
16:47
looking at new pathologists
16:50
haven't been seen before
16:52
so uh let's hope that the British and
16:55
the UK the UK the European the um the
16:59
rest of the European and the US
17:00
authorities Canadian
17:03
New Zealand Australian plenty of
17:05
Pathologists in those countries uh they
17:07
really need to start looking at this now
17:09
they know what to look for
17:11
that now Professor Burkhart and his team
17:13
have said this is what you look for it's
17:15
easy for them to find now because they
17:17
know what they're looking for
17:18
let's hope this happens and hope we get
17:20
some definitive answers

17:22
because if we're dealing with a
17:24
completely new pathologist that would be
17:26
concerning
17:28
thank you for watching
English (auto-generated)
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