

**DANGER**



# COVID-19

— Is It Really a Virus? —

# COVID-19

## Is It Really a Virus?

Copyright © 2022 · Jonathan Otto and Health Secret, LLC

**NOTICE OF RIGHTS:** All rights reserved. Except as permitted under the United States Copyright Act of 1976, no part of this publication may be reproduced or distributed in any form or by any means, or stored in a database or retrieval system, without the prior written permission of the author.

**DISCLAIMER:** The Author and Publisher have strived to be as accurate and complete as possible in the creation of this book. While all attempts have been made to verify information provided in this publication, the Author and Publisher assumes no responsibility for errors, omissions, or contrary interpretation of the subject matter herein. Any perceived slights of specific persons, peoples, or organizations are unintentional. In practical advice books, like anything else in life, there are no guarantees of results. Readers are cautioned to rely on their own judgment about their individual circumstances and to act accordingly. This book is an educational guide that provides general health information. The materials are “as is” and without warranties of any kind either express or implied. The book’s content is not a substitute for direct, personal, professional medical care and diagnosis. None of the protocols (including products and services) mentioned in the book should be performed or otherwise used without clearance from your physician or healthcare provider. The information contained within is not intended to provide specific physical or mental health advice, or any other advice whatsoever, for any individual or company and should not be relied upon in that regard. While every effort has been made to ensure accuracy, these contents should not be construed as medical advice, professional diagnosis, opinion, or treatment to you or any other individual, and are not intended as a substitute for medical or professional care or treatment.



## TABLE OF CONTENTS

|                                                                |    |
|----------------------------------------------------------------|----|
| Introduction .....                                             | 1  |
| What Is the Hidden Agenda Behind the So-Called Pandemic? ..... | 3  |
| How Snake Venom Fits Into the Agenda .....                     | 4  |
| Dr. Tau Braun .....                                            | 4  |
| Dr. Bryan Ardis .....                                          | 12 |
| Conclusion .....                                               | 17 |
| About Jonathan Otto .....                                      | 18 |



# COVID-19

Is It Really a Virus?

## INTRODUCTION



The world was recently taken by a storm when radio show host, Stew Peters, released a documentary featuring one of our experts, Dr. Bryan Ardis. The documentary titled *Watch the Water* has paved the way for further research into the mechanism of COVID-19 and how it resembles the same process of disease that the body would experience as a result of snake venom poisoning.

In this documentary, Dr. Ardis refers to how much of his research clearly points to a connection between SARS CoV-2 and the use of snake venom. He starts off by explaining how a highly esteemed colleague sent him a text saying “Hey Dr. Ardis... If you got bit by a rattlesnake, would you go to the hospital and get antivenom?”.

In 2021, studies started emerging on the use of rattlesnake venom peptides to inhibit SARS-CoV-2 replication and transcription. A study published by bioRxiv in November 2021 analyzed the design of D-amino acids SARS-CoV-2 main protease inhibitors using the cationic peptide from rattlesnake venom as a scaffold.

The study concluded that *“These peptides interact directly with amino acid residues located in the active site or with amino acids located in the substrate-binding region of the protease, preventing substrate entry to the active site”*.

Additionally, there are many more studies to show that researchers have been experimenting with snake venom and shellfish poison for a while now.

VenomTech recently announced its collaboration with Charles River Laboratories, International Inc. to help drug developers explore venom-derived compounds for a wide range of therapeutic targets. Thier announcement also states that Venomtech’s Targeted-Venom Discovery Array™ (T-VDA™) libraries provide researchers with a



# COVID-19

Is It Really a Virus?

straightforward solution to rapidly screen thousands of individual venom fragments, with each array specifically designed to maximise hits for a specific target.

CEO of VenomTech, Paul Grant also stated that *Venomtech has been at the forefront of venom research for drug discovery for more than a decade. Through this relationship with Charles River Laboratories – a global leader for drug discovery contract research – we can now showcase our innovative technology, introducing the wider industry to the potential of venoms for the successful delivery of more leads.*

Additionally, an article published by the World Economic Forum shares information by one of their recognised young scientists, Venomics expert Dr. Mandë Holford. She goes into detail about the work she's been doing with venom and states that *"One reason for the growing interest in this field is that advances in DNA and RNA technology allow research to be carried out much faster."*

The article further notes that Holford's work also involves investigating cone snail venom to look for peptide compounds that could be used to treat pain and cancer.

While Dr. Ardis' theory may sound completely out of the blue to many, the research certainly shows that this is not the case and experiments using snake venom and other deadly venoms for their use in pharmaceuticals has been going on for a while now.

Another point to highlight is that when the novel coronavirus was announced as a concern, scientists rushed to search for the source of this virus. Many early reports point to snakes as the original source.

An study published by the Journal of Medical Virology concluded that results derived from their evolutionary analysis suggested that 2019-nCoV has most similar genetic information with bat coronavirus and has most similar codon usage bias with snake.

What's more is that the study showed that two types of snakes, containing *B. multicinctus* (many-banded krait) and *N. atra* (Chinese cobra) were used for RSCU analysis.

During the documentary, *Watch the Water*, Dr. Ardis states that *"The word Corona means a crown for the king. And virus in Latin actually means venom. So Corona virus actually means king venom"*.

In this eBook, we'll go into detail about this new development by looking at previous and current research. We'll also share insights from our experts about their concerns about how snake venom has been weaponized as a way to advance the globalist agenda.

There's an abundance of evidence to prove that this so-called pandemic has been part of a larger agenda from the get-go. The closer scientists, doctors, journalists, and other freedom fighters get to unraveling the truth about COVID, the closer we'll get to limiting the disease, saving lives, and stopping the global government, Big Pharma, health authorities, and other authorities from using misinformation to advance their agenda.



## WHAT IS THE HIDDEN AGENDA BEHIND THE SO-CALLED PANDEMIC?

Not only are there clear signs that COVID has been a huge money-making scheme but it has also been used as a means of population control.

Dr. Rich Swier published an article where he analyses the hidden agenda behind the COVID pandemic. He holds a Doctorate of Education and Master's Degree in Management Information Systems. He is an army veteran who retired as a Lieutenant Colonel in 1990.

In his article, he talks about the concept of mass psychosis where a large number of people in society lose touch with reality, which is exactly what we're seeing with the so-called pandemic. He also references two examples of mass psychoses in the past including the American and European witch hunts 16th and 17th centuries and the rise of totalitarianism in the 20th century.

It's clear that the fear and panic intentionally created by the media and the government as a tool to drive the world into a state of mass psychosis. This is the only way they could have made adults agree to dangerous mandates without questioning the logic behind them.

If people were in a normal frame of mind, they would know for certain that it is impossible to create a safe vaccine at warp speed. They also would've paid attention to the fact that they were being used as the subjects of a huge experiment. Until now, our experts have uncovered so much about the evil behind the mandates, including the deadly vaccines.

We know that all the mandates and panic were used to brainwash the population into accepting these vaxxes and boosters to turn their bodies into ticking time bombs. And profiting from it at the same time. This recent information shared by Dr. Ardis brings us a step closer to pinpointing exactly how the global government is mass murdering its people.





## HOW SNAKE VENOM FITS INTO THE AGENDA

Research and reports showing a link between COVID-19 and snake venom are not new. Evidence has suggested this for some time but has been censored or dismissed as a bizarre theory.

In 2021, Scientists from the University of Arizona carried out research that led to the conclusion that an enzyme similar to one found in rattlesnake venom could be driving COVID-19 deaths.

Dr. Floyd Chilton, the senior author of the study with the University of Arizona, College of Agriculture and Life Sciences shared feedback about the damage being caused by these enzymes. He states that, “These high levels of this enzyme are looking at those tissues in the organs and saying, ‘you look like a bacteria, let’s shred your membranes. Let’s put these organs out of their misery’”.

Another article published by deNutrients also referenced to studies where unusual gene insertions within the SARS-CoV-2 viral gene sequence were found that resemble the protein structure and genetic code of a snake venom toxin.

The article further notes that an anti-clotting snake venom anti-toxin medication, known as Tirofiban/Aggrastat, was found helpful in the treatment of patients with severe COVID19.

Two of our experts, Dr. Tau Braun and Dr. Bryan Ardis share more insight into this topic.

### Dr. Tau Braun

**Jonathan Otto:** Hi guys, Jonathan Otto here, and I’m with Dr. Tau Braun and he’s somebody that has been willing to speak up on some really controversial subjects and we’re going to talk about that today. I am actually, personally, very hesitant on this subject area just because it certainly comes at a price. I’m surprised. I don’t know why, I guess maybe I do know, but I’m not exactly sure why this has become so controversial when the whole fight has always been against the machine or individuals, or whatever, putting toxins and poisons into our bodies.

From what we had all understood being altering this spike protein, in a way, and putting it into our body, but why is it so shocking that if it was snake venom or derived from snake venom, that should now be cast aside and seen as being ridiculous. Anyway, you are the right person to talk in this subject area, Dr. Braun. You certainly have the background and the credentials. I just really appreciate you taking the time and the fact that your hesitation of even taking too much time on interviews, I’d noticed just in the interactions that I had with you through Dr. Brian Ardis was that you’re most concerned right now about those that are injured, which is more than I can say for most. That seems to not really be that focal point. It’s more on proving how bad this is and getting people to stop taking it.



But not necessarily about taking the time to work with those that are injured and help them heal, which should be the focus of anyone that's professing to be speaking the truth today. Thank you for your stand, Dr. Braun, and thank you for being with me today.

**Dr. Tau Braun:** My pleasure. I think what a great way to start by letting people know where my priorities are and these interviews are useful. If I can get out good information that saves lives and helps to correct sort of the treatment plans that have been off. I've also noticed something that I think, that you're a good person to talk to about as sort of an openness to this. I've noticed that we're in this really weird space where sort of like psychotic debate has taken the place of sort of common sense, quick, practical thinking. Even the terms I've noticed, I've been interacting with people that are wanting to interview me, and I've been noticing somebody will use the term, "So you're the snake, you're COVID is venom guy. Help to convince me, or you've got to convince this guy."

When somebody will be, even use the word theory, and then people say, you always hear people say, "Oh, I want to debate this guy and I'll offer a million dollars if they're wrong." Right? But, there's a time and place for that kind of style or thinking, but in a war, or in a pandemic, while people are dying daily, it's a sort of language that I can't fit it. It doesn't sit with me, right? In the way that sort of the goal of all of us and there's, and it's totally fine to have humor during interviews, and I can tell to you some of the crazy stories of just two years of this, but from a standpoint of, I'm not here to convince anybody, right?

I'm not here to debate my theory with anybody if it's either going to be useful or it's not. I'm either going to get the information out to people to that need it and want it, and then don't give me a hard time. Or I can spend the rest of the time on my planet writing up some sort of academic paper, right? Or being in a jail somewhere like Galileo, right, or Copernicus, and then your theory eventually becomes correct. Posthumous, or whatever it's called, it's not humorous because there's nothing funny about being honored after you die. The idea that somehow we celebrate people as heroes after they're long gone and they were right about something, but we all expected them to convince instead of just asking questions, "Oh, that's kind of curious. Or why do you think that? Or how would that be helpful?"

To me, that's a really good starting point to say, "I appreciated your invitation because you do things slightly differently from others and clearly you've got an open mind." You're also taking a stance at this time where you realize you have to be hesitant, but you're also not just discounting some theory and moving on. You say, "Okay, that's kind of interesting. Tell me more about that." I mean, that's the sign of intelligence. I mean, not to give you a compliment straight off the bat to win you over. But that is the sign of intelligence, asking questions.

**Jonathan Otto:** Yeah. No, I appreciate that. It's interesting, my hesitation is not in that I think that you're wrong, I actually think that you're right. My hesitation is in that I feel like I'm putting my head in a noose and it's because everyone loves community. Everyone loves to be celebrated. I'm guilty of that. When I say that I'm not talking about doing something at the expense of somebody else. I'm just, nobody likes to not be liked. Nobody's into that. You just maybe have a higher value that causes you to want to speak up or do something.



# COVID-19

Is It Really a Virus?

For me, I feel concerned of what the cost of me researching this is, socially, let alone other aspects of... that it's not exactly the safest place to be right now, and I have a young family. But the whole point is that we are here to do good and there are people suffering way more than us. I was just with children that had been injured. Some of them in the clinical trials for Pfizer. Anyway, when you look at their daily life, it is hell. They are going through hell. Who cares about us and our feelings, right now, these people need our help and need us to care more about them than we care about ourselves. Why don't you share your backgrounds, Dr. Braun, for the audience, for people that don't know your work, your higher credentials?

**Dr. Tau Braun:** Sure, it's the best way to confuse people straight off the bat because, here I am, and educationally, I graduated as a clinical psychologist in South Africa, which is up to a master's level program. Then, you go off and you become a clinical psychologist, and you practice. I particularly was interested on the clinical side because I've been involved in healthcare and science just ever since I was a kid, and a teenager. I was vaccinating babies in Africa at rural clinics at 15. I've been in the sciences and healthcare my whole life and I'm passionate around that method to sort of reduce suffering. Educationally...

**Jonathan Otto:** Do you have mixed feelings on your work in vaccinating babies now, or? I'm just curious.

**Dr. Tau Braun:** No, I think that the mixed feelings I've got is that through that experience. I worked on the HIV/AIDS crisis and epidemic in South Africa as an intern clinical psychologist, running group therapy and training people to do pre-test and post-test counseling. What's interesting is all of that sort of counseling dropped out the window for COVID where there was this big concern in a world that had more empathy around the time when HIV and AIDS was around, which was also perceived as this killer disease. But people would come in for a test and then there was trained counselors that if you've got a positive result, you just didn't tell people that they had a positive result because you'd freak them out. Of course, fear and stress and you had to tell them that it's not necessarily a death sentence and that there's options for them and they should come back for group therapy. Whereas COVID is supposed to be this death sentence, right?

It's supposed to be this severe disease, but you go off to a pharmacy or you take a home test and you test positive and then there's no counselor there to tell you, "Oh, Jonathan, you're going to be okay. Don't worry. It's got a 99% survival rate. Even though you've tested positive, it doesn't necessarily mean a death sentence." You can see sort of how the narrative changes based on the people running the show. Then also, just based on our level of empathy and our ability to be callous, we've become this uncaring universe, right? It's okay to have difference of opinions on things, but then sort of this idea that everyone's opinion is correct, but then also everyone's opinion that you perceive as incorrect makes you the enemy somehow, they pose a threat to you with their thought, right? It's a really strange...

**Jonathan Otto:** Yeah, you're right about that.

**Dr. Tau Braun:** Yeah. Going back to education, I then moved back to the states and was in a wellness space for quite some time, I think just less than a decade. Where I had a wellness center and I was very interested in integrative health and sort of a holistic method of working with people, whether it was helping them to get better from an



illness or peak performance. We had had kids that were coming in, at that stage, that were vaccine injured. The chiropractor specialized in neurology, that I worked with, my partner in the business. I got to see what a model looks like when you think about a problem with numerous people as a multidisciplinary team, rather than thinking that you have this one thing, right?

This like silver bullet that fixes it all. This one drug, or this one vaccine, or this one method. It's so much more useful to say, "Where is this person and what kind of changes do they want? Then, how do we, as a team, facilitate that change without getting stuck on a method?" It might fit their religion, may not fit their religion. Might be a great solution, but doesn't fit their pocket. You've got all of these kinds of things to figure out and that's why a team approach is best in doing that. What I found is that I, sort of post 9/11, started feeling that even though the work was brilliant and I was enjoying it and I was watching all that change and then into sort of more of the motivational space and I was enjoying working with companies, but post 9/11, something was missing for me.

Coming from my background, of a very violent com country, and had family and counter-terrorism, and law enforcement. I felt like I could do something to serve better. I felt like I could take these weird skills that I had and the bubble that I was raised in as an incubator. Basically, I felt what I could do with that is, go into violence prevention. Stop big attacks, like shootings. Some of my work merged into working with counter-terrorism, mostly as a trainer in the subject of active attackers and what people call active shooters. I'm sort of seen in my industry as the bridge between law enforcement, public health, and emergency management. Then the pandemic hit, right? I just perceived that what we are going through, whether it was an attack as a virus or attack as a human being, I just saw that the role is the same. I need to understand the threat. Then I needed to find mitigation strategies to either prevent the threat from having an ability to create harm or work out what the recovery looks like. That's what I've been doing since the beginning in the pandemic.

**Jonathan Otto:** Awesome, Dr. Tau, I appreciate your focus there. One would say that you are clearly the right person to speak on this subject area because of your work in these different fields. What aspects of your study and training do you believe most thoroughly connect to this subject area that you're heavily researching and have-?

**Dr. Tau Braun:** I think all of it. I mean, I think all of it, I think the reason that I've been able to understand what's going on and then start solving the problem was that I feel like I am both a specialist in certain fields and then a generalist in a lot of fields. I'm able to combine that. When you look at something like the big topic of the day, the hot topic of venom, I have a background where my master's thesis looked at a psychopathology and diagnosis as a big event in somebody's life that really shapes the outcome. That it can have a great positive outcome if someone gets a diagnosis, but can also have a horrible outcome if the person, let's say, is younger and then this diagnosis sticks, and then it seems permanent and it doesn't seem changeable that for a young impressionable mind in given a label, it can really cost them down that trajectory for the rest of their lives.

They won't be able to shake that label, right? In understanding that my thesis looked at chaos theory from mathematics and people are familiar with terms like the butterfly effect, that basically a small change can have a large effect. When you have a look at venom, for example, venom in mathematics is what's known as a stranger attractor. It's very small for what it is, but it's an extremely powerful attractor, as a catalyst, as a process that starts



# COVID-19

Is It Really a Virus?

a rapid redox reaction that ultimately changes most of the enzymes in whatever organism has been attacked and puts that organism into a death spiral.

It's like a pathway that starts with this tiny amount of substance that changes, in the case of an envenomation of a human being, the tiniest amount of venom, of all venom, can have this catastrophic effect leading towards death. If you think about a tiny little spider, most people aren't familiar that with Lyme disease, the tick is in the spider family and the tick has venom in its saliva. If you think about how small that is and how small that bite is, and yet look what happens to people that have Lyme disease and look how long it can last in their body. Venomics, in terms of the beautiful specialty, which I'm not a specialist in venom. There are people that have spent a lifetime, at least a much more decent time than I have understanding venom, but the key aspects of venom are that venom fits into a category of this tiny substance that has huge potential to change up a system.

**Jonathan Otto:** Wow. Yeah. That's a good point. Dr. Braun, I've done my own research, what's interesting that, 10 years ago I had researched something that I brought to Dr Ardis' attention, just a few days ago. He was blown away because it linked a program called MK Ultra, that was part of the CIAs program, not sure if you're familiar with...

**Dr. Tau Braun:** Sure. Of course.

**Jonathan Otto:** Are you familiar with the heart attack gun that was created?

**Dr. Tau Braun:** No, actually I'm not. No.

**Jonathan Otto:** Could you imagine how the heart attack gun was created? The woman that was tasked with it, she was only 18 at the time, her name is Mary Embree. This is all public, this was a congressional hearing. It's not me and a conspiracy website. It's a congressional hearing where they show the gun and they explain how it was developed and it was using a shellfish venom that was frozen in ice, and they could shoot it about a hundred meters and it would enter the target, give them a heart attack without them even noticing that they got hit.

Because it was ice, it would melt in the body and then the venom would... There was not even a dart left in somebody. It was the perfect stealth weapon. Up until that point, the CIA were using a third of all shellfish toxin available that was in existence. Arguably, it was only 5.9 grams, but why would they need, basically, a third of the whole supply on the market if they were just trying to target a few individuals. In that, they even mentioned specifically that there were 19 other toxic substances, including cobra venom. Anyway, I thought you'd find that really...

**Dr. Tau Braun:** Yeah. I mean, it's fascinating and I think what this topic highlights and, I think what the bigger picture of why the public should be interested in it, is all things technology at this accelerated pace that technology has moved so quickly now and there aren't very many regulations around things like venom. The ability to now synthesize peptides and peptides are just short-chain proteins, and the ability to make venom is now an easy task for people to be able to do. The president currently is chasing ghost guns. But ghost guns are so old school because you're thinking about gun powder, how long has gun powder been around? As human beings, that is so



primitive as a weapon that the president might as well start chasing big chunks of rocks that people could pick up as a blunt object.

How far back your time do you want to go? We're not there as weapons anymore. The same way as somebody could say, "Oh, I don't want my phone number listed because they could find me." But most people don't even have a landline anymore. They can find you because they've got your IP address if you're not using a VPN. I think it's important for people to see that what you're dealing with is accelerated technology that allows poisons, whether you call it a poison, a toxin, a venom, it allows people to manufacture this in a large scale without the organism being present because you're talking about genomic sequences and you're talking about purification processes that are just much more simple for people to do. It's biological 3D printing.

If you think about... if you needed a certain part made before and you needed to get the dye cut, say you just needed a one-off, you couldn't go to a place before and just say, "Oh, this piece of plastic broke on this old thing that I've got, and I just need this one thing and here it is. Here are the specs." They'd have to mass-produce it for it to be easy. Well, now if you need a piece of plastic, or even metal, replaced out of a machine and you had the specs on the part, you can just make one. You can just 3D print it. That's where we are biologically. You can literally instruct, whether it's E. coli or yeast, and you can instruct them through various processes to say, "Make this protein for me."

Then you distill the stuff you don't need and you keep the peptides. That could be a poison or it could be an enzyme that you're trying to make. There's the fascinating part, I guess the quote that I always think about is from Spider-Man, with great power comes great responsibility. The technology's great to have, but if you've got people that can use it for nefarious purposes, then you need to understand that. Not to say that things should get banned or that there isn't benefit in it. It's just, okay, so what does that mean for the world? If I'm able to manufacture venom. You can go online right now and you can look up venom peptides and hit the button on Google for shopping and go buy venom peptides.

This is commercially available. If you're a lab somewhere and you want to be working with venom, you don't have to go milk a snake, just order them. They come as a powder and they come as liquid. If you talk about theories, for example, where somebody says something, "Oh, Doc Ardis is off his head if they think that they could scale this up and put it in the water and that they could poison a whole water supply." Well, those people probably don't realize how easy it is to scale up venom production, in today's world. They think you've got to have this copious amount of it. Then you've got to go and find thousands of cobra and krait to do it. But that's just not the world we live in. Something I think is missed on people...

**Jonathan Otto:** How would they do it, Tau?

**Dr. Tau Braun:** Well, how they would do it, and the way that they have done it, is basically that the [inaudible 00:22:39] people is that venom is not... When you come to concentration on venom, if a snake is biting something, it's different on how it's using it for defense as compared to if it's eating prey. There's a different level that it's going to put venom into somebody. The easiest way for people to think about an aerosolized particle-like I let the



# COVID-19

Is It Really a Virus?

FBI know about, is that once you have venom being made...

**Jonathan Otto:** What do you mean you let the FBI know about it? What do you mean?

**Dr. Tau Braun:** Oh, I emailed the FBI in June 2021 and said that myself and my team, I'd been working on understanding what COVID was and that even though this thing has been labeled a respiratory disease and ARDS, we are not seeing that that's what the profile of the disease is. We are seeing it as an envenomation. I think it's very important that people don't get fixated on this idea of cobra and krait, because, ultimately, when you're dealing with a synthetic, you have to ask yourself, "Is it still cobra, and is it still krait if it is a copy? If it's a synthetic copy that's produced by yeast." It's not coming from a cobra anymore. Therefore, I let the FBI know that the problem here was that it's not a respiratory disease.

There's numerous ways that it can be transported and that ultimately, my particular concern with it was two things. One is that no certain terms that I think that the vaccines were going to be safe and effective. First of all, why would you envenomate people? Why would you stick venom in people without them knowing and knowing that there's genetic risk? There's huge safety risks. If somebody is getting a vaccine, a COVID vaccine, and they don't aspirate that needle, and it goes into a vessel, now you've got venom they're going through the body, which, ultimately, has killed people either hours later, or days later, or months later but you've got venom through the bloodstream. This is going to have a completely different effect than putting venom into someone's muscle. Going back to your point about how it would be done is that, once you've got venom in circulation, venom would be able to be transported the same way as a spitting cobra uses it, in a salivary bubble and it would be spat out.

It could also just free float in the air because it's charged. The basic sides of [inaudible 00:25:13] in motion is that particles that are charged, stay up in the air. You could absolutely add this to the water if somebody chose to do it and you wouldn't need much of it. The difference, maybe, between the way Dr. Ardis and I were thinking through this is that I do believe that the initial attacks included a viral vector. SARS-CoV-1, which was a bad coronavirus with the spike protein, the new developed spike protein attached to SARS-CoV-1, and now gets called SARS-CoV-2, with an adapted gain-of-function, spike protein. Your venom then replicates. The machinery to get this out into the air, into the water, into the food, onto someone's hands, onto someone's clothing, it's the human body that's the manufacturer of that venom.

Then you don't need the virus anymore because then you start vaccinating people and you're putting the venom and then they're telling the public that they're going to be making the spike proteins. If you understand that the spike proteins have venom on it, then what they've told the public is that for a certain amount of time, if you get an mRNA vaccine, for example, that your body is going to be producing the spike proteins and, therefore, your human body is making venom that you're shedding to the rest of the world. Now all of a sudden, it's not that confusing for somebody, say a massage therapist, who's working on a recently vaccinated person who goes home feeling sick. Well, they're taking in venom. I mean, people go, "No, no, no, that's not the way venom works. You have to, you have to get bitten."

Alright, well, go and touch a poisonous dart frog. Go do skin-to-skin on an animal like the bufo toads down in



Florida, where dogs come to the vet all the time, cats come to the vet because they've licked the frog. They try to eat the frog. The venom is on the skin. The old venomous agents, VX nerve agents, when they did the experiments on this, they could put a drop onto a rabbit. Just a tiny, less than a pinhead worth of the substance and it would deeply affect the creature.

**Jonathan Otto:** Of course. Yep.

**Dr. Tau Braun:** Yeah. In that way, I think that what I appreciated and what Doc Ardis did for the world, is that I feel due to a bunch of circumstances, I tried a different channel of getting heard. I tried my best for a long time to get heard with this information. Part of what I was doing is that I personally made a choice, after a year of not being heard, to go, "Right. I'm just going to help the people that can hear me." I didn't have the kind of platforms or power in getting heard that Dr. Ardis had. I'm glad that he announced it and I know that he sort of put a shock wave to people that have discounted his theory. What he's also done is he's made people discuss this and I'm hoping, and maybe through scientists watching your interview and others, I'm hoping that the venom specialists do the right thing.

**Jonathan Otto:** We need them to help write the picture.

**Dr. Tau Braun:** Where are they? Literally all of these discussions, and even your interview with me, I'm not a venom specialist. I happen to know about this as a biological weapon and happen to understand how it works. But I'm not the guy that sits in a lab all day long making venom peptides. Somebody should be going, "Okay, I must do the moral thing. I must come out and explain how my lab, that I work in, or that I own, or whatever it is, that we work with venom." They need to make that bridge for people and say, "Well, we've attached venom to this. We've got yeast making this venom, and we've got this bacteria, that's now in envenomated." You're not talking about things that don't exist in nature.

I think that's also something that people need to think about. Some of the most poisonous neurotoxins come from bacteria. When people go for Botox, that's a venom from a bacteria. That's the botulism venom, a toxin, that has been extracted from bacteria. We might not call it a venom. Right. Certainly, what I think people need to know about from somebody like me, is that I traceback, and I'm sure it goes back even before this, but the best paper I found so far is from 1977. I found a paper where they took a coronavirus, and that was very important for me to see that this could be done with a coronavirus. They took a coronavirus and they attach a plant-based venom, which is called lectin. When a plant uses venom, we don't call it venom. We just call it a lectin. Lectins and venoms have a relationship where, molecularly, they are similar and different but they bind to each other. We also have lectins in our body and we eat lectins. There's people that are highly allergic to lectins in their diet. A lot of beans, for example, or lectin as a venom.

**Jonathan Otto:** Lectin gets kind of inactivated or out of them when they're cooked properly, or thoroughly.

**Dr. Tau Braun:** Correct. There's been documented cases of food poisonings and one particular bad one in the UK at a school, it wasn't cooked properly and a whole bunch of the kids got really sick. It was from these uncooked



beans. Basically, it's lectin poisoning which is a form of venom. You have a look at this paper I found from 1977, that spells out how they took a coronavirus and they successfully got a lectin, a former venom, to stick on that coronavirus. That to me is... I shouldn't be trying to explain that to the public. The venom specialists need to be able to do this and they need to do the right thing. Unfortunately, they are very connected to the pharmaceutical industry and it's their bread and butter and their grants, and their labs. I'm not sure that they're going to speak up. It's even more complicated for them than it would be for somebody who works for a vaccine developer.

### **Dr. Bryan Ardis**

**Dr. Bryan Ardis:** Conotoxins have potential as biological weapons. The direct chemical synthesis would more likely be found in clandestine laboratory than the farming of cone snails. Collecting a large enough supply directly from cone snails to use an aerosol dispersal would be a cumbersome process.

Most conotoxins or small peptides with 10 to 30 amino acids, which make them relatively easy to manufacture using direct chemical synthesis. Difficulties occur with the folding conotoxins producing discrepancies between in vitro and in vivo synthesis. As discussed above much research is being done with conotoxins.

The supplies and laboratories could be diverted to terrorists. The United States Department of Health and Human Services requires registration, background checks, biosafety, and security procedures for handling alpha conotoxins that amounts exceeding 100 milligrams. This could be aerosolized that's the first thing I learned.

Potential methods of using conotoxins and terrorism include contamination of food sources or aerial dispersal in a concentration population area. The most likely method of dispersal would be as an aerosol. Information on the inhalation effects of conotoxins is not available in the public domain.

The onset of effects from inhaling conotoxins would probably be much faster than from cone snails stings assuming adequate absorption of the toxin in the lungs. Conotoxins are not volatile and need to be aerosolized. One barrier is creating the conotoxin as an aerosol is the developing the optimal particle size of one to three micrometers.

**Jonathan Otto:** There you go. There's some interesting information there.

**Dr. Bryan Ardis:** That's phenomenal. That actually goes along with what Dr. Tau Braun says, Dr. Tau Braun says conotoxin snails. They're using that even in ferment or produce venom of snakes. You can aerosolize these venoms, that's what he keeps saying. You can aerosolize them. I'm like, "I don't know that." There you go.

**Jonathan Otto:** Wow. They're saying that this is, this is such a big issue that this article, which has nothing to do with vaccines or COVID, or anything like this. This is from is that 2012? Yeah, 2012. Bryan, see that?

**Dr. Bryan Ardis:** 2012. This is amazing. What I just mentioned was it's amazing this is what they found in that Italy study when they were evaluating COVID-19 patients who were positive for COVID-19 against those who did not



# COVID-19

Is It Really a Virus?

test positive they found 15 of these cone snail toxins in the COVID-19 patients. How did they get there? These are marine snail. How'd they get there?

**Jonathan Otto:** Exactly. What would you say if somebody said, "Well, the reason why these things were probably in these people was because a lot of medications are made using venoms from these snails and from snakes. This is the reason probably why these COVID-19 patients had this in them. What would you say to that?"

**Dr. Bryan Ardis:** Then, I would say did you know you had venom from snails in your body? It doesn't matter. You've been lied to no one knew this stuff. No one actually knew this. It's like what people said initially when I brought up the Italy study they were like, "Well, is the COVID-19 group that tested positive for these 36 animal venoms were they vaccinated?"

The other group wasn't and I went like this, "What, wait a minute? Are you suggesting that you think that these venoms might be in the vaccine? That's what you're saying?" That's the difference. That's even more disturbing. You think they're injecting people. It's this weird cognitive dissonance where you can throw out irrational thought all of a sudden to make this make sense.

It doesn't make sense that there's a neurotoxic venom from a snail in the ocean that can be used as a bioweapon now that you're learning that I've since learned is mass manufactured in facilities since 1989. The synthetic version of this alpha conotoxin, which is deadly more deadly than a king cobra's venom.

The synthetic version in factories is more or deadly as biologically active as the natural version, I'd be concerned about this. In fact, they just said this they can give it to terrorists. Wow, that's a great claim. Disclaimer.

**Jonathan Otto:** Check this out, read this one for us if you can.

**Dr. Bryan Ardis:** Signs and symptoms of exposure include faintness, ptosis, which is drooping eyelids, which is one of the COVID-19 symptoms. Poor coordination, absent gag reflex, areflexia, which is loss of the ability to have reflexes, paresthesia. Urinary retention, diplopia, double vision, blurred vision, speech difficulties.

Dysphagia, the difficulty of swallowing, weakness, nausea, generalized numbness and respiratory arrests. Autopsy findings may include blanching and swelling at the site of injection, petechial hemorrhages, cardiac dilation, and cerebral edema.

**Jonathan Otto:** Brain swelling.

**Dr. Bryan Ardis:** It's the brain swelling.

**Jonathan Otto:** Which what's happened to Maddie de Garay. Her brain is swollen and she can't see properly. It's causing her eyesight to go.



# COVID-19

Is It Really a Virus?

**Dr. Bryan Ardis:** It's awful. No specific antidotes are available. The heterogeneity in structure and the diverse pharmacology of the toxins are barriers to making an effective antidote. The treatment for a cone snail sting is respiratory support and intubation. Vital signs, blood gases, and cardiac dysfunction need to be monitored.

Death has been reported to occur within one to five hours. The above toxidrome results from the interactions of a number of conotoxins rather than a single conotoxin.

**Jonathan Otto:** That's interesting.

**Dr. Bryan Ardis:** That's interesting because I just showed you a toxidrome of a whole bunch of conotoxins in COVID-19 patients poop, urine, and blood.

**Jonathan Otto:** This is it right here.

**Dr. Bryan Ardis:** Yeah. There's actually 15 different conotoxins that was found in the blood, urine, and feces of only the COVID-19 positive group. This was collected and presented for peer review June of 2020. Way before the vaccines ever came out. They found in the PCR positive COVID-19 patients, 15 conotoxins.

**Jonathan Otto:** I can't find any information to say that this congressional hearing in 1975 does say that this was conotoxins, but they are saying shellfish. Conotoxin is the likely one unless you can find something on that.

**Dr. Bryan Ardis:** I would look into that, but I would be very suspicious that as soon as you showed me that little video here at my house, I was like, "Oh my God, they used alpha conotoxin." I just know how deadly it is and it comes from a snail. Also in this list, maybe in this list from the group in Italy, they found look at this people, how did this end up in COVID-19 people?

It says crown-of-thorns starfish venom, where did that come from? That's a shellfish. How did it end up in, I don't know, I haven't even studied that yet, but how did that end up in the blood, urine, or feces of a COVID-19 patient?

**Jonathan Otto:** That's a Christ reference as well. Not saying that was intentional that way, but that's the crown of thorns that was put on Jesus' head. This act of doing this to people is I believe and I've been saying this for the last year, that Christ is being crucified in every person. This is the hatred of Christ that was manifested 2,000 years ago.

The Christ is being repeated every day in the suffering of individuals I've been saying that. You see things like this and there may not be any connection. Even the act of causing the cardiac arrest, even Dr. Tau Braun, he did mention that to me yesterday about the fact that this resembles the crucifixion.

In terms of you're holding yourself up by your hands and your feet trying, but then there's nails in there and then it's causing your diaphragm to collapse and causing suffocation. This mechanism is doing this.

**Dr. Bryan Ardis:** I didn't find it ironic it's called the crown of thorns. As soon as I saw, I was like, "What is that doing



# COVID-19

Is It Really a Virus?

in there?” How was a starfish venom from the ocean and showing up peptides of that in COVID-19 patients? It’s weird. It should be weird and shocking. There’s 20 snake venom peptides from king cobra, spitting cobras, krait snakes, vipers.

There’s 20 of the 36 of these animal venom peptides in COVID-19 patients only not in the negative. I think this is important for people to understand. In the beginning of the pandemic, they were making you do a PCR test. People in this movement who are testifying around the world in public hearings and senates king’s court in parliament, they’re all saying the PCR test is faulty.

You can’t trust it. It doesn’t look for viruses. Imagine my shock when I learned that this test that medical doctors are typically using is being forced to be used to test every person around the planet for a virus that they say doesn’t test for viruses. The inventor Mullis says, “This does not diagnose respiratory viruses.” He said that.

Isn’t it amazing? Though, PCR test I have since learned, has been used for over 20 years in snake venom research to identify mRNA in snake venom that was stored in venom in 1984, they opened the jar PCR tested in 2012 and found it was almost exactly as stable genetically as it was 38 years earlier. PCR tests have been a mainstay in genetic testing for snake venom.

Isn’t it weird that the whole world’s now being forced to use a PCR test? I bet if I looked at conotoxin venom research, I bet you, I would find that they use PCR test for that too. Then they’re just using it and forcing everybody around the world to use it and accept it as a new reality when the inventor himself told you that’s not a reality.

**Jonathan Otto:** Wow, that’s the reason why people are testing positive. They actually do have COVID, but COVID is actually the venom.

**Dr. Bryan Ardis:** It’s weaponized venom.

**Jonathan Otto:** Venom peptides, which people could see a difference there. Whereas, we could say in essence where it’s venom-like versus being actual venom, but then this venom-like substance is arguably worse because it’s causing your body to replicate it more than if you have just got stung. Is that true?

**Dr. Bryan Ardis:** I’m not sure.

**Jonathan Otto:** Dr. Tau Braun mentioned something like that. I’ll have to go back over it to understand how that works.

**Dr. Bryan Ardis:** He’s been looking at this for two years. He’s brilliant on this. It’s been amazing to have and find out that there’s somebody who was confident enough. Think about this. I’m going to bring this up in my speaking engagements that I’m allowed to continue to see or go to. I’m going to ask everybody in the audience to raise their hands.



Have they ever been so confident about something in their personal life that they knew something, a truth that no one else was aware of. You were so confident of it that you actually wrote a letter to the director or a director at the FBI headquarters? Have you ever done that?

**Jonathan Otto:** No.

**Dr. Bryan Ardis:** Ever in your whole life? No, I only know this one guy, Dr. Tau Braun did it June 2021. He said, “This isn’t a respiratory virus. It’s envenomation meaning weaponizing venom.” He had all the research and he was right. People dismissed him immediately. Medical professionals, scientists, the FBI, all of them said, “We’re not talking to you.” Unfortunately, poor Tau.

**Jonathan Otto:** They wrote back to him?

**Dr. Bryan Ardis:** They wrote back a letter and it said, “Received. Thank you.” You got a three word letter back. This is the agency, the FBI that he’s contracted with for years. He trains FBI and CIA agents. That’s his job in the prevention of mass killings worldwide. He specializes in bioweaponry.

**Jonathan Otto:** Wow. He was the right person to send the letter.

**Dr. Bryan Ardis:** He was the guy to send the letter and when it was ignored with a, “Received, thank you.” and nothing else. He decided he was going to go public his trusted colleagues, his title is U.S. National Counterterrorism his buddies told him, “If you’re going to go public with this information about envenomization being venom, being the source of the SARS-CoV-2 pandemic, you should put yourself and enter yourself into witness protection program before you do it.”

That’s what they encouraged him to do his friends and colleagues in the U.S. National Counterterrorism. He got scared and didn’t say anything. He just went to work looking for an antidote. If you talk to him, his biggest concern is what’s going to happen with the die off of the vaccinated because he believes they’re going to use aerosolized venom that the vaccinated are going to breathe in and not be unvaccinated.

The vaccinated and unvaccinated will both breathe in these venom particles. He says he can buy an aerosolized can of cobra venom right now. They’re going to use this kind of stuff and they’re going to spray it in train subways, airplanes, airports, hotels, schools, and the vaccinated people their lungs are going to turn into pulmonary fibrosis cartilage and they’re all going to die.

Those who are vaccinated will die. He said, “You haven’t even seen the die off yet.” He goes, “I’m the one that specializes in the prevention of mass killings. I’m the one that is the specialist and bioweapons. I am.” He’s like, “No one else is talking about this. This it’s going to happen.” He feels horrible that he hasn’t been able to prevent those who have died so far. He knows it’s venom. He knows.



## CONCLUSION



The thought that our own government is trying to poison us with snake venom may sound barbaric. But so far, everything that has unfolded from the start of this so-called pandemic has pointed to the fact that everything they're telling us is a lie. And most of what we've discovered has been surreal and almost impossible to fathom. We've also learned that they have no reservations in harming their own people.

While there's still a lot we don't know about this, we're certain that this has opened the doors and minds of many. Just like our experts and others have brought the evils of the pandemic to light, we believe that the truth will not stay hidden.



## ABOUT JONATHAN OTTO



Jonathan Otto is an investigative journalist, natural health researcher, documentary filmmaker, and humanitarian.

He has created several highly-acclaimed, groundbreaking docuseries — ***Depression, Anxiety & Dementia Secrets, Autoimmune Secrets, Natural Medicine Secrets, Women's Health Secrets, Autoimmune Answers, and Vaccine Secrets: Covid Crisis*** — covering innovative, effective natural remedies for autoimmune disease, neurodegenerative disease, mental health, cancer, and heart disease.

These docuseries — watched by millions around the world — represent Jonathan's unceasing quest to discover the root causes of debilitating diseases by interviewing over 100 world-renowned natural medicine doctors, scientists, natural health experts, and patients.

In response to this life-saving knowledge, Jonathan created ***Well of Life***, a line of doctor-formulated, 100% natural supplements specially designed to detox and fortify the body.

Jonathan's greatest reward has been hearing the testimonials from people whose lives have literally been saved with the protocols he developed.

His work has been featured in international TV broadcasts, print media, national news, and radio broadcasts. He received the awards, *Young Citizen of the Year and International Volunteer of the Year*, by the Australian government for international humanitarian contributions, which he continues to support.

Jonathan and his wife, Lori, welcomed their first son, Asher, in January 2019 and their second son, Arthur, in May 2021.