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by [Dr. Mark Sircus](#)

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Pandemic, epidemic, or a medical emergency. No matter what we call it, people suffering from vascular disease have dramatically increased, and too many are dying from it. Not only is there no vaccine possible for heart disease, but in all probability, the COVID vaccines are driving the pain, suffering, and death through sudden onset heart disease. In the week ending November 12, 2021, the U.K. reported 2,047 more deaths than occurred during the same period between 2015 and 2019; ***heart disease and strokes appear to be behind many of the excess deaths.***

“I watched Roy die, and I could not get to him. We were about to leave for the hospital, and he was in the toilet, and I heard a thud. He had fallen, his body was blocking the door, his full weight was against it, and I couldn’t get it open. I could see him through a crack in the door. I could see that he was gone.”

Rory had received his first dose of the Pfizer vaccine on November 5 and started feeling ‘heart flutters’ that evening. The symptoms continued, and 12 days later, he began to [suffer heart palpitations and an ‘uncomfortable’ feeling in his chest.](#)

Inside the emergency department at Sparrow Hospital in Lansing, Michigan, staff members are struggling to care for [patients showing up much sicker than they’ve ever seen.](#) Patients are showing up to the E.R. sicker than before the pandemic; their diseases are more advanced and need more complicated care. “We are hearing from members in every part of the country,” said Dr. Lisa Moreno, president of the [American Academy of Emergency Medicine.](#) “The Midwest, the South, the Northeast, the West ... they are seeing this exact same phenomenon.” And already-overwhelmed staffers are burning

out.

Things are so bad that Maine Gov. Janet Mills on Dec. 8 activated the state's National Guard to assist at hospitals. Dr. Andrew Mueller, CEO of MaineHealth, told reporters in a virtual briefing that hospitalizations for COVID-19 in the health care system are at their highest level even though Maine has a high vaccination rate.

Focusing on Heart Disease

A 33-year-old registered nurse in New Zealand recently went public on social media to share her story of being diagnosed with pericarditis after being injected with a second dose of a COVID-19 shot. She states that she was placed in a section of the hospital that was treating vaccine injuries, and that she was the [7th person admitted that day suffering a heart problem following a Pfizer shot](#).

The COVID-19 shots cause heart disease, mainly myocarditis and pericarditis, which destroys our young people's health. This is a fact that is no longer in dispute, as even the CDC admits this, as [their most recent report](#) states: As of November 24, 2021, VAERS has received 1,949 reports of myocarditis or pericarditis among people ages 30 and younger who received COVID-19 vaccine. Most cases have been reported after mRNA COVID-19 vaccination (Pfizer-BioNTech or Moderna), particularly in male adolescents and young adults. ([Source](#).)

At the beginning of December, the U.S. Food and Drug Administration added a warning to patient and provider fact sheets for the Pfizer and Moderna Covid-19 vaccines to indicate a risk of heart inflammation. The CDC agrees, saying that a higher-than-usual number of cases of a type of [heart inflammation](#) has been reported following the Covid-19 vaccination, especially among young men following their second dose of an mRNA vaccine.

In the last 13 weeks alone, in England, about 107,700 seniors

died above the normal rate, despite a 98.7% injection rate.

A new study and warning from the American Heart Association: mRNA vaccines dramatically increase risk of developing heart disease – “The PLUS Cardiac Test score has been measured every 3-6 months in our patient population for eight years. Recently, with the advent of the mRNA COVID 19 vaccines by Moderna and Pfizer, [dramatic changes in the PULS score became apparent in most patients.](#)” Twitter, the new heavyweight medical know everything platform, disagrees and put a warning about this information.

Heart inflammation has [three main types](#): myocarditis (inflamed heart muscles), pericarditis (inflamed outer linings of the heart), and endocarditis (inflamed inner linings of the heart). But only myocarditis and pericarditis have been associated with mRNA vaccine.

[Common clinical signs](#) of mRNA vaccine-related myocarditis and pericarditis are elevated troponin (a blood biomarker of heart muscle damage) levels, abnormal cardiac imaging, and chest pain. Other rarer symptoms include headache, breathlessness, fatigue, and body ache.

In [one study](#), researchers from Israel found that individuals vaccinated with Pfizer’s mRNA vaccine had a 3.24-times increased risk of myocarditis within 21 days of either the first or second dose compared to unvaccinated individuals. This equated to an excess of 2.7 events per 100,000 persons. About 90% of those myocarditis cases happened to males aged 20–34 years.

Pfizer vaccine has triggered inflammation of the heart! Do you doubt that and swear allegiance to Twitter? Or are you one of many ridiculous doctors and health officials who hides behind the “rare” word that describes vaccine reactions?

For [another study](#), researchers from the U.S. calculated that

12–39-year-olds had a 9.8-times increased risk of myocarditis/pericarditis at days 1–21 of vaccination compared to those at days 22–42 of vaccination. This gives an excess of 6.3 cases per million doses. More specifically, 85% of cases affected males, 85% occurred within seven days of vaccination (more commonly after the second dose), 82% led to hospitalization, and 6% led to the intensive care unit (ICU).

Since the COVID vaccines became available, nearly [300 athletes have experienced cardiac arrest, and over 167 have died.](#)

Dr. Joseph Mercola reports that “many athletes are now losing their careers due to COVID jab injuries. For example, Florian Dagoury is the world record holder in static breath-hold freediving. Before his Pfizer jabs, he was able to hold his breath for 10 minutes and 30 seconds. After his second dose, his diving performance was slashed by about 30%, and he’s been diagnosed with myocarditis, pericarditis, and trivial mitral regurgitation. Others include tennis player Jeremy Chardy and 32-year-old triathlete Antoine Mechin. Both were severely injured by their COVID jabs. Both now regret taking the shot. “Damaging healthy people to preserve the health of the weakest,” Mechin now says, is “a choice of backward logic.”

Former Australian pro-basketball player Ben Madgen, 36, was diagnosed with pericarditis after receiving his second shot of the Pfizer COVID-19 vaccine in a report from the [Covid world](#). After taking the Pfizer shot, the doctor told him that having pericarditis is **now common** to teenage boys and young males.

A London Evening Standard [report](#) quotes senior vascular surgeon Tahir Hussain, who works at an NHS hospital in London. “I’ve seen a [big increase in thrombotic-related vascular conditions](#) in my practice,” said Hussain. “Far younger patients are being admitted and requiring surgical and medical

intervention than prior to the pandemic.”

Of course, this has nothing to do with dangerous COVID vaccines. Hussain said that the cases are “a direct result of the increased stress and anxiety levels caused from the effects of PPSD (post-pandemic stress disorder).” He also said that people dying at home “from conditions such as **pulmonary embolism and myocardial infarction**” were down to self-isolating and not seeking the medical care they needed.

A “HEALTHY” single mom with no pre-existing medical conditions has died four days after receiving the second dose of the Moderna coronavirus vaccine. Kassidi Kurill, 39, suddenly passed away on February 5 after she complained to her parents that “[her heart was racing](#) and she felt like she needed to get to the emergency room.”

Former senior NHS psychological therapist Mark Rayner said as many as 300,000 heart ailments could be due to “post-pandemic stress disorder.” No matter what the cause, these numbers suggest an epidemic, in little England, of heart disorders, all of them calling for intense magnesium administration. Now try to imagine what is going on around the world. Yes, with pandemic health responses and vaccines leading the way, stress levels are going through the roof. People certainly do not like their freedom taken away from them and do not enjoy the world’s changes being forced down their collective throats.

“I had my 1st Pfizer shot on Friday, and I’ve had an elevated heart rate between 90 and 104 since Saturday. It’s now Tuesday. It kind of feels like it skips a beat sometimes. It’s making me apprehensive about getting the 2nd shot.”

Doctors and health officials are not interested in measuring the reactions of the heart post-COVID vaccination. Still, I imagine if a study were quickly done measuring the [heart rate variability](#) (HRV), we would see the vaccine disaster unfolding

when we calculate the timing of each beat of the heart. The heart is super sensitive and vulnerable to any adverse events, but there is little to no interest in looking carefully at what is going on.

My heart rate is elevated. Like goes up to 125 to do a flight of stairs. I am on day three since the shot. My doctor says I am fine. Should I be worried?

HRV is a scientifically researched phenomenon that measures the variability in the R portion of the QRST wave of a regular heartbeat. Over time, even with a normal heartbeat, there is variability between the beats. **The more variability, the healthier the heart.** The higher the heart rate variability, the greater are the potential reserves of the body to adapt. HRV and vagus nerve activity are helpful as long-term measures of inflammation in chronic diseases.

Our heart does not lie, not when you look at what it says on a beat-to-beat basis (HRV). It is our most honest digital code, and doctors can read it using the [VedaPulse](#) (which happens to be on sale). A five-minute test can be done in the comfort of one's own home or doctor's office, and one has a five-minute readout of the code the heart is putting out. When I do my readouts, I use only two minutes to see how stressed my heart is.

It is sad how much Magnesium is ignored by mainstream medicine. In the case of male teenagers and athletes developing heart inflammation after taking the COVID injection, it is tragic. Magnesium is one of the best medications to cool the fires of inflammation because it is [Magnesium that modulates cellular events involved in inflammation.](#)

Inflammatory indicators in the body such as CRP (C-reactive protein), TNF (tumor necrosis factor-alpha), and IL6 (interleukin 6) are reduced when magnesium intake is

increased. In addition, inflammation in the arterial walls was also reduced with magnesium intake, and [without enough Magnesium, the heart goes into cardiac arrest or many other heart disorders.](#)

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Dr. Sarah Myhill has been using I.V. magnesium in her general practice for over 20 years for both acute and chronic problems. She uses it for all patients with acute chest pain (unless the blood pressure is low), acute heart failure, pulmonary embolus, and acute asthma. Myhill says, "It is a potent vasodilator – i.e., it opens up all the blood vessels. Indeed patients can feel their blood vessels dilating as I give them the Magnesium – they warm up all over! This has the immediate effect of reducing the work of the heart and opening up the collateral circulation of the heart. Most patients with acute heart attacks have their pain completely relieved by I.V. magnesium."

[Magnesium oil](#) is magnesium chloride and is terrific for all forms of magnesium administration. It is the most flexible form of magnesium.

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