

PRUDENCE AND ‘VACCINES’

Prudence is the mother of all the other virtues. We all need it, but none more than priests, doctors and politicians, especially when it comes to moral questions linked to the COVID-19 ‘vaccines’. Father Ambrose explains.

All important decisions in life should be guided by prudence. With it we resolve on a course of action in accordance with our rational nature. Without it we can make some very big, even fatal, mistakes. This is true in questions concerning our state in life, our career, our family, and also our health. At the moment, there is a very serious question concerning whether or not to get vaccinated.

Q. *Doesn't prudence demand we do what our government says is the right thing?*

The general narrative created by our governments, thanks to the all-powerful media, goes something like this:

- 1) SARS-CoV-2 is a virus that causes a highly transmissible deadly disease known as COVID-19 which has created a state of pandemic throughout the world and already killed millions of people.
- 2) Vaccination is the only way of preventing spread of the virus and keeping us all safe.
- 3) If we care about saving lives, we have a moral obligation to receive experimental ‘vaccines’ which our governments assure us are safe and effective.
- 4) Anyone who rejects or alters these premises is deemed to be dangerous to society, and is liable to prosecution.

Q. *Is this narrative substantiated by the facts?*

Article 1 in this series “Conscience and vaccines”¹ explores the evidence disputing the three key points above which fuel the vaccination drive, namely the median global infection fatality rate (IFR) of 0.05%² and the lack of efficacy or safety of current ‘vaccines’.³

The fourth point however remains the most concerning aspect of the ‘pandemic’ with its censorship of debate, even that coming from the most highly qualified in the relevant science, and the swift silencing of any dissenting voices or opposition. This is evidenced by the constant ‘fact checking’ on web browsers/social media, the removal of medical journal articles⁴ and the character assassination and ‘cancelling’ of prominent medical voices⁵ who are critics of the COVID-19 vaccine narrative.

This unprecedented censorship has led thousands of doctors to urgently form global networks⁶ which call into question the ethics and the science behind the ‘vaccinations’⁷, and condemn pharmaceutical influence over politics, the medical profession and good health care. They are also calling out the suppression of highly safe and effective treatments in Western countries. These networks have proclaimed in

¹ <https://www.lumenfidei.ie/conscience-vaccines/>

² https://www.who.int/bulletin/online_first/BLT.20.265892.pdf, [2PIC-COVID-19-Disease-Information-Statement-DIS-August-2021.pdf](https://www.who.int/bulletin/online_first/BLT.20.265892.pdf)

³ <https://physiciansforinformedconsent.org/wp-content/uploads/2021/08/Pfizer-COVID-19-Vaccine-Risk-Statement-PDF.pdf>

⁴ [ps://twitter.com/RWMaloneMD/status/1449142757335863297](https://twitter.com/RWMaloneMD/status/1449142757335863297), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8483988/>

⁵ Dr Malone, inventor of mRNA technology, was blocked from the New England Journal of Medicine <https://twitter.com/RWMaloneMD/status/1446064487988146180>

⁶ www.covidcarealliance.com, www.nzdsos.com, www.bird-group.org, www.canadianphysicians.org, www.covid19criticalcare.com, www.doctors4covidethics.org, www.worlddoctorsalliance.com, www.covidmedicalnetwork.com, www.covid19assembly.org/doctors-open-letter/, www.physiciansforinformedconsent.org, www.hartgroup.org

⁷ <https://www.pandata.org/letter-to-british-society-of-immunology/>

unison that ‘these policies may actually constitute crimes against humanity’⁸.

The particular aspects of the gene therapy⁹ vaccines that are of concern for high level experts in the fields of virology, immunology and vaccine development are their ability to facilitate:

1) the spread of disease by highly virulent escape mutant variants causing an increase of cases, and likely leading to ADE (Antibody Dependent Enhancement)¹⁰, demonstrated in every past animal study of coronavirus ‘vaccines’¹¹.

2) general immune suppression¹² leading to an increase of auto-immune diseases and cancers¹³;

3) an increase in vascular system disorders (heart attacks, strokes, clots) caused by the biologically active spike protein¹⁴ lodging in the lining of the blood vessels causing micro-clots (endothelial damage¹⁵). This is demonstrable with the sharp increase of myocarditis and pericarditis cases in young adults. In older adults, it may manifest as heart attacks, strokes, or even kidney and/or heart failure (caused by accumulation of spike proteins).¹⁶

4) the weaponising of the virus for the realisation of plausible ulterior motives.¹⁷

The notion of ulterior motives shall be dealt with in a future article. For the moment, let’s limit ourselves to exploring prudence and its integral parts in relation to the medical aspects of a vaccination with an unknown potential.

Q. What is the virtue of prudence and its relevance to this situation?

A. Prudence is the cardinal virtue by which we discern which things are to be done and which are to be omitted. Three different but complementary acts go into making up a

prudential act:

- 1) Take counsel and deliberate;
- 2) Come to a decision;
- 3) Act upon it.

When we know something needs to be done, prudence also helps us discern how and when to do it. In the deliberative stage, the virtue of prudence is helped by what we call its ‘integral parts’, which are good habits that allow the virtue to exercise its full potential. The integral parts of prudence are: memory, foresight, caution, circumspection, understanding, shrewdness, docility, reason. Let’s have a look at them one by one. This will help us come to a prudential decision about vaccination.

Memory (*Memoria*) brings to our mind the right things pertaining to the action we have to perform and its circumstances. Experience of the past allows us to judge with sufficient probability what we need to do now, and consequently a good memory is a most powerful auxiliary to the virtue of prudence. People with lots of experience tend to be more prudent, for they have seen and heard many things.

For medical treatment to be deemed prudential, it is necessary that it be tested over a long period of time to ensure its safety and efficacy. This allows the memory to dig deep into that experience and make judgments that will help do the right thing. A practical exercise in memory would be to recall the infamous Thalidomide Scandal of the 1950s and early 1960s, familiar to medical professionals. Thalidomide was a drug that was hastily rolled out following incomplete observations. It was deemed safe for all to take, including pregnant women, although there were no studies done on

8 <https://doctorsandscientistsdclaration.org/>

9 Dr Malone explains the nature of gene therapy vaccines and risks <https://www.bitchute.com/video/ukx8L3lh5CA7/>

10 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7943455/>; ‘It’s becoming increasingly difficult to imagine how the consequences of the extensive and erroneous human intervention in this pandemic are not going to wipe out large parts of our human population. One could only think of very few other strategies to achieve the same level of efficiency in turning a relatively harmless virus into a bioweapon of mass destruction.’ Dr Geert Van Den Bossche: Virologist & former Vaccine Scientist for The Bill and Melinda Gates Foundation. <https://www.geertvandenbossche.org/>; <https://dailyexpose.uk/2021/05/24/nobel-prize-winner-says-covid-vaccines-are-an-unacceptable-mistake/>, Dr Luc Montagnier- Nobel Laureate in Medicine

11 <https://pubmed.ncbi.nlm.nih.gov/22536382/>; <https://pubmed.ncbi.nlm.nih.gov/17194199/>; <https://pubmed.ncbi.nlm.nih.gov/18941225/>

12 <https://europepmc.org/article/PPR/PPR334978>

13 <https://www.ncbi.nlm.nih.gov/labs/pmc/articles/PMC8538446/>; <https://swprs.org/covid-vaccines-and-cancer/>

14 <https://www.ahajournals.org/doi/10.1161/CIRCRESAHA.121.318902>

15 https://www.ahajournals.org/doi/10.1161/circ.144.suppl_1.10712

16 Spike of 10-15% of excess mortality (even when factoring for Covid-19 deaths, or lockdown effects) in highly vaccinated countries. <https://www.unz.com/mwhitney/excess-deaths-point-to-depopulation-agenda/>

17 ‘There’s no possible benign interpretation of this other than a serious attempt at mass depopulation. This will provide the tools to do it, and plausible deniability. They’ll create another story about some sort of biological threat and you’ll line up and get your top-up vaccines, and a few months or a year or so later, you’ll die of some peculiar inexplicable syndrome. And they won’t be able to associate it with the vaccines.’ Interview with Dr Michael Yeadon, Former Chief Scientist of Pfizer for 16 years and total 30 years experience in immunology science and vaccine development. <http://totalhealthmatters.co.uk/a-massive-fraud-has-been-perpetrated-by-dr-michael-yeadon-phd/>

the latter, nor even any long-term data on humans. The drug was initially marketed in Germany under the trade name Contergan, and then allowed in 46 countries under many different trade names. It would be five years and 10,000 affected babies later (half of whom died, and the other born severely disabled) that the link was finally made between birth defects and the ingestion of thalidomide. Finally, the drug was withdrawn from distribution.¹⁸

This grave error caused a global scandal that forced both government and medical bodies to change the ways drugs were tested, approved and marketed, and gave rise to many of the pharmacovigilance strategies in place to this day. The Yellow Card system (for adverse events) was set up in the UK and any drug that was marketed to pregnant women had to provide robust evidence of its safety during pregnancy. The FDA pharmacologist, Frances Oldham Kelsey, was awarded a Presidential award in the USA for blocking the sale of thalidomide in that country – she did so after hearing of a handful of cases of severe adverse events.

Seventy years later, on a far wider scale, following the reports of 18,500 deaths in the US¹⁹, 13,000 deaths in the UK²⁰ and 27 European union countries²¹ and with a combined 3 million adverse effects in the UK, EU and US, over a period of only 11 months – we still have the ‘emergency use’ and even mandating of gene therapy ‘vaccines’ marketed to prevent COVID-19 that are still part of an active clinical trial not due to end for another three years, with no demonstrable safety data on the general population, let alone on children and pregnant women. It is worth noting that the above numbers are extremely conservative estimates, as it is well known in the field of pharmacovigilance that only 1-10% of adverse reactions (including deaths) are reported due to the tedious process involved for families and physicians.²²

Furthermore, we have the active censoring and character assassination of many eminent professionals across all continents who are

flagging the safety concerns and calling for the immediate cessation of the vaccine rollout. One such expert, Dr Tess Lawrie, founder of the BIRD (British Ivermectin Recommendation Development) group in the UK and a former consultant to the WHO, concludes in a letter to the UK Medicines board: ‘Urgent independent expert evaluation and discussion is required to assess whether the novel vaccines may be causing gene mutations among recipients, as suggested by the occurrence of usually extremely rare genetic disorders. The MHRA (Medicines and Healthcare products Regulatory Agency) now has more than enough evidence on the Yellow Card system to declare the COVID-19 ‘vaccines’ unsafe for use in humans. Preparation should be made to scale up humanitarian efforts to assist those harmed by the COVID-19 ‘vaccines’ and to anticipate and ameliorate medium to longer term effects’.²³

Foresight (*Providentia*) is the ability to visualise future outcomes of actions based upon past experience: one cannot be provident for the future unless one has learned from the past. We can thus see how foresight is linked with memory.

Anyone aware of the thalidomide scandal cannot fail to see the parallel dangers and risks – indeed in this case on a much larger scale – of the unbridled use of experimental drugs, particularly gene therapies. The knowledge of what happened then helps us chart a course that would avoid similar or even more serious calamities in the future. Unfortunately, the number of deaths and injuries already recorded proves that there is little foresight in those who are making the decisions for us. Even if the majority of people vaccinated do not have immediate adverse effects, we must ask the question of what possible and unknown outcomes we will be seeing in the future with the application of untested genetic technology on all age groups, including pregnant women and children during their neurologically and hormonally sensitive developmental years.

For example, when we consider females both young and old experiencing severe menstrual

18 www.sciencemuseum.org.uk/objects-and-stories/medicine/thalidomide

19 www.openvaers.com

20 www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions

21 www.ema.europa.eu/en/human-regulatory/overview/public-health-threats/coronavirus-disease-covid-19/treatments-vaccines/vaccines-covid-19/safety-covid-19-vaccines

22 <https://digital.ahrq.gov/sites/default/files/docs/publication/r18hs017045-lazarus-final-report-2011.pdf>, <https://www.gov.uk/drug-safety-update/yellow-card-please-help-to-reverse-the-decline-in-reporting-of-suspected-adverse-drug-reactions>

23 <https://ukfreedomproject.org/resources/open-letter-to-dr-june-raine-chief-executive-mhra/>

bleeding post vaccination²⁴, it is of little wonder why scientists and doctors are warning against epigenetic reproductive effects that may not manifest immediately or in the first generation.²⁵ In a legal challenge to the European Medicines Agency, Dr Michael Yeadon, former chief scientist of Pfizer, admonishes: ‘The mRNA vaccine triggers the body to produce antibodies against the SARS-CoV-2 spike protein, and spike proteins in turn contain syncytin-homologous proteins that are essential for the formation of placenta. If a woman’s immune system starts reacting against syncytin-1, then there is the possibility she could become infertile. This is an issue that none of the vaccine studies is looking at specifically. Mass vaccinating women of childbearing age against COVID-19 could potentially have the devastating consequence of causing mass infertility if the vaccine triggers an immune reaction against syncytin-1’.²⁶

Furthermore, an understanding of epigenetics – the influence of external factors on the expression of our genes – is critical and currently lacking. The possibility that the injected mRNA (which has the instructions to create spike proteins) via an enzymatic process can penetrate the nucleus of the cells where the DNA is located and can ultimately insert itself into the DNA, cannot be definitively excluded. There is already evidence that this very process, which researchers did not anticipate, is occurring with the spike protein.²⁷ What this means, in simple language, if this insertion occurs to the egg and sperm, there is a real potential for these vaccines to alter the human genome, forever.

Caution (*Cautio*) makes use of past knowledge to avoid impediments and evils in the future. The cautious person is very careful so that no exterior obstacles come to vitiate or hinder an act of virtue, for example, by causing unwanted damage of any kind. This is a part of prudence that is most particularly important for doctors. Having people’s lives in their hands, they must be very cautious in the means they propose to heal or prevent illness. It is not enough to take action that *might* work. Indeed, the very first principle

in medicine is: *Primum non nocere* – *first of all, do no harm*. Caution helps do just that. This might also entail renouncing what one thought was a safe course of action when it becomes obvious that it was not.

In our present situation, caution reminds us of the apparent lack of scientific method involved in the development of the current ‘vaccines’, or the quasi-religious zeal involved in promoting them; both of these should set off alarm bells. In the following quote, Dr Robert Malone, co-inventor of mRNA technology, industrial scientist, medical doctor and clinical immunologist with extensive experience at high-level government and pharmaceutical regulatory bodies, describes how caution has been conspicuously absent:

‘The regulatory agencies of the world allowed Pfizer to proceed with human trials and then EUA (Emergency Use Authorization) with a set of data that is grossly incomplete that didn’t even meet the minimum standards of what is normally required for safety toxicology and genotoxicity and reproductive toxicity testing. The appearance is that they were allowed to cobble together information that they had obtained from other RNAs and other vaccines in lieu of doing other studies. They were allowed to proceed on the basis of inadequate information. It is profoundly demoralising and it is profoundly corrupt. I can’t explain it any other way. The norms I have been trained for years of my professional life... and then none of the rules matter. The rules of bioethics, they’ve completely disregarded. These rules go back to the Nuremberg trials. What I see is so profoundly disturbing to me. I’m now to the point where my point of view is that the FDA and the CDC are essentially acting outside any judicial restraint. They don’t care what their standard rules are. They will do whatever they want to do. A lot [of] it seems to be driven by what Dr Fauci’s personal beliefs are. And because of the legislation that was put in place at the start of the outbreak – I don’t know whether they can be held accountable – as they may be ex-judicial now’.²⁸

Dr Malone’s concerns regarding Pfizer in particular have been echoed by Dr Michael

24 In Australia according to TGA DAEN: 445 cases of heavy menstrual bleeding, 97 cases of miscarriage, 7 cases of stillbirth, 85 cases of uterine haemorrhage in post-menopausal women. In the USA: 2996 miscarriages.

25 <https://cienciaysaludnatural.com/estudio/why-covid-19-vaccines-might-affect-fertility/>

26 www.2020news.de/wp-content/uploads/2020/12/Wodarg_Yeadon_EMA_Petition_Pfizer_Trial_FINAL_01DEC2020_EN_unsigned_with_Exhibits.pdf

27 <https://www.mdpi.com/1999-4915/13/10/2056/htm>

28 <https://rumble.com/vnbbdv-jim-hale-interview-with-dr-robert-malone.html>

Yeadon as well as by current Pfizer researchers who recently revealed the ‘unprecedented serious lack of data integrity’ within the trials.²⁹ Pfizer is the main vaccine of choice for those under 50 and has been approved for and rolled out for use in children as young as five.

In addition, there is another, even more important consideration, which forbids us from dismissing serious evidence against the ‘vaccinations’, namely that *the complete ingredient list is not disclosed*.³⁰ This is partly due to the drugs being experimental, but also due to the patents. This is unprecedented in medical history – the administration of a drug whose ingredients are not completely known even to the doctors and nurses administering them, which then of course obliterates the notion of informed consent.

Circumspection (*Circumspectio*) is closely connected with caution. It is the disposition to keep track of the circumstances surrounding the situation under consideration. It is the capacity to look around oneself, not to be overly absorbed in one’s own research and findings, but attentive to those of others, to current events, to demonstrable facts. A given course of action might be good in itself, but not in these particular circumstances. A given piece of information might be at odds with my research, but I must consider it, for I may have been wrong.

Being circumspect connects the dots and obliges us to ask some more hard questions: Why is a dubious chemical immunity that is brief – lasting only up to 200 days and then even going into negative immunity with the possibility of a pseudo-AIDs syndrome –, being preferred to natural immunity which is by far superior?³¹ Why have the pharmaceutical companies been indemnified from all liability? Why are so many

medical professionals ready to lose their jobs and livelihood, or even die for the cause, rather than get vaccinated? Why are medical journals censoring and retracting studies which demonstrate the harm of the ‘vaccines’?³² Why the rush to get *everyone in the world* vaccinated with experimental ‘vaccines’ against a disease with a survival rate of 99.95%? Why are children, who are not at risk, being forced to get vaccinated³³? Why are pregnant women, who have always been excluded from such experiments, being encouraged to get the jab? Why do we have young, elite athletes dying suddenly shortly after receiving a ‘vaccine’?³⁴ What is going on here?

When we look back at the last forced human experimentation partnered with manipulated social order in a Western Country – the Nazi-controlled period in Germany – we should feel inclined to be more circumspect. Although many are quick to blast such comparisons as ‘conspiracy theory’, we really cannot write this off too quickly as a theory when there are ample warning signs that it is much more fact than theory. The fear campaigns³⁵, segregation and a two-tiered society based on ‘health’ traits, the building of quarantine camps³⁶, the demonising of the objectors, particularly experts, as ‘antivaxxers’, and in many countries the denial of healthcare to certain groups (in this case the unvaccinated), all have their equivalent in that dark period of history. As Dr Vladimir Zelenko, creator of the highly successful hydroxychloroquine protocol for COVID-19, stated: ‘When it started to rain, Noah was no longer a theorist’. Furthermore, there is a misconception that the program implemented by the Nazis was an isolated delirium of an Austrian born madman. In fact, human experimentation

29 <https://www.bmj.com/content/375/bmj.n2635>

30 https://www.icandecide.org/wp-content/uploads/2021/09/IR0558-FDA-Ingredients-in-Pfizer-Vaccine_FINAL.pdf

31 <https://quadrant.org.au/opinion/public-health/2021/10/we-cant-vaccinate-this-pandemic-away/>; https://wwwnc.cdc.gov/eid/article/27/10/21-1427_article; <https://www.nature.com/articles/d41586-021-01557-z>

32 [ps://twitter.com/RWMaloneMD/status/1449142757335863297](https://twitter.com/RWMaloneMD/status/1449142757335863297); <https://www.ncbi.nlm.nih.gov/labs/pmc/articles/PMC848398>

33 <https://www.sciencedirect.com/science/article/pii/S221475002100161X>

34 <https://www.notonthebeeb.co.uk/post/surge-of-sports-people-worldwide-suffering-unexpected-ill-health>

35 [www.thelancet.com/journals/lancet/article/PIIS0140-6736\(21\)02243-1/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)02243-1/fulltext)

36 <https://summit.news/2021/10/12/australia-building-quarantine-camps-for-ongoing-operations/>

and eugenics was truly perfected in the United States (particularly California) with the Rockefeller Institute funding many of the early Eugenics programs which were then adopted and implemented in Nazi Germany.³⁷

Understanding (*Intellectus*) is the ability to grasp practical principles and the nature of various situations – it's what we call common sense. It is a fact of experience that people who hold degrees are not necessarily gifted with this kind of understanding. They might be capable of reciting facts learned from books, but when it comes to understanding the basics of a given situation, they can easily be deluded and fail to see the forest for the trees, especially when the passion of their own theories can easily blind them. Often, all it takes to see through deceitful propaganda is good common sense. One practical point which understanding resolves quickly is the use of demonstrably safe and effective treatments of COVID-19, such as ivermectin,³⁸ hydroxychloroquine,³⁹ Vitamin C, D,⁴⁰ Zinc, Quercetin etc. Why this rush for 'vaccines' generated via use of aborted foetal cells when practical results documented by numerous physicians demonstrate there are effective and inexpensive treatments?⁴¹ There is a lack of common sense in all this.

Shrewdness (*Solertia*) is what we would call quickness at discerning the means to an end. Some people are shrewd by nature; they quickly

find the right answer or course of action in a given situation. Others pick up the habit by lots of practical exercise, trial and error. By gathering the congruent pieces of information, a shrewd person would not fail to grasp that the vaccination drive strongly suggests the 'pandemic' is being hijacked for purposes other than health. Upon reading of the 'Lockstep Scenario'⁴² in the 2010 Rockefeller Foundation convention documents – the same Rockefeller foundation that was the primary financier⁴³ of the eugenics drive in Germany and the USA – titled *Scenarios for the Future of Technology and International Development*, which spells out in perfect precision the events of the last 20 months, including the implementation of biometric passes – a shrewd person would ask quite rightly: has this scenario been planned as a means to another end?

Docility (*Docilitas*) is the ability to take counsel from others and allow oneself to be led by their better judgment. This interior disposition of promptitude in learning is most necessary for acquiring the virtue of prudence, the reason being that prudence concerns actions in particular situations which are so diversified as to be nearly infinite, such that no one man can know them all. Conversely, the lack of capacity to listen is a sign of imprudence. Who could deny that we see an astounding lack of docility today when governments, media and the public health

37 'Upon returning from Germany in 1934, where more than 5,000 people per month were being forcibly sterilized, the California eugenics leader C. M. Goethe bragged to a colleague: You will be interested to know that your work has played a powerful part in shaping the opinions of the group of intellectuals who are behind Hitler in this epoch-making program. Everywhere I sensed that their opinions have been tremendously stimulated by American thought ... I want you, my dear friend, to carry this thought with you for the rest of your life, that you have really jolted into action a great government of 60 million people'. Edwin Black, *War Against the Weak: Eugenics and America's Campaign to Create a Master Race*.

See also Carola Sachse, *What research, to What End? The Rockefeller Foundation and the Max Planck Gesellschaft in the Early Cold War*, Central European History, Cambridge University Press (Mar., 2009), Vol. 42, No. 1, pp. 97-141.

38 www.ivmmeta.com

39 www.hcmeta.com

40 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7826030/>

41 <https://covid19criticalcare.com/covid-19-protocols/i-mask-plus-protocol/>

42 'The pandemic that the world had been anticipating for years finally hit...However, a few countries did fare better—China in particular. The Chinese government's quick imposition and enforcement of mandatory quarantine for all citizens, as well as its instant and near-hermetic sealing off of all borders, saved millions of lives, stopping the spread of the virus far earlier than in other countries and enabling a swifter post pandemic recovery. China's government was not the only one that took extreme measures to protect its citizens from risk and exposure. During the pandemic, national leaders around the world flexed their authority and imposed airtight rules and restrictions, from the mandatory wearing of face masks to body-temperature checks at the entries to communal spaces like train stations and supermarkets. Even after the pandemic faded, this more authoritarian control and oversight of citizens and their activities stuck and even intensified. In order to protect themselves from the spread of increasingly global problems—from pandemics and transnational terrorism to environmental crises and rising poverty—leaders around the world took a firmer grip on power. At first, the notion of a more controlled world gained wide acceptance and approval. Citizens willingly gave up some of their sovereignty—and their privacy—to more paternalistic states in exchange for greater safety and stability. In developed countries, this heightened oversight took many forms: biometric IDs for all citizens, for example, and tighter regulation of key industries whose stability was deemed vital to national interests.' The Rockefeller Foundation, *Scenarios for the Future of Technology and International Development*, Report of May 2010, pp. 18-19.

43 See Gretchen Schafft, *From Racism to Genocide: Anthropology in the Third Reich*, Urbana: University of Illinois Press (2004) pp. 47–58; Jan A. Witkowski, 'Charles Benedict Davenport, 1866–1944,' in Jan A. Witkowski and John R. Inglis, eds., *Davenport's Dream: 21st Century Reflections on Heredity and Eugenics*, Cold Spring Harbor Laboratory Press (2008) p. 52.

medical bureaucrats ignore and censor the pleas of pioneering scientists and doctors, particularly experts in the treatment of COVID-19⁴⁴ or scientists/virologists/immunologists⁴⁵ whose specialty lies in the field of novel gene technology and vaccine development, who are risking their livelihoods and reputations to warn us daily about the number of injuries and deaths, and the facilitation of more virulent disease?

Finally, **Reason** (*Ratio*) refers here to the ability to reflect about practical matters, sometimes in depth, and to apply universal practical principles in order to come to a judgment on a given situation. In-depth reflection brings up a lot of unanswered questions: is it rational to continue to oppress the world's population while ignoring proven medical and long-standing pandemic preparedness principles in favour of novel and unscientific ideas such as mask-wearing, social distancing and lockdown of the healthy⁴⁶? The most vaccinated nations are those which continue to have escalating cases and deaths from COVID-19.⁴⁷ Yet, developing and Third World nations with vaccination rates as low as 5%, but open availability of ivermectin and hydroxychloroquine, have dropped their cases to a mere 100⁴⁸.

How can we, without a serious lack of prudence, continue pushing the 'vaccines' when we know these results? These are the questions a prudent person must ask. Nor is it an option to reply that our governments could not possibly want to harm us. Numerous governments have done just that in the course of the last century.⁴⁹ We must continue to ask the hard questions, at whatever personal risk to ourselves. The future of humanity may depend upon our having the courage to do so. Human beings are endowed universally with an intrinsic right to life and liberty. They are not guinea pigs. When a man no longer has any say over what is done with his body, he is by definition a slave. And when freedom is taken away, it is rarely recovered in a peaceful manner.

Q. What conclusion can we draw from all this?

If we summarise what we know from the cardinal virtue of prudence, we can point out the following: Since these 'vaccines' have been put onto the market after only superficial testings, there is no *memory* available to which we can refer. *Foresight* is not possible except with adequate long-term safety and toxicity data. Hasty marketing denotes a serious lack of *caution*, and the oppressive mandates beg the question of ulterior motives. Practical common sense (*reason* and *understanding*) makes it clear that the mandating of experimental drugs is a grave mistake. The whole process, combined with the suppression of highly effective treatment options which then allow the 'vaccines' to be used under 'Emergency Use Authorisation', reveals a frightening lack of *docility* towards the numerous brilliant members of the medical profession who are speaking out about the dangers of the 'vaccines'. *Shrewdness* and *circumspection* both tell us that in this case due diligence has not been done, and hint at a darker agenda at play.

In light of the above one can safely conclude that receiving any of the COVID-19 'vaccines' presently available is an imprudent decision.

Q. Is this imprudence a serious sin?

Every rational adult person has the duty to gather information and to make the right decisions that affect his/her life and those of others. There are several ways of sinning through lack of prudence:

- 1) by acting precipitately, without taking the time to consider the situation and ask the right questions;
 - 2) by acting rashly and with too much confidence in one's own vision;
 - 3) by thoughtlessness, not really caring enough to go through the labour of making an informed decision;
 - 4) by inconstancy, by not following through with what one perceived was the right course of action.
- These actions against prudence are, in principle,

44 E.g. Drs Pierre Kory, Vladimir Zelenko, Shankara Chetty, Joseph Varon, Jose Inglesias and Professors. Paul Marik, Peter McCullough, Thomas Borody

45 Drs Robert Malone (inventor of mRNA technology, virologist), Luc Montagnier (Nobel Laureate), Mike Yeadon (Former Chief Scientist of Pfizer, 30 years vaccine development), Geert Van Den Boscche, Sucharit Bahkti, Prof. Dolores Cahill etc

46 <https://evidencenotfear.com/>

47 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8481107>

48 <https://covid19criticalcare.com/ivermectin-in-covid-19/epidemiologic-analyses-on-covid19-and-ivermectin/>

49 To name only the most well-known: the Soviet Gulag, the Nazi, Chinese, Cambodian, Turkish, Pakistani and Rumanian genocides. Cf. R. J. Rummel, *Death by Government*, Transaction Publishers, 2008.

venial sins, but if they result in grave harm to ourselves or others, they could be mortal sins. For example, if someone clearly perceives that the consequences could be serious, and nevertheless were to make a quick decision just to get it over with, they would be committing a mortal sin, because they would be accepting what they clearly see as possible grave consequences. Like the reckless driver overtaking with no visibility, they accept by their grave imprudence the real possibility of death. Or, the man playing Russian roulette: even if the shot is a blank, he has committed a mortal sin because he took his life into his own hands out of thoughtlessness or peer pressure.

Q. But what about our livelihoods? Would it not be more prudent to take the job, hope that we won't be adversely affected, and continue to provide for our families?

The vaccination mandates pose a real problem of conscience for those whose livelihood depends on their profession, especially for those with large families. The decision will be a difficult one, and must be guided by prudence. Taking into consideration:

- 1) the conclusion of Article 1 in this series, which demonstrated that accepting these 'vaccines' in most cases is gravely sinful due to the derivation of the 'vaccines' from aborted fetuses and the lack of serious reasons that would justify material cooperation in that evil;⁵⁰
 - 2) the very real danger of death, serious injury, or total dependence on future boosters whose effects could be nothing short of disastrous;⁵¹
 - 3) the high risk of various immunological phenomena⁵² (such as ADE) or even a pseudo-AIDs syndrome, according to many serious virologists and doctors;
- it would seem that even to maintain one's livelihood, it is gravely imprudent to take the job.

Indeed, of what use is a dead or incapacitated father to his family? The risk seems to be disproportionate. While it is certainly permissible at times to take a risky course of action simply because otherwise we will die (like a surgeon who will attempt an extreme procedure when it is a matter of life or death), this hardly seems to be the case here. There are other ways of providing

for basic needs, even though our quality of life might make us think that we cannot live without a thousand commodities. It is certainly not justifiable to take the job just to keep the extra car or house, the paid holidays or the social and professional prestige...

The prudential course of action seems rather to plan for the future to sustain oneself by other means or in another profession. This may involve moving to another place, out in the country, where it is possible to actually grow and hunt food. This tactic has been consistently employed in times of impending persecution as far back as the Maccabees. This is all the more advisable today when life is dependent upon the very fragile provision of food imported from elsewhere. Prudent parents will ask themselves what a large city would be like if, for example, a lack of fuel were to make it impossible for the trucks to reach the stores. Imagine a single week without the thousands of trucks providing food? Wide scale famine is a very serious possibility today, and the only people who would survive are those living in the country.

The gravity of the situation requires a spirit of generosity and sacrifice which every Christian soul has a duty to pray and work for. More importantly still, a God-fearing person will place total trust in the Lord and His Blessed Mother. When one chooses to obey the voice of conscience and resist pressure, the Lord provides. *My children, behold the generations of men: and know ye that no one hath hoped in the Lord, and hath been confounded* (Eccli 2:11).

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⁵⁰ <https://www.lumenfidei.ie/conscience-vaccines/>

⁵¹ <https://www.sciencedirect.com/science/article/pii/S221475002100161X>

⁵² <https://www.mdpi.com/1999-4915/13/10/2056/htm>