

Post Vax/Long Covid Congress - DAY 2

Saturday & Sunday 26th & 27th August, 2023 @ 18:00 UK time



Dr Philip McMillan

Presenters



Joachim Gerlach



Dr Shankara Chetty



Dr Beate Jaeger



Dr Mannan Baig



Dr Tina Peers



Dr Carlo Brogna



Dr Robin Rose



Rachel Jessey MSc



Kevin McCairn PhD



Stephanie Schreff PhD



Prof Hans Rausch



Christie Grace



Charles Rixey MBA

Dal vivo tra 2 giorni.
27 agosto alle ore 19:00

Notifica attivata



Faith or Science

Everything you need to know from the perspective of the microbiome



Fede o Scienza

Tutto quello che bisognerebbe sapere dal punto di vista del microbioma

If you want to understand this lesson better, you can watch Dr. Been's video at the following address:

Se vuoi capire meglio questa lezione puoi vedere il video del Dr. Been al seguente indirizzo:

<https://www.youtube.com/watch?v=IhXQcCtD9x0>

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[Publication at:](#)

<https://pubmed.ncbi.nlm.nih.gov/?term=brogna+carlo>



We have experienced in the last 3 years (2020-2022) the COVID-19 pandemic.

We have learned what a lockdown is, what it means to lose jobs, friends, and have sad experiences:

Parents who did not see their children return from hospitals and children who could not hug their parents before they died.

Three years later, SARS-CoV-2 is still there, we read about new mutations all the time, and we seem to have forgotten all the restrictions we have experienced.

During the three years we were reassured because our governments relied on what they called Science.

Time and again we heard: *Science will win*; or: *We are running at the speed of Science*.

No one has asked: WHO is Science; who is self-proclaimed Science? ; what does it look like?

When questioned, companies that have pledged to present immediate solutions have replied that their dossiers have been approved by regulatory bodies.

When the regulators were questioned and what checks they made on the solutions dispensed to the people, they said it was all controlled by the manufacturing companies.

In other words, no one checked anything, and no one could answer.



Abbiamo vissuto negli ultimi 3 anni (2020-2022) la pandemia COVID-19. Abbiamo imparato cosa sia un lockdown, cosa significa perdere il lavoro, gli amici e abbiamo vissuto esperienze tristi: Genitori che non hanno rivisto tornare i figli dagli ospedali e figli che non hanno potuto abbracciare i genitori prima della loro morte. A distanza di 3 anni, il SARS-CoV-2 c'è ancora, leggiamo continuamente di nuove mutazioni e sembra che abbiamo dimenticato tutte le restrizioni subite. Durante i tre anni ci hanno rassicurato perché i nostri governi si sono affidati a quella che hanno definito Scienza. Più volte abbiamo sentito dire: *La Scienza vincerà*; oppure: *Stiamo correndo a velocità della Scienza*. Nessuno si è chiesto: Chi è la Scienza?, chi si è autoproclamato Scienza? ; che faccia ha? Quando interrogate le aziende che si sono impegnate a presentare delle soluzioni immediate hanno risposto che i loro fascicoli sono stati approvati dagli enti regolatori. Quando gli enti regolatori sono stati interrogati e quali controlli hanno effettuato sulle soluzioni dispensate al popolo, hanno affermato che è stato tutto controllato dalle aziende produttrici. In altre parole nessuno ha controllato niente e nessuno ha saputo rispondere.



The importance of the gut microbiome in the pathogenesis and transmission of SARS-CoV-2

Someone on Earth: “..we moved at the speed of Science!” - Science from the center of the Universe: “Hey man, I’m still waiting for you in the 50s!”

Carlo Brogna, Valentina Viduto, Mark Fabrowski, Simone Cristoni, Giuliano Marino, Luigi Montano & Marina Piscopo

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To link to this article: <https://doi.org/10.1080/19490976.2023.2244718>

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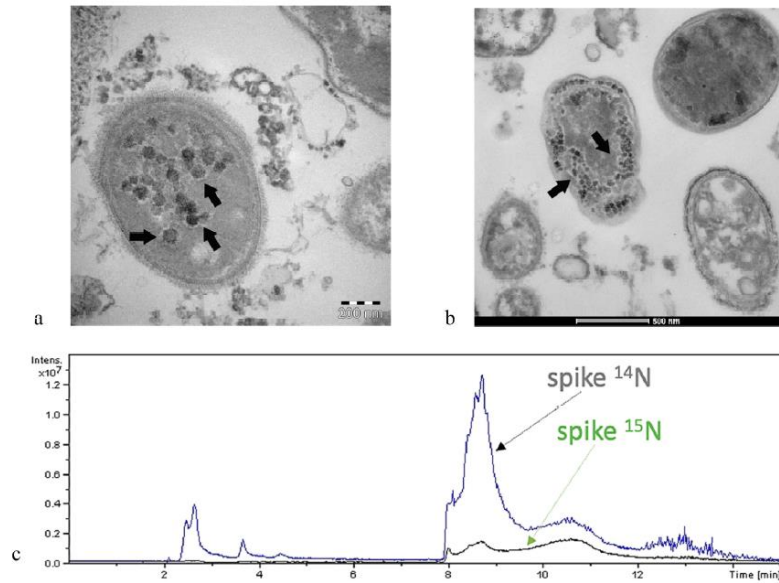


Figure 1. The bacteriophage behavior of SARS-CoV-2. Panels a and b: Transmission electron microscope images (panels a and B, TEM FEI, Thermo Fisher Tecnai G2 operating at 120 kV) show SARS-CoV-2 (indicated by black arrows) inside two bacteria. Panel C: The proteomic profile at mass spectrometry confirms the presence of an abundance of SARS-CoV-2 proteins; Peptide mapping of SARS-CoV-2 spike protein was acquired by means of liquid chromatography-mass spectrometry associated with ¹⁴N and ¹⁵N profiles and performed on an aliquot of bacteria, derived from the human gut microbiome, culture after 7 days with the presence of SARS-CoV-2¹⁰. Images obtained for the gentle concession of the authors¹⁰.

When asked if they tested vaccines to prevent transmission of the virus, they said they were running at the speed of Science.

When asked if they had done geno-toxicity or carcinogenicity checks, or others, they said they were running at the speed of Science.

When asked why those who had done 3 doses of vaccine were getting sick and dying, they said they were running at the speed of Science

In short, how fast is Science going and where is it really?



Quando è stato chiesto se hanno testato i vaccini per impedire la trasmissione del virus, hanno risposto che correvano a velocità della Scienza. Quando è stato chiesto se avessero fatto i controlli di geno tossicità o cancerogenesi, o altri, hanno risposto che correvano a velocità della Scienza. Quando è stato chiesto come mai chi avesse fatto 3 dosi di vaccino si ammalava e moriva, hanno risposto che correvano a velocità della Scienza. Insomma a che velocità va la Scienza e dove si trova realmente?



In our works we have abundantly demonstrated that the real problem is not running at the speed of Science, because countless mistakes have been made. Two are the most important:
The first mistake is having offended the Creator by forgetting that the real Science is Eternal, ancient, before the foundation of the universe it was already present (Christians can understand this point).

The second mistake is not having done all the checks.
Is SARS-CoV-2 a virus? If yes, where does it replicate? Only on the laboratory eukaryotic cell or also on bacterial cells?
Are the bacteria in the microbiome more numerous than our cells? YES! And does it seem normal to you that a virus passes through the microbiome layer without bacteria interacting with the virus or producing different substances than usual?



And these bacteria controls we performed and demonstrated:

- SARS-CoV-2 replicates first in bacteria;
- That orofecal transmission is most important precisely because of the bacterial involvement;
- That the bacteria produce toxins;
- That antibiotics or a combination of antibiotics can stop both replication, transmission, and toxin production and the clinical picture of patients, especially in the early stages of the disease;
- That the intermediate host then is bacteria ;
- That mutations are numerous in bacteria.

Nei nostri lavori abbiamo abbondantemente dimostrato che il vero problema non è correre alla velocità della Scienza, perché sono stati commessi innumerevoli errori di cui Due sono i più importanti: Il primo errore è aver offeso il Creatore dimenticando che la vera Scienza è Eterna, antica, prima della fondazione dell'universo essa era già presente (i Cristiani riescono a capire questo punto).Il secondo errore è non aver fatto tutti i controlli. Il SARS-CoV-2 è un virus? Se si, dove si replica? Solo sulla cellula eucariotica di laboratorio o anche sulle cellule batteriche? I batteri del microbioma sono più numerosi delle nostre cellule? SI! E vi sembra normale che un virus passa attraverso il layer del microbioma senza che i batteri non interagiscono con il virus o che non producano sostanze diverse dal consueto?



E questi controlli sui batteri abbiamo eseguito e dimostrato che: Il SARS-CoV-2 si replica prima nei batteri; che la trasmissione orofecale è importantissima proprio per l'interessamento batterico; Che i batteri producono delle tossine; Che degli antibiotici o una combinazione di antibiotici può arrestare sia la replicazione, sia la trasmissione, e sia la produzione di tossine e del quadro clinico dei pazienti, soprattutto nelle prime fasi della malattia; Che l'ospite intermedio quindi sono i batteri ;che le mutazioni sono numerose nei batteri.

Increase of SARS-CoV-2 RNA load in faecal samples prompts for rethinking of SARS-CoV-2 biology and COVID-19 epidemiology

Mauro Petrillo ¹, Carlo Brogna ², Simone Cristoni ³, Maddalena Querci ¹, Ornella Piazza ⁴, Guy Van den Eede ^{1 5}

Affiliations + expand

PMID: 34336189 PMCID: PMC8283343 DOI: 10.12688/f1000research.52540.3

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> [Biomedicines](#). 2022 Dec 29;11(1):87. doi: 10.3390/biomedicines11010087.

Toxin-like Peptides from the Bacterial Cultures Derived from Gut Microbiome Infected by SARS-CoV-2-New Data for a Possible Role in the Long COVID Pattern

Carlo Brogna ¹, Simone Cristoni ², Barbara Brogna ³, Domenico Rocco Bisaccia ¹, Giuliano Marino ⁴, Valentina Viduto ⁵, Luigi Montano ⁶, Marina Piscopo ⁷

Affiliations + expand

PMID: 36672595 PMCID: PMC9855837 DOI: 10.3390/biomedicines11010087

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Article

Analysis of Bacteriophage Behavior of a Human RNA Virus, SARS-CoV-2, through the Integrated Approach of Immunofluorescence Microscopy, Proteomics and D-Amino Acid Quantification

Carlo Brogna ^{1,*}, Vincenzo Costanzo ², Barbara Brogna ³, Domenico Rocco Bisaccia ¹, Giancarlo Brogna ¹, Marino Giuliano ⁴, Luigi Montano ⁵, Valentina Viduto ⁶, Simone Cristoni ⁷, Mark Fabrowski ⁸ and Marina Piscopo ^{9,*}



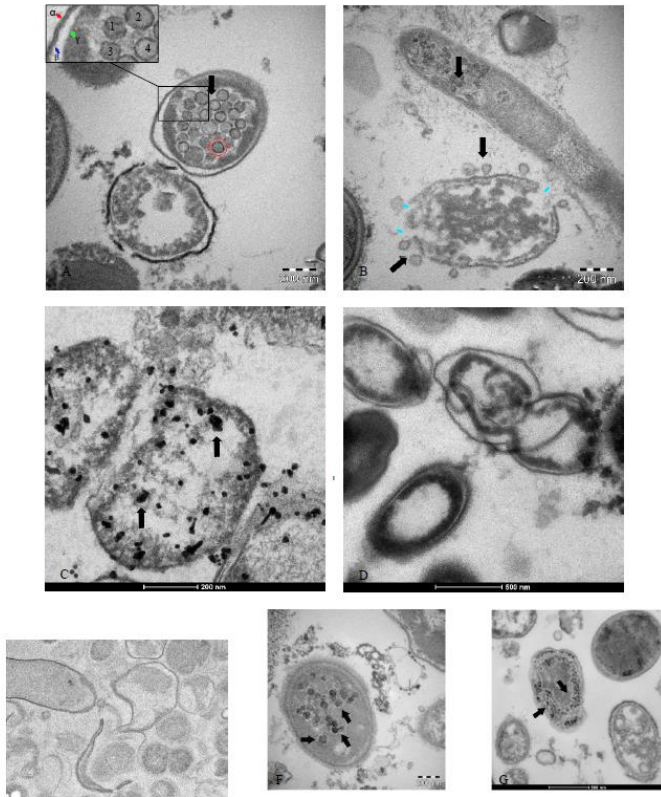


Figure 1: SARS-CoV-2 viral particles within bacteria from bacterial culture. At day 30 of the bacterial culture of one case, the Luminex molecular test confirmed the presence of SARS-CoV-2, and the RNA viral concentration was increased following our previous observations (Petrillo et al. [30]). Transmission electron microscope images (panels A and B - Technai G2 Spirit BioTwin; FEI, equipped with a VELETTA CCD digital camera -Soft Imaging Systems GmbH) SARS-CoV-2 (black arrows) inside a bacterium (A) and outside a matrix resembling extracellular lysate of a bacterium (B, the blue arrows indicate the breaking points of the bacterial wall). No eukaryotic cells have ever been observed after 30 days of bacterial culture. Panel A numbers 1-4 present typical viral particles, α and β : the cellular wall of bacterium; γ inner membrane. Post-embedding immunogold (Panel C, D); Panel D: Negative control of bacterial stool culture of a healthy person after 30 days, without primary antibody with only the secondary antibody. Panel E shows the negative control with primary and secondary antibodies in culture derived from healthy patients. Panels F and G show bacteria with viral particles inside them; Panel H: Peptide mapping of the SARS-CoV-2 spike protein. Peptide mapping of SARS-CoV-2 spike protein was acquired through liquid chromatography-mass spectrometry associated with ^{14}N and ^{15}N profiles and performed on an aliquot of sample positive for SARS-CoV-2.

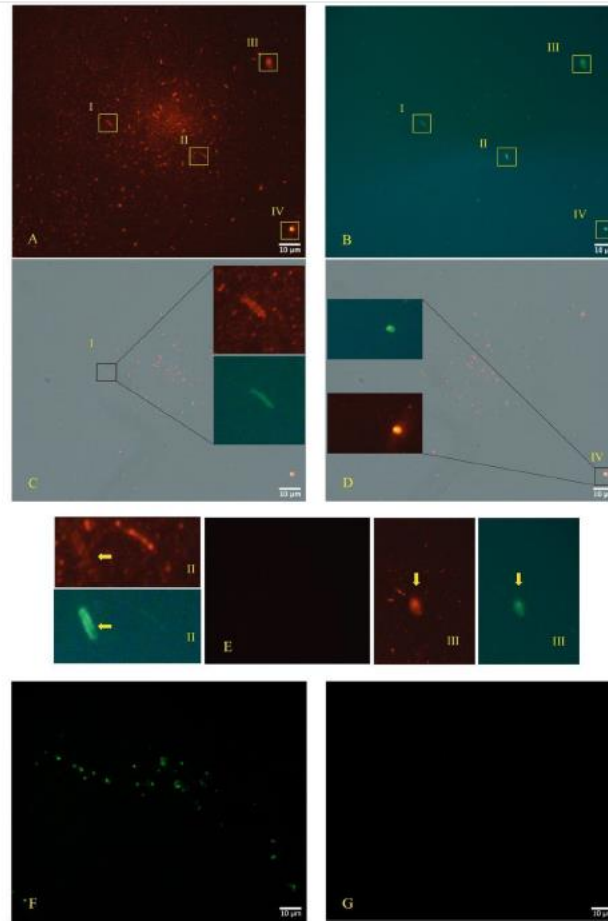


Figure 3: Panels A, B, C, and D (Zeiss Axioplan 2, Axiocam 305 color, magnification 100x) show immunofluorescence staining versus SARS-CoV-2 nucleocapsid protein (red light), gram-positive bacteria (green light). Panel E is the negative control, and panels F and G show a group of gram+ bacteria by fluorescence, derived from the stool bacteria culture of a healthy 18-month-old child (with healthy parents and never ill with SARS-CoV-2 at the time of collection and with and with their written consent) negative to molecular test to SARS-CoV-2. However, the other primary antibody to the nucleocapsid protein is also included and does not show a red signal. The Roman numerals I, II, III, IV, and yellow rectangles indicate four gram-positive bacteria (green light) infected by SARS-CoV-2 (red light).

There is not much to add, we have shown that SARS-CoV-2 replicates and colonizes bacteria and that is why it stays in our intestines for a long time. And this is the same reason why antibiotic therapy is justified in the individual subject.



Non c'è molto da aggiungere, abbiamo dimostrato che il SARS-CoV-2 si replica e colonizza i batteri ed è per questo che rimane nel nostro intestino per molto tempo. Ed è lo stesso motivo per cui è giustificata la terapia antibiotica nel singolo soggetto.



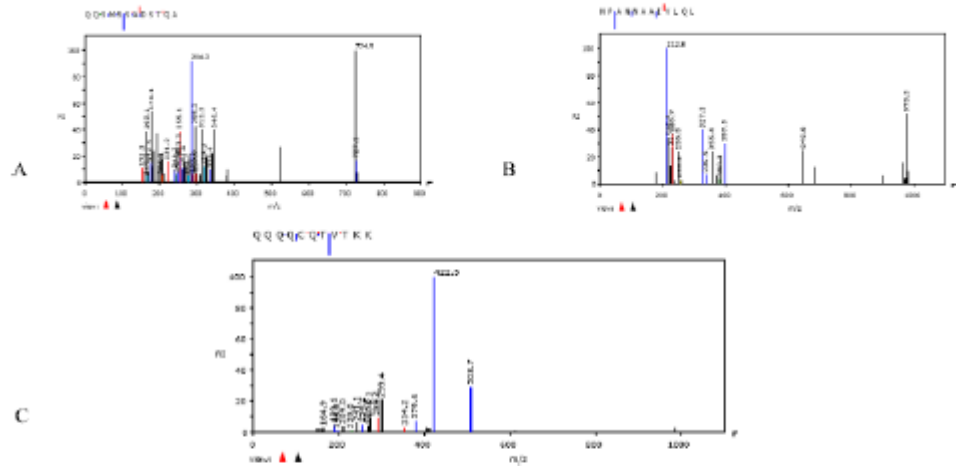


Figure 5. Panels (A-C): show the MS/MS spectra of the nucleocapsid protein of SARS-CoV-2 containing the nitrogen Isotope. Panel (A) shows peptide seq: QQSMSSADSTQA; ID: |A0A8B1JYE4|A0A8B1JYE4_SARS2; Mods: Q408 + 1 (¹³C) + 2 (¹⁵N), Q409 + 1 (¹³C) + 2 (¹⁵N). Panel (B) shows peptide seq: NPANNAAIIVLQL; ID: A0A7M1YDW6|A0A7M1YDW6_SARS2; Mods: Q160 + 1 (¹³C) + 2 (¹⁵N). Panel (C) shows peptide seq: QQQQCQTVTKK; ID: |A0A8B1XSI6|A0A8XSI6_SARS2; Mods: Q239 + 1 (¹³C) + 2 (¹⁵N), Q239+Ammonia-loss, Q240 + (¹³C) + 2 (¹⁵N), Q241 + 1 (¹³C) + 2 (¹⁵N), Q242 + 1 (¹³C) + 2 (¹⁵N), Q244 + 1 (¹³C) + 2 (¹⁵N)

The use of the nitrogen radio-isotope N15 in bacterial cultures with SARS-CoV-2 and its finding by mass spectrometry in virus proteins after 7 days of culture definitely reaffirms the presence within the bacteria of the virus



L'utilizzo del radioisotopo dell'azoto N15 nelle culture batteriche con il SARS-CoV-2 e il suo ritrovamento alla spettrometria di massa nelle proteine del virus dopo 7 giorni di cultura definitivamente ribadisce la presenza all'interno dei batteri del virus



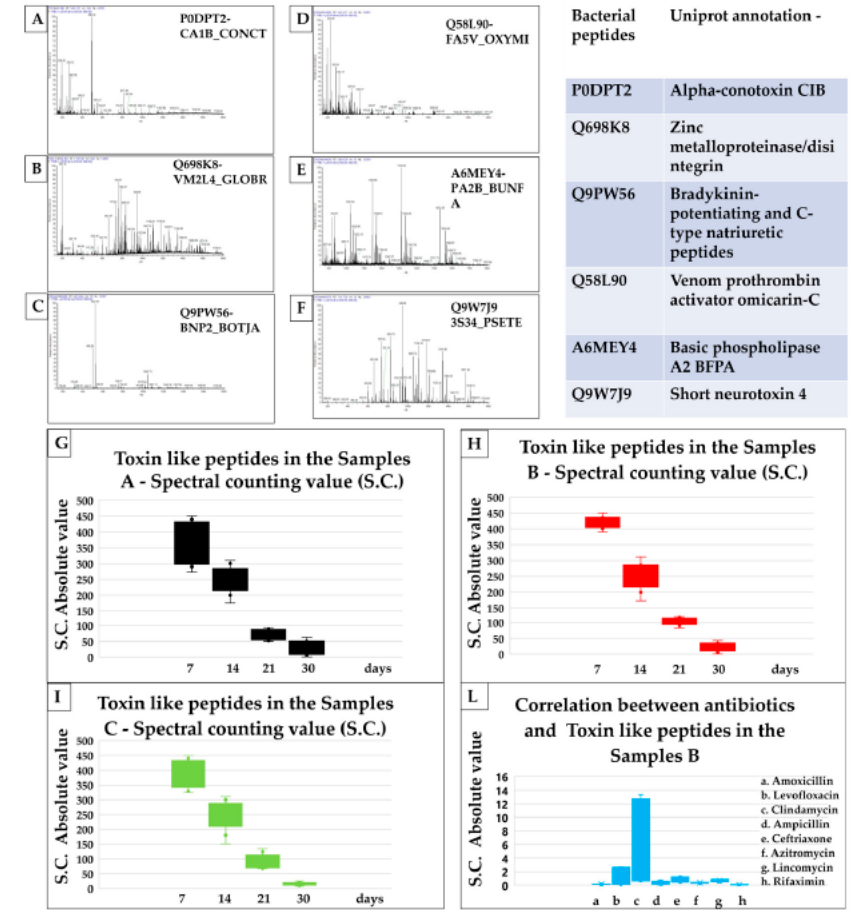
Table 1. Antibiotics are used in bacterial samples. Legend for viral RNA load: + slight increase, ++ marked increase; ---- decrease of viral RNA load 100%; --- decrease of viral RNA load 65–85%, -- decrease of viral RNA load 64–40%, - decrease of viral RNA load 39–25%. Legend for toxin aspect: + Slightly present, ++ moderately present, +++ very present. For more info, see Figure 3 of Petrillo et al. [34].

Drugs	Viral RNA Load	Toxins Aspect
Rifaximin	Decrease -	Not present
Azithromycin	Decrease ----	Present +
Erythromycin	Increase +	Present ++
Metronidazole	Decrease ----	Present ++
Clindamycin	Not change	Present +++
Lincomycin	Increase +	Present +++
Piperacillin + tazobactam	Decrease -	Present +
Vancomycin	Decrease ----	Present +
Amoxicillin	Decrease ----	Present +
Ampicillin	Decrease --	Present +
Cefixime	Decrease ---	Present +
Ceftriaxone	Decrease --	Present +
Meropenem	Decrease -	Present ++
Gentamicin	Decrease -	Present ++
Ciprofloxacin	Decrease --	Present ++
Colistin	Increase +	Present ++
Teicoplanin	Decrease --	Present +
Levofloxacin	Increase ++	Present ++

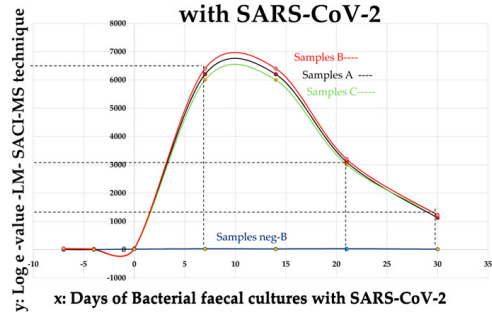
We have shown how toxins are produced by bacteria in the presence of the virus and continue to produce even once the higher concentration of the virus is removed, showing that it is more of a bacterial mechanism that once activated continues. and this could make sense of the Long Covid. We have shown how a combination of antibiotics can stop both viral replication and toxin production by the microbiome.



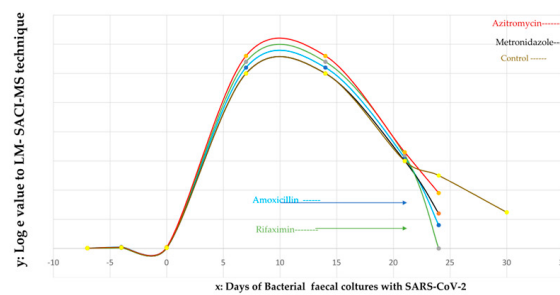
Bacterial peptides produced in faecal cultures with SARS-CoV-2



M Toxin like peptides production in bacterial cultures with SARS-CoV-2

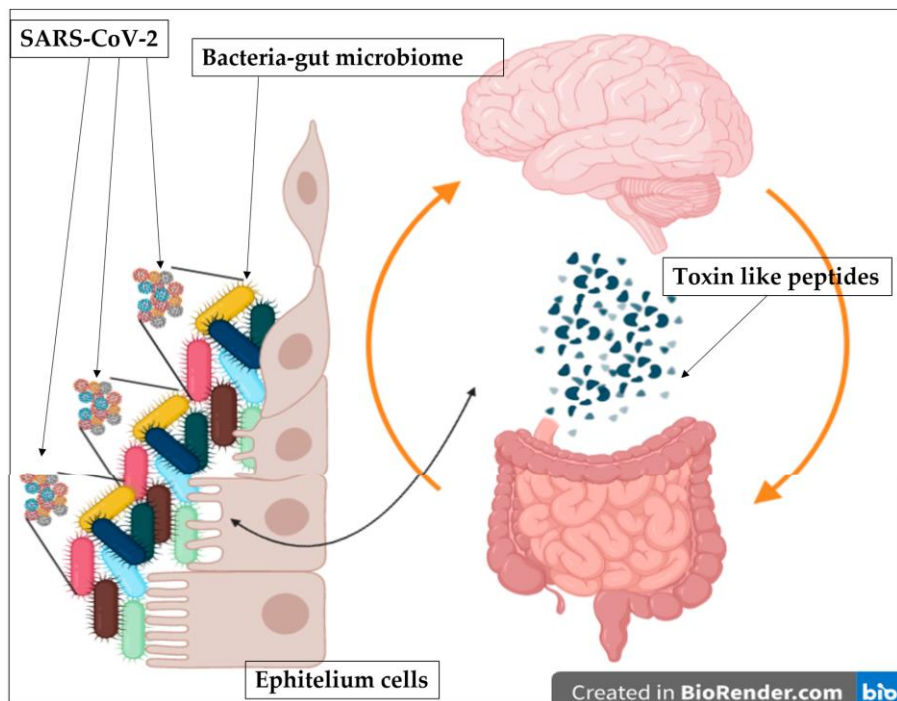


N Decrease of the Toxins like peptides production



Abbiamo dimostrato come le tossine sono prodotte dai batteri in presenza del virus e continuano a produrre anche una volta che la maggiore concentrazione del virus è rimossa, dimostrando che si tratta più di un meccanismo batterico che una volta attivato continua. e questo potrebbe dare senso al Long Covid. Abbiamo dimostrato come una associazione di antibiotici possa arrestare sia la replicazione virale che la produzione di tossine da parte del microbioma.





The presence of toxin-like proteins produced to bacteria, turns out to be an increasingly pronounced finding. Their presence in *Ed* neuronal cells in vitro results in a synergistic effect in the up or down activations of certain genes during neuronal development. More information you can read in our paper.

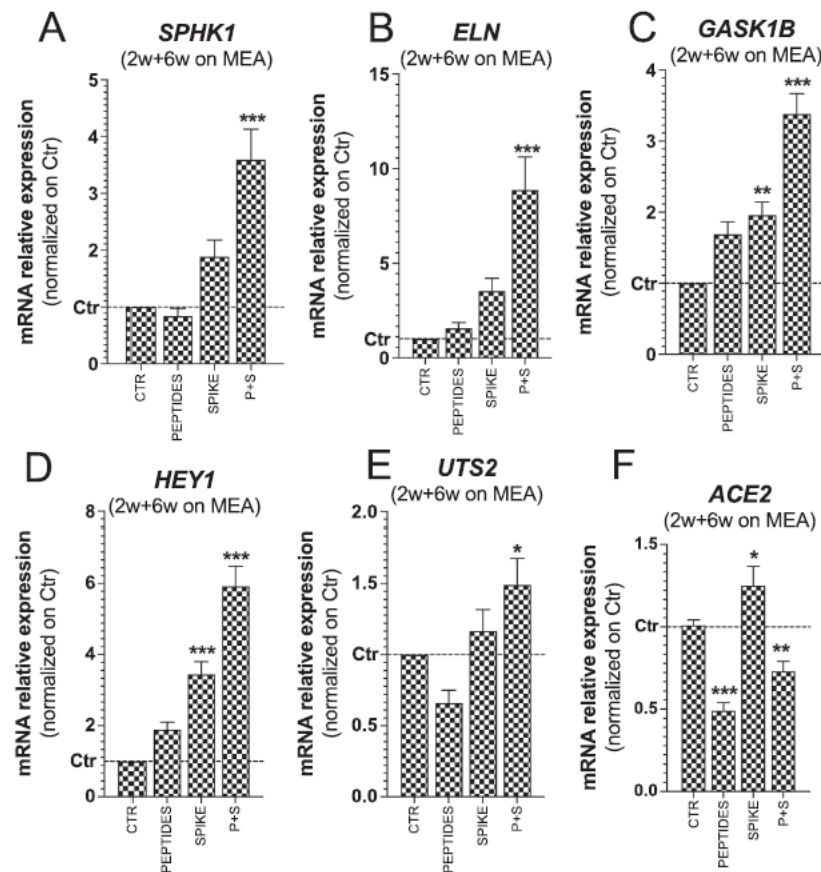


Fig. 4. Effects of spike protein and toxin-like peptides on *SPHK1*, *ELN*, *GASK1B*, *HEY1*, *UTS2* and *ACE2* expression in long-term differentiated cultures. (A-F) Bar graphs showing expression of *SPHK1*, *ELN*, *GASK1B*, *HEY1*, *UTS2* and *ACE2* in long-term differentiated cultures exposed for 72 h to toxin-like peptides alone (0.548 $\mu\text{g}/\text{mL}$), spike protein alone (10 $\mu\text{g}/\text{mL}$) and a combination of both (P + S) vs Control. Data were normalized to reference genes *ACTB* and *GAPDH*, and further normalized to Ctr (mean \pm S.E.M. of 3 biological replicates).

[Reprod Toxicol. 2022 Aug;111:34-48. doi: 10.1016/j.reprotox.2022.04.011. Epub 2022 May 5.](#)

Effects of spike protein and toxin-like peptides found in COVID-19 patients on human 3D neuronal/glial model undergoing differentiation: Possible implications for SARS-CoV-2 impact on brain development

Francesca Pistollato ¹, Mauro Petrillo ², Laure-Alix Clerbaux ³, Gabriele Leoni ⁴, Jessica Ponti ³, Alessia Bogni ³, Carlo Brogna ⁵, Simone Cristoni ⁶, Remo Sanges ⁷, Emilio Mendoza-de Gyves ³, Marco Fabbri ³, Maddalena Querci ³, Helena Soares ⁸, Amalia Munoz ³, Maurice Whelan ³, Guy Van de Eede ⁹

Affiliations + expand

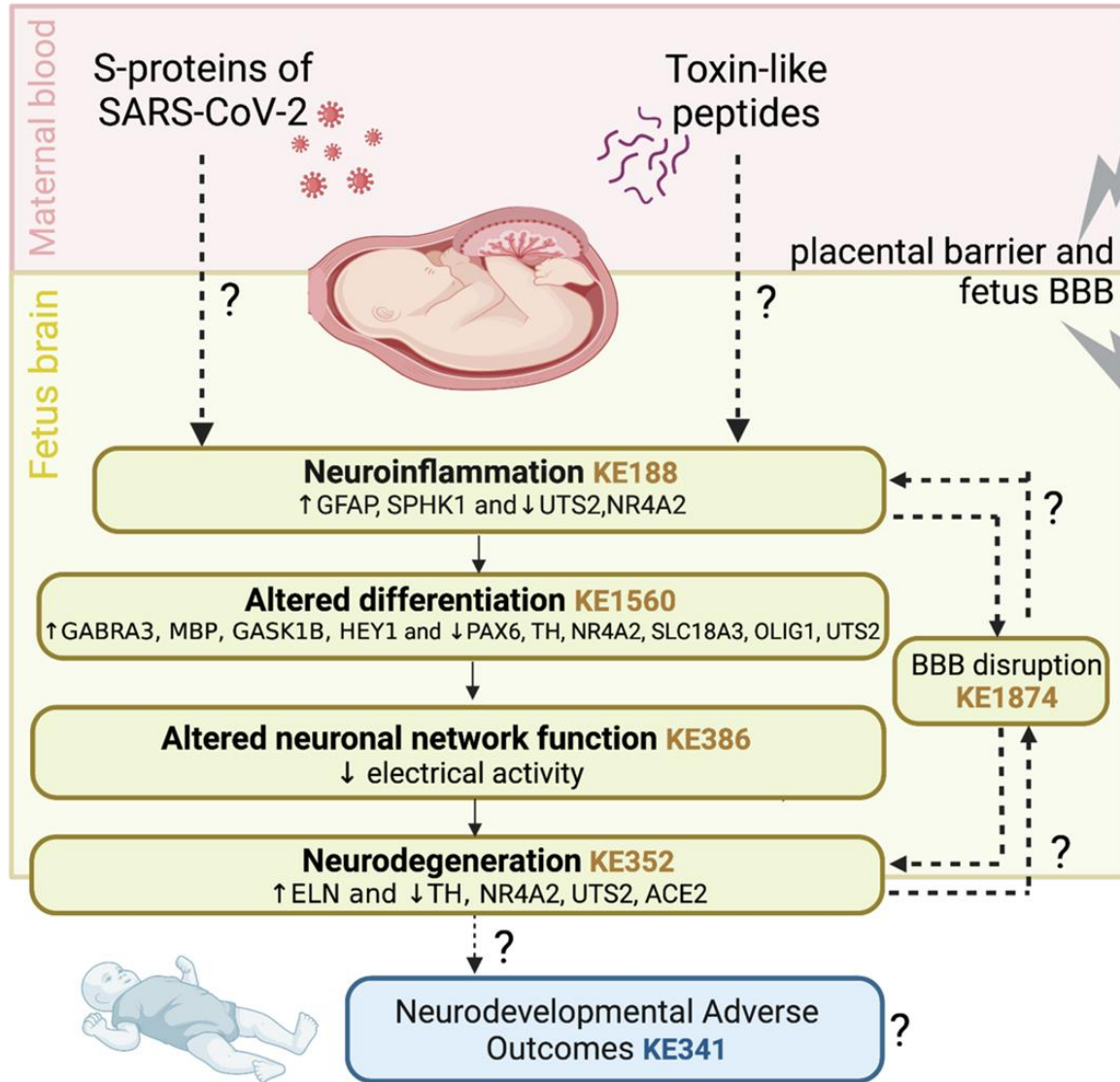
PMID: 35525527 PMCID: PMC9068247 DOI: 10.1016/j.reprotox.2022.04.011

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La presenza di proteine simili a tossine prodotte ai batteri, risulta essere un dato sempre più marcato. La loro presenza nelle cellule neuronali *Ed* in vitro determina un effetto sinergico nella up or down attivazioni di alcuni geni durante la fase di sviluppo neuronale. Maggiori informazioni potete leggerle nel nostro lavoro.



Symptomatic COVID-19 positive mothers



Modulating factors:
 cytokine storm, high/prolonged fever, hypoxia, hypertension, medication, age, diet, co-morbidities, pollutants ...

Quindi la presenza del Coronavirus e delle sue proteine in associazione con le tossine prodotte dai batteri ha effetto modulatore sull'espressione dei geni nelle cellule neuronali e può condizionare in senso negativo lo sviluppo dell'embrione.

Cosa fare in gravidanza se si contrae il COVID-19: nessuna paura..... Amoxicillina e acido clavulanico o altri antibiotici. Dati in preparazione



Thus, the presence of Coronavirus and its proteins in association with toxins produced by bacteria has a modulatory effect on gene expression in neuronal cells and may adversely affect the development of the embryo.

What to do in pregnancy if you contract COVID-19: no fear..... Amoxicillin and clavulanic acid or other antibiotics. Data in preparation



Is only SARS-COV-2 replicated by bacteria or other RNA viruses as well? The problem is just this, for more than 70 years in medicine, the science of man, the one that runs so fast, has forgotten to do the control Between viruses and bacteria.....Man's science stopped in the 1950s.

In the lower, left image, all of you see for the first time the mass spectrometry data and the finding Of the Nitrogen isotope N15, in poliovirus proteins, put into the culture of bacteria from the from the microbiome of polio patients.

Poliovirus also replicates in bacteria. Work in review.

At right is a chart by Dr. Sabin: Those immunized with Sulk's injection vaccine transmitted poliovirus in their feces.

While his vaccinees like the naturally healed did not. Why? His vaccine was attenuated virus

with favorable strain. So his oral vaccine simulated the infection but in a more attenuated way. So the vaccine of Sabin anticipated the infection and in a sense accelerated the epidemic.



Solo il SARS-COV-2 è replicato dai batteri o anche altri virus a RNA? Il problema è proprio questo, per oltre 70 anni in medicina la scienza dell'uomo, quella che corre tanto veloce, si è dimenticata di fare il controllo

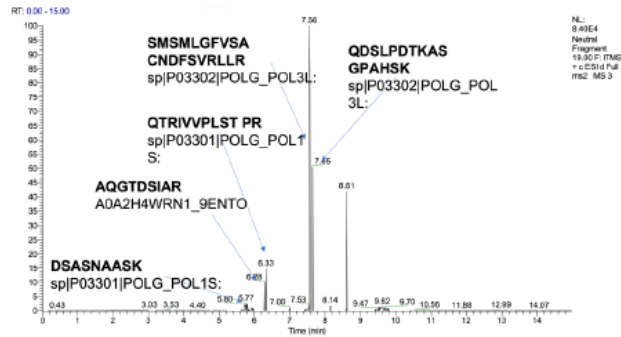
Tra virus e batteri.....La scienza dell'uomo si è fermata agli anni 50. Nell'immagine in basso a sinistra vedete per la prima il dato della spettrometria di massa e il ritrovamento

Dell'isotopo dell'Azoto N15, nelle proteine del poliovirus, messo nella cultura di batteri proveniente dal microbioma di pazienti poliomiolitici.

Anche il Poliovirus si replica nei batteri. Lavoro in revisione.

A destra una tabella del Dr. Sabin: Gli immunizzati con il vaccino iniettivo di Sulk, trasmettevano nelle feci il poliovirus

Mentre i suoi vaccinati come i guariti naturalmente no. Perché? Il suo vaccino era a virus attenuato con strain favorevole. Quindi il suo vaccino orale simulava l'infezione ma in maniera più attenuata. Quindi il vaccino di Sabin anticipava l'infezione e in un certo senso accelerava l'epidemia.



POL A: Nitrogen peptides detected in neutral loss

Figure 6: POL A sample, peptides containing labeled Nitrogen peptides detected in neutral loss conditions and considering the Proton rearrangement phenomenon.

Table 1: Sabin reported data on poliovirus replication in feces despite the preview of

Salk's vaccination in the volunteers.

TABLE V of [16] -EFFECT OF FEEDING 10⁶ P.F.U. OF TYPE 1 ATTENUATED

POLIOVIRUS (L SC STRAIN) TO VOLUNTEERS WITH:

- 1) NO HOMOTYPIC ANTIBODY
- 2) ANTIBODY ACQUIRED FROM 2 DOSES OF THE SALK VACCINE
- 3) NATURALLY ACQUIRED ANTIBODY

(*21+ - Volunteer Fed Another Type of Poliovirus and Excretion of Type 1 was Interfered with.)

Group	N° volunteers	N° excreted virus	N° of days each excreted virus	Peak Virus Titers in Stool Log10, TCD50, per Gram
NO ANTIBODY	11	11	10,10,10,21+*	3.7, 3.7, 3.7, 3.7,
			25+,26+,26+,41.7	4.2,4.2,4.2,4.2,4.2
Antibody after Salk vaccine	8	8	9,10,10,13,14,	2.7, 3.2, 3.4,3.7
			21+,26+,42	4.2,4.2, 4.7,4.7
Naturally acquired antibody	8	1	10	4.2



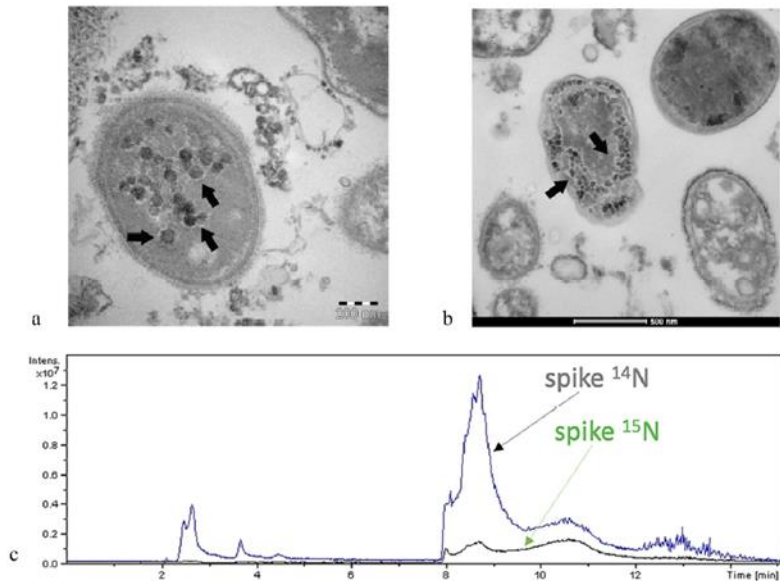
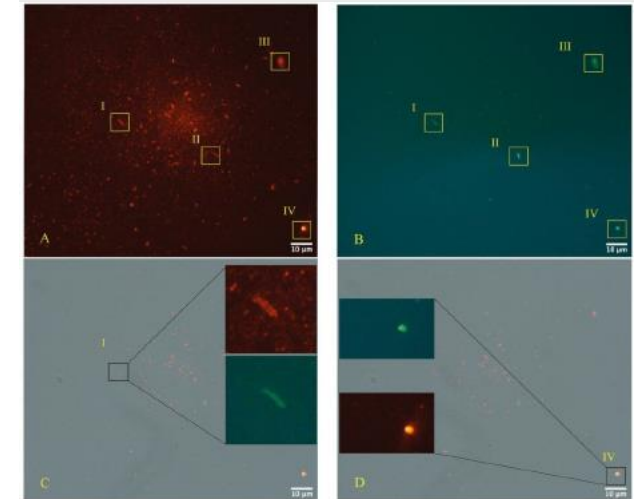
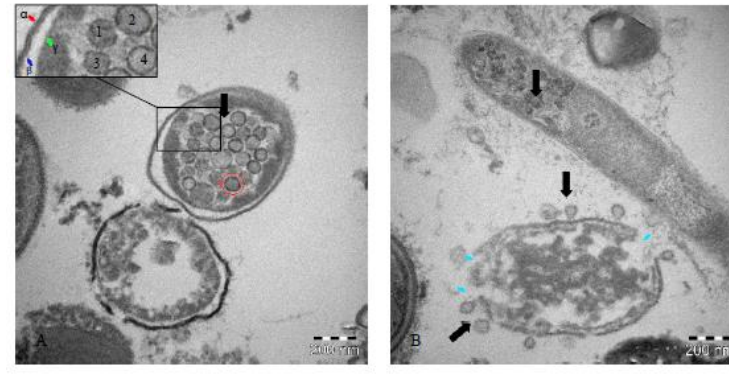


Figure 1. The bacteriophagic behavior of SARS-CoV-2. Panels a and b: Transmission electron microscope images (panels a and B, TEM FEI, Thermo Fisher Tecnai G2 operating at 120 kV) show SARS-CoV-2 (indicated by black arrows) inside two bacteria. Panel C: The proteomic profile at mass spectrometry confirms the presence of an abundance of SARS-CoV-2 proteins; Peptide mapping of SARS-CoV-2 spike protein was acquired by means of liquid chromatography-mass spectrometry associated with ^{14}N and ^{15}N profiles and performed on an aliquot of bacteria, derived from the human gut microbiome, culture after 7 days with the presence of SARS-CoV-2⁴⁻¹⁰. Images obtained for the gentle concession of the authors⁴⁻¹⁰.



In conclusion:.....never forget to check on Bacteria for every other virus.
It should be the first real postulate.... And it should be applied first of Kock's postulates.



For the next pandemics.....never fear again..... The newer a pathogen is the more there will be microbiome and bacterial involvement.

In conclusione:.....mai dimenticare di fare il controllo sui Batteri per ogni altro virus.
Dovrebbe essere il primo vero postulato.... E dovrebbe essere applicato primo dei postulati di Kock.



Per le prossime pandemia.....nessuna paura mai più..... Più sarà nuovo un patogeno tanto più ci sarà un coinvolgimento del microbioma e dei batteri.



Thank you

God is the Science

