

# Natural Immunity Protects You More Than Three mRNA COVID Jabs

Analysis by [Dr. Joseph Mercola](#)

✓ Fact Checked

September 14, 2022

## STORY AT-A-GLANCE

- › Natural COVID-19 immunity – the type earned by recovering from infection – is not only effective but lasts longer than the immunity that’s acquired from COVID-19 shots
- › Two doses of Pfizer’s COVID-19 shots (BNT162b2) offered only “negligible” protection against symptomatic BA.2 (an omicron subvariant) infection
- › In contrast, previous infection was 46.1% effective against symptomatic BA.2 infection
- › Previous infection (natural immunity) was 54.9% effective against symptomatic omicron infection after more than 12 months, while three doses of Pfizer’s COVID-19 shot was only 44.7% effective a month later
- › Rather than admitting defeat, health officials and Big Pharma have committed to a seemingly never-ending rollout of boosters – and now “updated boosters” coming out in Fall 2022
- › Vaccine mandates still exist, including for many health care workers who may be terminated from their jobs if they refuse; it’s outrageous that natural immunity is still being ignored in these cases

Throughout the pandemic, government officials refused to acknowledge that prior infection with COVID-19 results in natural immunity – immunity that’s superior to that achieved via a COVID-19 shot. In a White House briefing held in July 2022, Dr. Anthony Fauci continued to spread the myth that you can’t rely on natural immunity, stating,

“Immunity wanes, whether that’s immunity following infection or immunity following vaccine.”<sup>1</sup>

Yet, research published in The New England Journal of Medicine (NEJM)<sup>2</sup> makes it quite clear that natural immunity – the type earned by recovering from infection – is not only effective but lasts longer than the immunity that’s acquired from COVID-19 shots.<sup>3</sup>

What’s more, prior COVID-19 infection – i.e., natural immunity – offered better protection against symptomatic omicron infection more than one year later than three doses of COVID-19 shots did after one month.

To put it into numbers, previous infection was 54.9% effective against symptomatic omicron infection after more than 12 months, while three doses of Pfizer’s COVID-19 shot was only 44.7% effective a month later. The same held true for three doses of Moderna’s COVID-19 shot, which was only 41.2 % effective after one month, compared to 53.5% effectiveness for natural immunity more than a year later.<sup>4</sup> Why isn’t this being shouted from the rooftops?

## **Natural Immunity Shows ‘Strong Effectiveness’ Against COVID**

The NEJM study was conducted in Qatar from December 23, 2021, through February 21, 2022. It set out to evaluate the effectiveness of Pfizer’s and Moderna’s COVID-19 shots, natural immunity due to previous infection with COVID-19 variants other than omicron and hybrid immunity, referring to a combination of previous infection and COVID-19 shots.

Two doses of Pfizer’s COVID-19 shots (BNT162b2) offered only “negligible” protection against symptomatic BA.2 (an omicron subvariant) infection. To state it again, the two doses of COVID-19 shots that were, for quite some time, mandated on populations around the world in order to go about their daily lives and livelihoods did virtually nothing to prevent infection. In contrast, previous infection was 46.1% effective against symptomatic BA.2 infection.<sup>5</sup>

As if to explain away the shots' dismal effectiveness, the researchers wrote, "but nearly all persons had received their second dose more than six months earlier."<sup>6</sup> It's a testimony to the shots' failure as "vaccines" that any protection they offer wanes within a matter of months.

Among people who received two doses of shots and had natural immunity from prior infection, effectiveness rose to 55.1%. It would seem logical that most of this protection is derived from natural immunity, since the shots alone offered only "negligible" protection without prior infection.

After three doses of Pfizer's COVID-19 shots, effectiveness rose to 52.2%, which was bolstered by natural immunity gained from previous infection, rising to 55.1% in those with three doses of shots and natural immunity. Overall, the researchers pointed out:<sup>7</sup>

*"Previous infection alone, BNT162b2 vaccination alone, and hybrid immunity all showed strong effectiveness (>70%) against severe, critical, or fatal Covid-19 due to BA.2 infection ... No discernable differences in protection against symptomatic BA.1 and BA.2 infection were seen with previous infection, vaccination, and hybrid immunity."*

## **Shots Offer Rapidly Waning Protection**

In case it wasn't clear by the calls for boosters, second boosters and more boosters, most protection gained from COVID-19 shots doesn't last. The NEJM study concluded, "Hybrid immunity resulting from previous infection and recent booster vaccination conferred the strongest protection."<sup>8</sup> However see the key word – "recent." In a news release from Weill Cornell Medicine, it's noted:<sup>9</sup>

*"Overall, the analysis suggested – consistently with prior studies – that mRNA vaccines and boosters work fairly well in protecting against symptomatic omicron infection, though their protective effect wanes rapidly and disappears within six months or so."*

Other studies have also highlighted the fact that booster shots only work for a short period, including a CDC-funded study that involved data from 10 states collected from August 26, 2021 to January 22, 2022, periods during which both delta and omicron variants were circulating.<sup>10</sup>

Within two months of the second COVID-19 shot, protection against emergency department and urgent care visits related to COVID-19 was at 69%. This dropped to 37% after five months post-shot.

The low effectiveness five months after the initial shot series is what prompted officials to recommend a booster dose — and the third shot “boosted” effectiveness to 87%. This boost was short-lived, however. Within four to five months post-booster, protection against emergency department (ED) and urgent care (UC) visits decreased to 66%, then fell to just 31% after five months or more post-booster.<sup>11</sup>

## **What’s Next? ‘Updated Boosters’**

Rather than admitting defeat, health officials and Big Pharma have committed to a seemingly never-ending rollout of boosters — and now “updated boosters.” August 31, 2022, the U.S. Food and Drug Administration (FDA) amended the emergency use authorizations (EUAs) of Moderna and Pfizer’s COVID-19 shots to authorize bivalent formulations to be used as booster doses at least two months after a previous booster or primary series of the shots.

“The bivalent vaccines, which we will also refer to as “updated boosters,” contain two messenger RNA (mRNA) components of SARS-CoV-2 virus, one of the original strain of SARS-CoV-2 and the other one in common between the BA.4 and BA.5 lineages of the omicron variant of SARS-CoV-2,” the FDA stated.<sup>12</sup>

It was June 2022 when the U.S. Department of Health and Human Services (HHS) announced that it, in partnership with the Department of Defense, had agreed to purchase another 105 million doses of Pfizer’s COVID-19 shot — for \$3.2 billion.<sup>13</sup>

The contract is intended to supply the booster shots for this fall's injection campaign and includes options to purchase up to 300 million doses. The decision came after a June 28 meeting of the FDA's Vaccines and Related Biological Products Advisory Committee (VRBPAC), which recommended that an omicron-specific component be included in COVID-19 booster shots in the U.S.<sup>14</sup>

The shots, which include both adult and pediatric doses, cost more than \$30 per dose, on average, which is a more than a 50% increase from the \$19.50 per dose rate in the U.S. government's initial contract with Pfizer.<sup>15</sup> While Pfizer cited strong antibody responses from its retooled boosters, the booster shot studies do not reveal whether the shots prevent COVID-19 cases or how long they are effective.<sup>16</sup>

Further, human data is only available for Pfizer's boosters targeting BA.1; only animal data is available for the BA.4/BA.5 boosters that are coming September 2022.<sup>17</sup> John Moore, professor of microbiology and immunology at Weill Cornell Medicine, told NPR, "For the FDA to rely on mouse data is just bizarre, in my opinion. Mouse data are not going to be predictive in any way of what you would see in humans."<sup>18</sup>

That's of no matter to Pfizer's investors, to whom the prospect of repeated boosters is tantalizing. According to KFF:<sup>19</sup>

*"[W]hile patients may recoil at the need for repeated injections – two boosters are now recommended for people 50 and older – the requirement is gold for investors. 'Hopefully, we could be giving it annually and maybe for some groups that are high-risk more often,' CEO Albert Bourla told investors this year [2022]. 'Then you have the treatment [Paxlovid] that will, let's say, resolve the issues of those that are getting the disease.'"*

## **'The 800-Pound Gorilla in the Pandemic'**

The suppression of the truth regarding natural immunity from COVID-19 is "the 800-pound gorilla in the pandemic," wrote Daniel Horowitz in an op-ed for Blaze Media.<sup>20</sup>

One of the most talked-about reports showing the superiority of natural immunity involved data presented to the Israeli Health Ministry July 17, 2021, which revealed that, of more than 7,700 COVID-19 cases reported, only 72 occurred in people who had previously had COVID-19 – a rate of less than 1%. In contrast, more than 3,000 cases – or approximately 40% – occurred in people who had received a COVID-19 shot.<sup>21</sup>

In other words, those who were vaccinated were nearly 700% more likely to develop COVID-19 than those who had natural immunity from a prior infection.<sup>22</sup> Speaking with Daniel Horowitz, pathologist Dr. Ryan Cole explained that natural immunity produces broad immunity that can't be matched by vaccination:<sup>23</sup>

*“A natural infection induces hundreds upon hundreds of antibodies against all proteins of the virus, including the envelope, the membrane, the nucleocapsid, and the spike. Dozens upon dozens of these antibodies neutralize the virus when encountered again.*

*Additionally, because of the immune system exposure to these numerous proteins (epitomes), our T cells mount a robust memory, as well. Our T cells are the 'marines' of the immune system and the first line of defense against pathogens. T cell memory to those infected with SARSCOV1 is at 17 years and running still.”*

By August 2021, Horowitz had compiled 15 studies showing natural immunity from prior COVID-19 infection is “more robust” than any protection from COVID-19 shots.<sup>24</sup> He wrote:<sup>25</sup>

*“Among the most fraudulent messages of the CDC's campaign of deceit is to force the vaccine on those with prior infection, who have a greater degree of protection against all versions of the virus than those with any of the vaccines. It's time to set the record straight once and for all that natural immunity to SARS-CoV-2 is broader, more durable, and longer-lasting than any of the shots on the market today. Our policies must reflect that reality.”*

# Casting More Doubt on Vaccine Mandates

Even with the research showing natural immunity to COVID-19 exists – and is more robust than protection from COVID-19 shots – vaccine mandates still exist, including for many health care workers who may be terminated from their jobs if they refuse.<sup>26</sup> It's outrageous that natural immunity is still being ignored in these cases, but progress is being made.

In January 2022, the NCAA's COVID-19 Medical Advisory Group updated its definition of "fully vaccinated" to include "individuals within 90 days of a documented COVID-19 infection."<sup>27</sup>

Dennis McGonagle, a professor of investigative rheumatology at the University of Leeds, also argued in *The Lancet Rheumatology* that health care workers who have recovered from COVID-19 infection should be exempt from vaccine mandates, in part because an "increasing number of studies show marginal, if any, additional benefits of vaccination in individuals with natural immunity."<sup>28</sup>

It's a matter not only of health but also ethics, noted a team of experts in the *Journal of Medical Ethics*, which stated, simply but poignantly:<sup>29</sup>

*"Since vaccine requirements represent a substantial infringement of individual liberty, as well as imposing other significant costs, they can only be justified if they are necessary for achieving a proportionate public health benefit.*

*Without compelling evidence for the superiority of vaccine-induced immunity, it cannot be deemed necessary to require vaccination for those with natural immunity. Subjecting them to vaccine mandates is therefore not justified."*

## Sources and References

---

- <sup>1</sup> [New York Post July 13, 2022](#)
- <sup>2, 4, 5, 6, 7, 8</sup> [N Engl J Med 2022; 387:21-34 DOI: 10.1056/NEJMoa2203965](#)
- <sup>3</sup> [FEE July 18, 2022](#)
- <sup>9</sup> [Weill Cornell Medicine June 15, 2022](#)

- <sup>10</sup> MMWR Morb Mortal Wkly Rep. ePub: 11 February 2022
- <sup>11</sup> The New York Times February 11, 2022
- <sup>12</sup> U.S. FDA August 31, 2022
- <sup>13, 14</sup> U.S. Department of Health & Human Services June 29, 2022
- <sup>15</sup> U.S. News & World Report June 29, 2022
- <sup>16</sup> Drugs.com June 27, 2022
- <sup>17</sup> Science August 30, 2022
- <sup>18</sup> NPR August 18, 2022
- <sup>19</sup> KHN July 5, 2022
- <sup>20, 24, 25</sup> Blaze Media August 25, 2021
- <sup>21</sup> Israel National News July 13, 2021
- <sup>22</sup> Reuters July 13, 2021
- <sup>23</sup> The Blaze July 14, 2021
- <sup>26</sup> Times Union June 30, 2022
- <sup>27</sup> FEE Stories January 10, 2022
- <sup>28</sup> The Lancet Rheumatology March 1, 2022
- <sup>29</sup> Journal of Medical Ethics Volume 48, Issue 6