

Hello,

I am sending this message in response to the possibility of a permanent mandate for collegiate students and certain state employees in Nevada regarding the Covid-19 vaccinations. I think such a mandate is misguided and not supported by current evidence and is not considerate of bodily autonomy.

1. Vaccine mandates have traditionally been instituted to stop the spread of viruses. However, the current Covid-19 vaccines are not vaccines in any traditional sense. The current vaccines do not inject attenuated live viruses or dead viruses into the bodies of recipients. Instead, they use synthetic messenger RNA stabilized in lipid nanoparticles. This mRNA instructs the ribosomes of cells to create the spike protein found on the SARS-CoV-2 virus. Consequently, they do not offer sterilizing immunity, and vaccinated individuals can easily get infected and become sick and transmit the virus to others. In fact, the countries and states that are heavily vaccinated are the ones that have seen surges in cases and hospitalizations in mid- to late 2021. Compare heavily vaccinated Israel to the Palestinian Territories and nearby countries in the Levant, or see how Hawaii, Gibraltar, Iceland, and other jurisdictions have all seen record cases and hospitalizations despite high vaccination rates. Widespread vaccination using an mRNA treatment that does not provide sterilizing immunity actually helps create the widespread immunologic conditions for viruses to evolve and become more infectious, so mass vaccination may actually help Covid-19 spread more easily. Mandating Covid-19 shots makes no sense at attempting to slow the spread of the disease.

2. We have been told by officials, including our own Governor Steve Sisolak, that the vaccines offer better protection than recovery from Covid-19 infection. This is false. By far the demographic least likely to be protected against infection, hospitalization, and death is those individuals who have recovered from the virus. Recovery from infection produces antibodies against all of the virus's proteins and not just the SARS-Cov-2 spike. Furthermore, immunity is not just measured via antibody counts, but also by T-cell response, and some evidence suggests that even people who have not been exposed to Covid-19 but have been infected with cytomegaloviruses (found in half of the adult population) and influenzas have T-cell responses to Covid-19. People who have recovered do not need a vaccine, and in fact, data suggests Covid-19 recovered patients are more likely to have adverse reactions to the vaccine than those who have never been infected.

3. The vaccines already have the largest number of deaths and in the VAERS system (In fact, more than all other vaccines over the last several decades combined). Adverse reactions and deaths are likely underreported in VAERS. They are associated with an elevated risk of pericarditis and myocarditis in certain demographics.

4. College students are typically in their teens and twenties and are hence extremely unlikely to have severe cases of Covid-19. In fact, given the unknown long term side effects and concerning short term

side effects, I would say mandating a vaccine with so little known is not worth the risk on younger and generally healthier demographics.

5. I believe it is unethical to mandate any medicinal product for which the long-term side effects are unknown on any demographic, regardless of how much at-risk the demographic is for an infectious or non-infectious disease. There is no way to know what the long-term effects of just one or two doses are, let alone booster shots done year-after-year or many times annually, nor will the consequences be known for many years.

6. There are actually no FDA-approved vaccines available currently. The FDA approval was for a vaccine called Comirnaty, which is not available currently. For the vaccine to be Comirnaty, it would need to be labeled as such. The generic Pfizer-BioNTech Covid-19 vaccines are not labelled as such and are therefore not Comirnaty.

Instead of mandates, we should respect individual autonomy and the fact that no two individuals are the same in terms of health needs and health history. What is the right decision for one individual may not be what is right for another. Just like we should have freedom of speech, freedom of association, freedom of religion, freedom of press, and freedom to peacefully assemble, we should also all have the freedom to determine what goes into our own bodies. The bodily autonomy and individual agency of you and your family and friends and colleagues should be respected, as it should be for all Nevadans, so let us keep it that way.

Sincerely,

V.M.

Nevada resident