

# Next Level: An Analysis of “Spike Protect” Product

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*Truth Comes to Light editor’s note:*

*In the post shared below, Next Level takes a look at “Spike Protect” products being sold to supposedly protect and/or repair damage from “spike proteins”. (For more information on Next Level, [see their magazine here.](#))*

*This is the “Spike Protect” product promoted by Dr. Bodo Schiffmann as mentioned in the Next Level post. Ingredients: nattokinase, astaxanthin, black pepper extract and curcuma extract. Dr. Bodo Schiffman’s channels are published in German: [Telegram](#) and [YouTube](#).*

*You will likely have seen a few versions of “Spike Protect” capsules offered for purchase by some of the natural healing or medical freedom channels that you follow. A quick web search found several with varying ingredients.*

- **Here**  
*Ingredients: black cumin seed extract, dandelion root, n-acetyl cysteine, green tea providing EGCG, nattokinase, selenium.*
- **Here**  
*This site also mentions “shedding” protection. Their product comes in a bundle of products that include: selenium, glutathione, turmeric, quercetin, hesperidin, nattokinase, black seed oil, dandelion root, Irish moss, vitamin A, vitamin C, vitamin E, zinc, selenium,*

proteases, bromelain, papain, kelp, rutin, grape seed, ALA, citrus bioflavonoid, rose hips, Asian ginseng, eleuthero [Siberian ginseng], ginkgo biloba, CoQ10, green tea, catalase, flaxseed, lutein, SOD, parsley.

- **Here**

*Ingredients: quercetin, schisandra, ginkgo leaf, serrapeptase, nattokinase.*

- **Here**

*Ingredients: nattokinase, dandelion root, selenium, black sativa, green tea extract, Irish sea moss.*

- and **Here**

*Ingredients: dandelion leaf, juniper berry, slippery elm, ginger root.*

*These same ingredients have been recommended for many of the symptoms related to upper respiratory issues and blood clots – in other words, for all things “covid” and “covid jab” side effects.*

*In the post below, Next Level challenges the idea that “spike proteins” are the culprit in causing these symptoms.*

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**Product advertising for “Spike Protect” is based on evidence-free studies.**

by **Next Level**

*translated from German via telegram translate*

January 25, 2024

The community has requested a critical analysis of the studies used as the basis for the Spike Protect product.

It is important to emphasize that no serious scientist –

regardless of his critical attitude – would use such study results as a reliable evidence base. The product’s arguments against supposed “spike proteins” are based on a number of studies that do not provide sufficient evidence. This product has not yet been tested for effectiveness in controlled scientific studies.

Critical assessment of one of these studies (Post Bodo Schiffmann.)

### **1. Incomplete data presentation**

Of the 81 long COVID patients (undefined diagnosis) examined, only data from 70 patients were presented. The missing information on 11 patients could represent bias if their results did not meet expectations.

### **2. Questionable evidence of “spike protein” fragments**

The study found weak signals of “vaccine spike protein” fragments in only 2 of 81 patients and a fragment of the alleged “viral spike protein” in one patient.

### **3. Analysis of fragments instead of whole proteins**

Only fragments and not whole “spike proteins” were analyzed, which increases the risk of misclassification.

### **4. Possible artifact formation due to trypsin**

The samples were treated with trypsin to generate fragments, raising the question of whether the identified fragments may be artifacts of trypsin use. This becomes particularly relevant with the mention of Australian virologists who reported that visible ‘spikes’ under the electron microscope could only be created by using trypsin. This highlights the importance of comparative controls with untreated samples. Controls without trypsin were not performed.

## **5. Variability of detection limit**

The limit of detection in mass spectrometry is not standardized (similar to the CT value in PCR), meaning that other laboratories might have interpreted the authors' 2 weak signals differently. Both as an artifact and undetectable.

## **6. Interpretation of mass spectrometry results**

The results are based solely on the indirect method of mass spectrometry. However, this technique does not provide clear yes or no answers but requires interpretation of the results. In mass spectrometry, so-called 'peaks' are created in the mass spectrum, which provide information about the presence of certain molecules. However, the very weak signals of these peaks identified in the study have not been confirmed by other independent methods, calling their reliability into question.

## **7. Lack of positive controls**

Positive controls, i.e. samples known to contain the target molecule (in this case the "spike protein"), are not mentioned in the study.

## **8. Insufficient information on negative controls**

Although unvaccinated samples are mentioned as negative controls, there are no specific details about how many negative control samples were used, how exactly these samples were analyzed, or what specific criteria were used for their selection. (Theoretically, this could be a single case).

## **9. Mass spectrometry and database dependency**

In mass spectrometry, molecules are interpreted by comparing their mass-to-charge ratio ( $m/z$ ) with database values. Incorrect database entries, such as incorrectly

defining a harmless protein as a “spike protein,” can lead to misinterpretations, for example, with syncytin being mistakenly identified as a spike protein.

An article analyzing the other studies used to sell “Spike Protect” will be published in the next few weeks on NEXT LEVEL.

[Reference]

[Presence of viral spike protein and vaccinal spike protein in the blood serum of patients with long-COVID syndrome](#)

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