

Dr Charles Hoffe and the D-Dimer Test

By C Paardekooper

Where Does the V Distribute to?

Only 25% of the V stays in the arm. The remaining 75% distributes through out the body. It is collected by the lymphatic system and fed into the general circulation.

Once in the circulation it is absorbed into the vessel lining around capillaries, since this is where the blood flows slowest.

There are about 40 trillion mRNAs per V dose.

What is the Effect on Capillaries when mRNA is absorbed?

Normally, the cells lining the capillaries are very smooth - because this allows for the unimpeded flow of blood.

However, when these cells absorb the mRNA, they produce thousands of spike fragments on their surface, and their surface becomes rough.

Platelets interpret a rough surface as damage, and produce clotting.

The result is millions of microscopic clots in capillaries - scattered throughout the body.

These vessels and their associated tissues can become permanently damaged, especially if the tissues do not normally regenerate - i.e. heart tissue, brain tissue.

How Can We Detect these Microscopic Clots?

These clots will not show on a normal scan, since they are too small. The only way to detect them is with a blood test called a **D-DIMER TEST**

Testing the Hypothesis

Dr Charles Hoffe was alarmed at the high rate of adverse effects amongst his own patients after receiving the V. He hypothesised that the adverse effects were the result of the above mentioned micro-clots, which are undetectable by ordinary scans.

Instead, he decided to use the D-DIMER test on all V'ed patients within 1 week of the V.

Preliminary Results

62% of those v'ed had elevated D-DIMER.

Dr Charles Hoffe concluded that clotting **is not rare**, but rather occurs in **most** of the people V'ed.

Short and Long-Term Effects

Short term effects of micro-clots in the brain are -

- headache
- dizziness

- nausea
- fatigue

These are all signs of cerebral thrombosis on a clinical level.

Dr Hoffe now has 6 people in his office who now suffer permanent fatigue due to thousands upon thousands of micro-clots.

The effects of thousands of micro-clots in the capillaries of the lungs are -

- difficulty in oxygenating the blood
- reduced effort tolerance
- coronary artery hypertension

The long term effect of the increased difficulty of pushing blood through permanently damaged capillaries is RIGHT-SIDED HEART FAILURE - leading to the death of those so afflicted within 3 years. Most of those vaccinated will be dead within 3 years.

A clotted vessel is permanently damaged. That vessel never goes back to normal.

References

<https://www.youtube.com/watch?v=3zNZOgsEGbU>

<https://www.cabaltimes.com/2021/07/17/hoffe/>

Transcript of Dr Hoffe

[.....] the last time you interviewed me was actually about I think in mid-April. And this was soon after I had sent [my open letter to Bonnie Henry](#) which got me into quite a lot of trouble because I was asking awkward questions around that time. One of the things that I have always been passionate about is patient safety. Patient safety and Medical ethics. And basically the bedrock of Medical ethics is the Hippocratic oath which is to do no harm. In other words, doctors should not be harming people. And so, I initially spoke up because this is an experimental vaccine that has clear evidence of harm. And as you know, vaccines are not given to sick people. They are given to healthy people to stop them from getting sick. That is what the purpose of the vaccine is. So because vaccines are given to healthy people, there should be an absolute zero tolerance for them...for vaccines making a healthy person sick. And so that's why I got upset when I saw my patients being injured...very seriously injured by this vaccine that was supposed to be keeping them safe. And when I was last interviewed with you, I had mentioned...you asked me about [my letter to Dr. Bonnie Henry](#).... I had three people at that time in my practice who appeared to be permanently disabled by their Covid vaccine. Well, the update on that is that it is now nine people! I have nine people in my medical practice who appear....and its now five and a half months....since their Covid shot....are permanently disabled by their vaccines. And it either from lung problems or neurological problems. And so..so because I am passionate about Medical ethics, which is to do no harm, and about patient safety, which is in other words, doctors should not be injuring patients, especially healthy patients...you know these aren't sick people, these are healthy people. So...so as you know...I mean from my advocacy for patient safety, the Medico-political mechanism has come down on me. I lost 50% of my income by not being allowed to work as an emergency doctor anymore. So this fire which wiped out my medical practice last week has now deleted the rest of my income. So I went 50% to zero and lost all...I didn't have insurance on the contents of my clinic because I prefer to trust in God. God owns everything that I own. So, so I have taken some serious hits. But I am not out of the game. I am still advocating for my patient's safety and uhm...but just to give you an update...yeah just to give you an update....so, so one of the things that has caused offence in my letter to Dr. Bonnie Henry was that I asked what the mechanism of injury is. I have all these patients with neurological problems...and I have now got uhm...I can't remember how many it is...it is quite a number of people with neurological...in fact, yes, I have got 10 patients with neurological problems and six people with ongoing lung problems since that shot. My question to Dr. Bonnie Henry is, what has caused this injury? This is a new experimental treatment. So what has caused the injury? And as their doctor, how am I supposed to treat these people? What am I supposed to do about them? And of course, there were no answers. Because no one knew. This is an experiment.since going public on this and trying to ask these serious questions, I have since received wonderful information particularly from a brilliant Immunologist and Medical doctor in Germany called [Sucharit Bhakdi](#), and he explained to me how these vaccines work. And so that's what I am going to explain to your listeners. This explains exactly the answer that I was asking to Dr. Bonnie Henry

about what is the mechanism of injury for all of these vaccine injured patients that I now have. So when the Covid vaccine is injected into your arm, we now know that only 25% of it actually stays in your arm. And the other 75% is literally collected by your lymphatic system and fed into your circulation. So these little packages of Messenger RNA, and by the way, in a single dose of a Moderna vaccine, there are forty trillion Messenger RNA molecules....forty trillion that are injected into your arm. So three quarters of these are taken...are connected by the lymphaticsthey go into your bloodstream in these little packages that are designed to be absorbed into a cell. But obviously when something is in your circulation, the only cells that they can get absorbed into is the cells around your blood vessels. And the place where the absorption happens is in the capillary networks...in other words, these are the tiniest vessels where the blood slows right down....these are tiny tiny vessels. So these little packages of genes are absorbed into the cells around the blood vessels, that's the Vascular Endothelium. The packages open. The genes are released. Your body then gets to work reading these genes and manufacturing trillions and trillions of Covid spike proteins. Because even though you get 40 trillion genes, each gene can produce many many Covid spike proteins. So...and the purpose of the Spike proteins is that your body recognizes this as a foreign protein and will make antibodies against it so that you are then protected against Covid. That's the idea. But here's where the problem comes. In a virus, in a Coronavirus, that spike protein becomes part of the viral capsule. In other words, the cell wall around the virus, called the viral capsule. But it's not in the virus! It's in your cells. So it therefore becomes part of the cell wall of your vascular endothelium. Which means that these cells that line your blood vessels, which are supposed to be smooth so that blood flows smoothly, now have these little spikey bits sticking out. So it is absolutely inevitable that blood clots will form. Because your blood platelets circulate around in your blood vessels. And the purpose of blood platelets is to detect a damaged vessel and block that vessel to stop bleeding. So when the platelet comes through the capillary, it suddenly hits all these all these Covid spikes that are jutting into the inside of the vessel, it is absolutely inevitable that a blood clot will form to block that vessel. That's how platelets work. So....just as [inaudible] is absolutely predicted to cause cancer because it is full of carcinogens, these spike proteins will predictably cause blood clots because [inaudible] they are in your blood vessels. Dr. Bhakdi then said to me the way to prove this is that we need to do a blood test called a D-dimer test, um..to find out of this is really happening. So...the problem with...the blood clots we hear about through the media, that they claim are very rare are the big blood clots. These are the ones that cause strokes and clots in your brain...those are the ones that show up on CT-scans and Angiograms and MRIs. The clots I am talking about are microscopic. These are tiny...they are literally on a capillary level and they are scattered throughout your capillary network. They are not going to show on any scan. They are just too small and too scattered. So the only way to find out for sure if this predictable mechanism of clotting was actually happening was to do this blood test called a D-dimer. And so the D-dimer is a blood test that shows a recent blood clot. It doesn't show anything else other than a recent blood clot. It won't show an old blood clot. It only shows new blood clots. And so I have been now doing that on my patients...um finding people who have recently had their Covid shot within the previous seven days...it needs to be between 4 and 7 days, and doing a blood test on them called

a D-dimer. And so I am still trying to accumulate more information. But on the ones I have so far, 62% of them have evidence of clotting. Which means that these blood clots are not rare. It means the majority of people are getting blood clots that they have no idea that they are having. So Laura Lynn, the most alarming thing about this is that there are some parts of your body like your heart and your brain, and your spinal cord and your lungs, which cannot regenerate. When those tissues are damaged by blocked vessels they are permanently damaged. So I now have 6 people in my Medical practice with reduced Effort Tolerance, which means that they just get out of breath more easily than they used to. I have one fellow that used to walk to my office every week for actually for an arthritis injection and told me that he could walk two miles without any problems, and now after a quarter of a mile he is absolutely out of breath and it has been like that for five months. So on the basis of this D-dimer test which proves that the majority of people are clotting, these six people who now have Reduced Effort Tolerance, actually what has happened to them is that they have plugged up thousands of tiny capillaries in their lungs. And the terrifying thing about this is not just that these people are short of breath and they can't do what they used to be able to do. But once you block off a significant number of blood vessels to your lungs, your heart is now pumping against a much greater resistance to try and get the blood through your lungs. And the problem....so that causes a condition called Pulmonary Artery Hypertension. It's actually like high blood pressure in your lungs because the blood can't get through because so many of the vessels are blocked. And the terrifying thing of this is that people with Pulmonary Artery Hypertension usually die of right sided heart failure within three years. So the huge concern about the mechanism of injury is that these shots are causing permanent damage. And the worse is yet to come. Because, you know, there are some tissues in your body like the intestine, liver and kidney that can regenerate to quite a good degree but brain, and spinal cord, and heart muscle and lungs do not. When they are damaged, its permanent. Like all these young people who are now getting Myocarditis from these shots, they have permanently damaged hearts. It's just a matter of how mild it is. They will not be able to do what they used to be able to do. Because heart muscle does not regenerate. So this is the...this is the terrifying concern. And not only is the long term outlook very grim. But with each successive shot, the damage will add and add and add. It's going to be cumulative because you are getting more and more damaged capillaries. So...so this is the most terrifying update from my last interview with you...when I was just asking what has happened to these people and what do I do. So I still don't know what I do. Except advise people that this is not safe. It is seriously not safe. Umm I am passionate about patient safety. And that's why I have gotten to so much trouble. But but..this is terrifying evidence.

Dr. Charles Hoffe, 6th July 2021