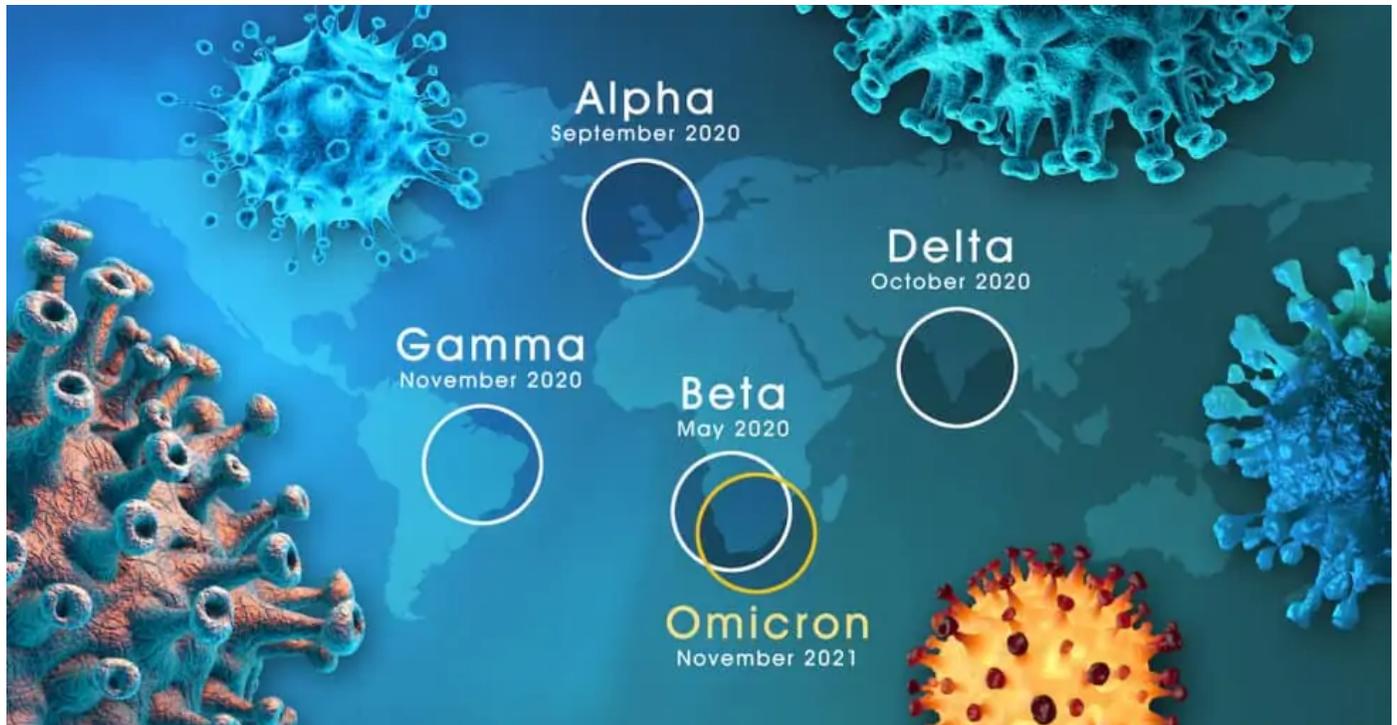


Omicron Breaks Through Natural and Vaccine Immunity in a Battle Against Delta

[Dr. Peter McCullough](#)



From an evolutionary biology perspective, we are witnessing the full range of ways a virus works to survive and propagate the species relying on hosts for replication and spreading to more hosts. As we were coming down from the formidable Delta outbreak curve, there was hope that natural immunity and whatever meager herd immunity that could have been building from mass vaccination would bring the COVID-19 pandemic to a low simmer.

Instead, we have witnessed two months of building and now explosive epidemic curves all around the world with Omicron, the most highly mutated form of SARS-CoV-2. It is now clear that Omicron can infect those with

previous COVID-19 infection and natural immunity, as well as those fully vaccinated, and of course, the smaller fraction of individuals who are COVID-19 naive.

While we have a mix of prolonged Delta cases and in many cases with moderate to severe symptoms, Omicron syndrome has been characterized as mild and brief with a notable absence of pulmonary symptoms. How did Omicron secure this large and growing ecological niche? We have learned that Omicron replicates at a 70-fold increased rate over Delta.

Additionally, Omicron appears to generate immunity not only against itself, but also against Delta, the prior dominant variant. So as Omicron moves through the population rapidly, it is providing a larger immunologic barrier to further Delta expansion and will likely work to bring down the Delta curve as the same time the Omicron peak continues to build in a sharply upward, and hopefully brief spike in cases.

There are modeling studies suggesting that the dual Lilly (bamlanivimab and etesevimab) and Regeneron (casirivimab and imdevimab) monoclonal antibody products are unlikely to neutralize Omicron, leaving only sotrovimab by GSK as the remaining monoclonal antibody in our armamentarium for high-risk seniors who develop severe symptoms with Omicron.

While many have said Omicron is "mother nature's booster," it will be some time before we can celebrate as the blend of Delta and Omicron, which present with similar features but take two separate clinical courses, is bound to confuse both the patients and the doctors trying to grapple with this new clinical reality.

Meanwhile, efforts to double down further on a failed vaccine program continue with mandates and continued coercion, which appears absurd

given the wide-open vaccine failure brought on by Omicron. In this week's show, we have a new song from **RC The Rapper**, who teams up with First Nations Country Music Singer Jordan Shingoose with the new single "Home," which is about home and the importance of medical freedom.

We also have the rockstar of evidence-based medicine, **Dr. Paul Alexander** who will update us on the evidence for natural immunity and the emergence of Omicron and how this changes the calculus for the global COVID-19 vaccine program.

So let's get real, let's get loud, on *America Out Loud Talk Radio*, this is *The McCullough Report!*

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- Venkatakrisnan, A., Anand, P., Lenehan, P., Suratekar, R., Raghunathan, B., Niesen, M. J., & Soundararajan, V. (2021, December 3). Omicron variant of SARS-CoV-2 harbors a unique insertion mutation of putative viral or human genomic origin. <https://doi.org/10.31219/osf.io/f7txy>
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Dr. Peter McCullough is an internist, cardiologist, epidemiologist, managing the cardiovascular complications of both the viral infection and the injuries developing after the COVID-19 vaccine in Dallas, TX, USA. Since the outset of the pandemic, Dr. McCullough has been a leader in the medical response to the COVID-19 disaster and has published "Pathophysiological Basis and Rationale for Early Outpatient Treatment of SARS-CoV-2 (COVID-19) Infection," the first synthesis of sequenced multidrug treatment of ambulatory patients infected with SARS-CoV-2 in the American Journal of Medicine and subsequently updated in Reviews in Cardiovascular Medicine.