

COVID-19 & Other Disease Info

Updated 2021-02-03

This is a work-in-progress document begun on April 2, 2020 that provides information on COVID-19 (and some other diseases) derived from generally acknowledged “credible” and mainstream sources, among many others. The intent is to provide some verifiable facts and voices who dare challenge the official narratives in an attempt to bring some balance to the relentless fearmongering, censorship, and conflicting information being perpetrated by government officials, mainstream media, social media, big tech and others regarding the COVID-19 pandemic.

Data presented in this document are in no particular order of importance. Further, the “Updated” date above merely reflects the last date that new information was added to the document and does not imply a comprehensive update of the entire document. Consequently, some information is likely out of date and some links may no longer be valid thanks to the ongoing censorship and lack of response by our legislators to do anything about it.

The following *Acronyms* list provides definitions for acronyms used in this document as well as many (but not all) of the organization and journalist sources used to provide data in this document.

Acronyms

AAAS	American Association for the Advancement of Science
AAPS	Association of American Physicians and Surgeons
ACAAI	American College of Allergy, Asthma & Immunology
ACP	American College of Physicians
ACSH	American Council on Science and Health
ACWT	America Can We Talk
ADA	American Diabetes Association
AEI	American Enterprise Institute
AHA	American Heart Association
AHRP	Alliance for Human Research Protection
AIER	American Institute for Economic Research
AJM	American Journal of Medicine
AP	Associated Press
ASA	American Sociological Association
ASM	American Society for Microbiology
AZ	Azithromycin
BMJ	British Medical Journal
CDC	Centers for Disease Control and Prevention
CEBM	Centre for Evidence-Based Medicine (Oxford University)
CID	Clinical Infectious Diseases
CIDRAP	Center for Infectious Disease Research and Policy
COVID-19	Coronavirus Disease 2019
CQ	Chloroquine
Ct	Cycle Threshold (number of PCR amplification cycles)

DHHS	Department of Health and Human Services
DNA	Deoxyribonucleic Acid
DOJ	(The United States) Department of Justice
DSHS	Department of State Health Services
EJCI	European Journal of Clinical Investigation
EPA	Environmental Protection Agency
FDA	Food and Drug Administration
FEE	Foundation for Economic Education
FLCCC	Front Line COVID-19 Critical Care Alliance
GOF	Gain-of-Function
HCID	High Consequence Infectious Diseases
HCQ	Hydroxychloroquine
HIV	Human Immunodeficiency Virus
HRSA	Health Resources & Services Administration
IDSA	Infectious Diseases Society of America
IGTRCN	Insect Genetic Technologies Research Coordination Network
IJID	International Journal of Infectious Diseases
IJVV	International Journal of Vaccines & Vaccinations
IUVA	International Ultraviolet Association
JAMA	Journal of the American Medical Association
JHCHS	Johns Hopkins Center for Health Security
JHSPH	Johns Hopkins School of Public Health
MedRxiv	Preprint Server for Health Sciences
MERS	Middle East Respiratory Syndrome
MIT	Massachusetts Institute of Technology
MNT	Medical News Today
mRNA	Messenger RNA (synthesized RNA molecule)
MSM	Mainstream Media
NASEM	National Academies of Sciences Engineering Medicine
NatGeo	National Geographic
NCBI	National Center for Biotechnology Information
nCoV	Novel Coronavirus
NEJM	New England Journal of Medicine
NIAID	National Institute of Allergy and Infectious Diseases
NIH	National Institutes of Health
NPR	National Public Radio
NRCC	National Research Council Canada
NYLJ	New York Law Journal
NYP	New York Post
NYT	New York Times
OSHA	Occupational Safety and Health Administration
PCR	Polymerase Chain Reaction
PPE	Personal Protection Equipment
RNA	Ribonucleic Acid
RSOS	Royal Society Open Science
RT-PCR	Reverse Transcriptase- Polymerase Chain Reaction
RT-qPCR	Reverse Transcription-Quantitative Polymerase Chain Reaction
SARS	Severe Acute Respiratory Syndrome

SD	Science Direct
TWiV	This Week in Virology
TWT	The Washington Times
UN	United Nations
UNICEF	United Nations Children's Fund
USG	United States Government
UV	Ultraviolet radiation
VAERS	Vaccine Adverse Event Reporting System
WaPo	The Washington Post
WEF	World Economic Forum
WHO	World Health Organization
WSJ	Wall Street Journal

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[Dr Risinger - Implores NIH and WHO to Review Evidence that Ivermectin is a Game Changer for COVID-19](#) (2020-12-29)
[Artemisinin from Sweet Wormwood Inhibits SARS-CoV-2](#) (2021-01-04)
[WSJ: Hospitals Return to Basics for COVID Treatment](#) (2020-01-06)
[Could Most COVID-19 Deaths Have Been Prevented?](#) (2021-01-18)
[Is Niacin a Missing Piece of the COVID Puzzle?](#) (2021-01-20)
[After 440,000 Americans are Dead - Facebook and American Journal of Medicine Admit Their Stand on HCQ Was Wrong - These people Should Be Prosecuted!](#) (2021-01-28)
[Ivermectin - A New Way of Defeating COVID-19](#) (2021-01-30)
[Journal of Medicine Says HCQ +Zinc Reduces COVID Deaths](#) (2021-02-01)

Vaccines, Side Effects & Deaths

[75-Year Old Israeli Man Dies 2 Hours after Getting COVID-19 Vaccine](#) (2020-12-28)
[Nurse Gets Bells Palsy from "Vaccine"](#) (2020-12-28 duration 3:18)
[Hundreds of Israelis Get Infected with COVID-19 after Receiving Pfizer/BioNTech Vaccine - Reports](#) (2021-01-01)
[Mexican Doctor Hospitalized After Receiving COVID-19 Vaccine](#) (2021-01-02)
[Portuguese Health Worker, 41, Dies Two Days After Getting the Pfizer COVID Vaccine as Her Father Says He 'Wants Answers'](#) (2021-01-04)
[32-Year Old Mexican Doctor Suffers Seizures and is Paralyzed After Receiving the Pfizer Experimental Vaccine](#) (2021-01-05)
[Hundreds Sent to Emergency Room after Getting COVID-19 Vaccines](#) (2021-01-05)

[EXCLUSIVE: Wife of 'Perfectly Healthy' Miami Doctor, 56, Who Died of a Blood Disorder 16 Days after Getting Pfizer COVID-19 Vaccine is Certain It Was Triggered by the Jab, as Drug Giant Investigates First Death with a Suspected Link to Shot](#) (2021-01-06)

[Texans among Dozens Reporting Allergic Reactions to COVID-19 Vaccine, CDC Still Recommends](#) (2021-01-06)

[Coronavirus Vaccinations Seem to be Causing 50 Times the Adverse Events of Flu Vaccination after Just the First of Two Shots](#) (2021-01-06)

[Norway Probes Deaths of Two Nursing Home Residents Who Got Pfizer's COVID Vaccine](#) (2021-01-07)

[Vaccine Rollout Hits Snag as Health Workers Balk at Shot](#) (2021-01-08)

[Pfizer Vaccine Deaths Mount in Israel as 240 Contract COVID 19 after Injection](#) (2021-01-09)

[Coffey County Health Department Nurses Decline to Give the COVID Vaccine](#) (2021-01-13)

[Side-Effects of Second Dose of Vaccine Even Worse than from the First Dose](#) (2021-01-13)

[Johns Hopkins Scientist: 'A Medical Certainty' Pfizer Vaccine Caused Death of Florida Doctor](#) (2021-01-13)

[Shawn Skelton after Moderna COVID19 Vaccine!](#) (2021-01-14 – deleted from YouTube and Facebook)

[Compilation of Recent Stories and Videos Covering COVID Vaccine Injuries, Side Effects and Deaths](#) (2021-01-14)

[10 Dead In Germany within 4 Days of COVID-19 Vaccine Inoculation; Probe Ordered](#) (2021-01-15)

[CDC Vaccine Adverse Event Reporting System \(VAERS\) Results](#) (2021-01-15)

[55 People Have Died in US After Receiving COVID-19 Vaccines: Reporting System](#) (2021-01-16)

[13 Israelis Suffer Facial Paralysis After Taking Pfizer COVID Jab, Amid Influx of Reports Detailing Adverse Effects](#) (2021-01-16)

['Not Alarmed' Norway Adjusts COVID Vaccine Advice On Who Gets Jab After Doctors 'Can't Rule Out' Side Effects Were Behind 23 Deaths](#) (2021-01-16)

[COVID-19 Vaccine Side Effects World Map](#) (2021-01-17)

[Adverse Events Post COVID-19 Vaccination: AIMS' Security Guard Admitted to ICU](#) (2021-01-18)

[CDC, FDA Investigating California Moderna COVID-19 Vaccine Lot with 'Higher Than Usual' Allergic Reactions](#) (2021-01-18)

[Top Medical Inventor: COVID mRNA "Vaccine" Not A Vaccine](#) (2021-01-19 duration 28:58)

[A Man and Woman in South Dakota Die a Day After Getting COVID-19 Vaccines](#) (2021-01-24)

[32 Nursing Home Residents Die in COVID-19 Outbreak During Mass Vaccination Drive](#) (2021-01-24)

[NYP: Merck Scraps COVID-19 Vaccines That Produced 'Inferior' Immune Response](#) (2021-01-25)

[CNA Nursing Home Whistleblower: Seniors Are Dying Like Flies After COVID Injections!](#) (2021-01-26 duration 47:17)

[Seniors Dying After COVID Vaccine Labeled As Natural Causes](#) (2021-02-02)

Videos

[Lies, Damned Lies, and Government Statistics](#) (2013-12-11 duration 5:39)

[More Deadly Than War - A Lecture by G. Edward Griffin \(April 3, 1969\)](#) (2016-10-08 duration 1:14:36)

[Important Vaccine Message](#) (2019-07-24 duration 06:03)

[Fauci on 60 Minutes: Coronavirus: Should You Wear a Face Mask?](#) (2020-03-08 duration 1:27)

[Covid-19 Virus Conspiracy? Facts vs Fiction: Part 1-Dr. Rashid A. Buttari](#) (2020-03-22 duration 13:45)

[Perspectives on the Pandemic | Dr. John Ioannidis of Stanford University | Episode 1](#) (2020-03-26 Journeyman Pictures duration 1:02:46)

[Questioning Conventional Wisdom in the COVID-19 Crisis, with Dr. Jay Bhattacharya](#) (2020-03-31 duration 32:53)

[Perspectives on the Pandemic | Professor Knut Wittkowski | Episode 2](#) (2020-04-03 Journeyman Pictures duration 41:30)

[Dr. Ioannidis on Why We Don't Have Reliable Data Surrounding COVID-19](#) (2020-04-03 Journeyman Pictures duration 9:49)

[Former Vodafone Boss Blows the Whistle on 5G - Coronavirus \[Audio Only\]](#) (2020-04-04 duration 32:06)

[NYC Doctor Claims COVID-19 Is Not What They Say It Is! "We Are Treating The Wrong Disease"](#) (2020-04-05 duration 6:03 Dr. Cameron Kyle-Sidell)

[David Icke's Explosive Interview with London Real - The Video That YouTube Doesn't Want You to See](#) (2020-04-06 duration 2:34:02)

[1st Documentary Movie on the Origin of CCP Virus, Tracking Down the Origin of the Wuhan Coronavirus](#) (2020-04-07 duration 54:16)

[Dr. Andrew Kaufman Rejecting CoronaVirus](#) (2020-04-08 duration 38:17)

[How Honest is the COVID Fatality Count? Dr. Scott Jensen is a Physician & Minnesota State Senator.](#) (2020-04-09 duration 7:58)

[Are COVID 19 Deaths Being Inflated By The CDC?](#) (2020-04-12 duration 10:27 Dr. Eric Nepute)

[Coronavirus Pandemic Update 54: COVID-19 Antibody vs. PCR Testing; When to Relax Social Distancing?](#) (2020-04-13 MedCram Dr Roger Seheult, MD duration 15:46)

[Coronavirus Pandemic Update 55: How COVID-19 Infection Attacks the Immune System & Differs from HIV](#) (2020-04-14 MedCram Dr. Roger Seheult, MD duration 11:08)

[NYT: Doctors Facing Troubling Question: Are They Treating Coronavirus Correctly?](#) (2020-04-14 duration 7:08)

[Low Blood Oxygen \(Hypoxia\), Pulse Oximeters, Hemoglobin and COVID-19](#) (2020-04-15 duration 4:08 Dr. Jason Sonners)

[Part 1 of 4 - Time to WAKE UP! | Dr Rashid A Buttar](#) (2020-04-16 duration 7:53)

[Part 2 of 4 - Time to WAKE UP! | Dr Rashid A Buttar](#) (2020-04-17 duration 9:51)

[Part 3 of 4 - Time to WAKE UP! | Dr Rashid A Buttar](#) (2020-04-19 duration 6:50)

[Part 4 of 4 - Time to WAKE UP! | Dr Rashid A Buttar](#) (2020-04-21 duration 8:19)

[Dr. Kyle-Sidell: For the Medical Community! Could COVID-19 Be Causing Diffusion Hypoxemia?](#) (2020-04-17 duration 7:15)

[Lies, Damned Lies and Coronavirus Statistics](#) (2020-04-17 duration 1:07:33)

[The Truth About Fauci Featuring Dr. Judy Mikovits](#) (2020-04-19 duration 7:49)

[Dr. Birx Admits Coronavirus Death Count "Liberal", "Different"](#) (2020-04-19 duration 1:18)

[Larry Elder: What Exactly Did the Experts Say About the Coronavirus Outbreak?](#) (2020-04-20 duration 13:22)

[Earthfiles Clip: Professor of Cellular Neurobiology, Jay Couey, Ph.D. on COVID-19 & RT-PCR Test Issues](#) (2020-04-21 duration 20:33 of original 1:00:39 full video)

[#COVID-19 Is Caused By Vaccines | Dr. Judy Mikovits, PhD](#) (2020-04-23 duration 32:28 – Misleading title)

[Part 2 of 4 - Roundtable Discussion with Dr. Judy Mikovits | Dr Rashid A Buttar](#) (2020-04-25 duration 29:54)

[Healight by Aytu BioScience at Cedars-Sinai](#) (2020-04-25 duration 1:48 – Censored on YouTube)

[Exposing How Taiwan's Warning Was Ignored By Corrupt WHO | Melissa Chen | Coronavirus | Rubin Report](#) (2020-04-25 duration 42:42)

[Dr Shiva Ayyadurai Exposing Big Pharmas, Hospitals and Vaccines](#) (2020-04-27 duration 1:26:30)

[YouTube Now Censoring Doctors Who Question Govt? Dave Rubin Responds | MEDIA | Rubin Report](#) (2020-04-29 duration 4:59)

[Project Veritas: BREAKING: Funeral Directors in COVID-19 Epicenter Doubt Legitimacy of Deaths Attributed to Pandemic](#) (2020-04-30 duration 9:58)

[Dr. Ioannidis on Results of Coronavirus Studies](#) (2020-04-30 duration 7:38)

[The Long Anticipated Part 6 of "COVID-19 Conspiracy?" Series: Episode 1 of 4 | Dr Rashid A Buttar](#) (2020-04-29 duration 32:23 with Dr. Bruce Lipton and Dr. Judy Mikovits)

[The Long Anticipated Part 6 of "COVID-19 Conspiracy?" Series Episode 2 of 4 | Dr Rashid A Buttar](#) (2020-04-30 duration 23:54)

[The Long Anticipated Part 6 of "COVID-19 Conspiracy?" Series: Episode 3 of 4 | Dr Rashid A Buttar](#) (2020-05-01 duration 31:22)

[MUST SEE: How Bill Gates Monopolized Global Health](#) (2020-05-01 duration 23:57 Corbett Report)

[Nobel Prize Winning Scientist Prof Michael Levitt: Lockdown is a "Huge Mistake"](#) (2020-05-02 duration 34:33)

[Nicole Sirotek: First-Hand Testimony of What's Really Going On In NY!](#) (2020-05-04 duration 23:58)

[#ExposeCBS Michigan Health Center Workers Stage "Fake Patients" in COVID19 Testing Line for CBS News](#) (2020-05-06 duration 11:44)

[Dr. Anthony Fauci's Ex-Employee, Jailed, Tells All \(Full Video\) AKA Pandemic](#) (2020-05-06 duration 26:07)

[OAN Reports Deep State, China Uses COVID-19 for Population Control](#) (2020-05-07 duration 4:04)

[Luciferase - Bill Gates Quantum Dot Microneedle Vaccine to Alter Your DNA](#) (2020-05-08 duration 20:54)

[Dr Jeffrey Barke Speaks Out On COVID 19 Madness](#) (2020-05-09 duration 6:07 – thousands of doctors are being silenced)

[Dr Bruce Lipton - Coronavirus Perspective Stop the Worry](#) (2020-05-16 duration 3:03)

[Dr. Shiva Ayyadurai](#) (2020-05-21 duration 9:59)

[Lancet Retracts Bogus HCQ Harm Study and WHO Resume HCQ Trials](#) (2020-06-04 duration 0:49)

[Karl Friston: Up to 80% Not Even Susceptible to Covid-19](#) (2020-06-04 duration 34:14)

[Perspectives on the Pandemic | The \(Undercover\) Epicenter Nurse | Episode Nine](#) (2020-06-09 duration 1:10:34)

[Police State Contagion: US Plan to Use Bioweapons to Impose Martial Law One Quarantine at a Time](#) (2020-05-22 duration 14:54)

[UNDR3COV3R - NUR\\$3 Turned Journalist - Exposes New York's Elmhurst Hospital](#) (2020-06-14 duration 25:07)

[Taught to Believe Masks Aren't Harmful, Here's Proof It Is!](#) (2020-06-28 duration 14:21)

[New Studies Prove COVID-19 Fatality Rate is as Low as 0.1%, Roughly the Same as the Flu](#) (2020-07-02 duration 3:14)

[Dr. Rashid A Buttar Why Everyone Could Test Positive](#) (2020-07-02 duration 5:30)

[Dr. Richard Bartlett | ACWT Interview 7.2.20](#) (2020-07-03 duration 31:11 – Dr. Bartlett of Midland, TX on Budesonide corticosteroid COVID treatment)

[Doctor Kelly Victory Is Explaining Everything \(the Truth\) About COVID-19](#) (2020-07-04 duration 17:31 Kelly Victory, M.D. Trauma & Emergency Specialist Steamboat Springs, CO)

[Agenda 21 Is a Plan to Depopulate 95% of the World Population By 2030](#) (2020-07-06 duration 48:04 – Misleading title: It's an interview with a doctor about COVID who challenges the official narrative except for the last minute)

[Truth That Will Blow Your Mind Dr Rashid Buttar](#) (2020-07-07 duration 30:14 – Regarding Masks)

[McKinney Doctor On Covid 19 How He Treats This](#) (2020-07-07 duration 9:42 – Brian C. Proctor, M.D. @ McKinney Family Medicine McKinney, TX)

[Doctor Jensen Being Investigated By United State Board After COVID-19 Comments](#) (2020-07-08 duration 21:56)

[What Is Causing the Spike in COVID-19 Cases?](#) (2020-07-09 duration 22:36 – Dr. Jeffrey Barke, M.D. Newport Beach, CA)

[WEF: COVID-19: The Great Reset](#) (2020-07-14 duration 1:02:44)

[TWiV 641: COVID-19 with Dr. Anthony Fauci](#) (2020-07-16 duration 36:46 at ~4:25 Fauci concedes that PCR test cycle thresholds of 35 or more “the chances of it being replication confident are minuscule” i.e., essentially worthless yet CDC/FDA recommendations are to do up to 40 cycles)

[Trust Stamp, Digital Vaccine Record, Cashless Payment System, Biometric Program](#) (2020-07-20 duration 10:57)

[CBS: Bill Gates on Coronavirus Vaccine Trials](#) (2020-07-25 duration 2:57)

[30,000 Volunteers for Phase 3? All Fake](#) (2020-07-28 duration 7:10)

[See the DC Doctor Press Conference Big Tech Is Fighting to Suppress](#) (2020-07-28 duration 47:44)

[Quick Demo of How Masks \(Don't\) Help](#) (2020-08-01 duration 6:07 – Dr. Ted Noel)

[Don't Do Your Own Research!!! - #PropagandaWatch](#) (2020-08-05 duration 26:06)

[The Great Reset: Davos & the Plot to Cancel Trump](#) (2020-08-06 duration 25:18)

[Plandemic Indoctrination World Premiere](#) (2020-08-18 duration 1:24:05 MUST SEE VIDEO!)

[Bombshell Report: 90% of Positive COVID-19 Tests Should Be Negative](#) (2020-09-02 duration 3:52)

["COVID" for Ages 50-64 - UCLA & Stanford Studies Your Chances of Dying](#) (2020-09-11 duration 2:50)

[Is There A Flu Shot / COVID Link? - Questions for Corbett](#) (2020-09-15 duration 24:12)

[1,000+ Doctors Come Out Against COVID](#) (2020-09-19 duration 9:31)

[FOX: Coronavirus Whistleblower Speaks Out About Possible COVID Origin on 'Tucker'](#) (2020-09-15 duration 6:36)

[Crimes Against Humanity \(Dr. Reiner Fuellmich\)](#) (2020-10-04 duration 49:00)

[Dr Chistiane Northrup Discusses the Covid 19 Vaccine Mark of Beast!](#) (2020-10-07 duration 37:59)

[Dr. Elke De Klerk: We Do Not Have a Medical Pandemic](#) (2020-10-16 duration 2:20)

[Watch Censored World Doctors Alliance Speak Out Against World Lockdown](#) (2020-10-17 duration 16:49)

[Doctors Speak Out Against Masks](#) (2020-10-18 duration 4:11)

[Your Guide to The Great Reset](#) (2020-10-18 duration 1:11:57)

[How the EU Stopped the Pandemic \(The Comic\) - #PropagandaWatch](#) (2020-10-21 duration 13:21)

[America's Frontline Doctors - White Coat Summit II](#) (2020-10-22 duration 36:41)

[World Doctors Alliance 10-10-2020](#) (2020-10-15 duration 17:13)

[Govts & Public Ignore Studies Showing No Spread of COVID at Schools, Daycares](#) (2020-10-22 duration 23:01)

[The Truth About the Coronavirus Vaccine Trials - #NewWorldNextWeek](#) (2020-10-29 duration 23:45)

[The COVID-19 Genocide of 2020 By Claire Edwards](#) (2020-10-29 duration 21:13)

[After the Virus: The World of 2025](#) (2020-10-31 duration 22:10)

[COVID-19: Exposed \(Official Movie\)](#) (2020-11-03 duration 30:20)

[America's Frontline Doctors Summit II - Corruption of the Scientific Process - Dr. James Todaro](#) (2020-11-05 duration 16:04)

[KLA.TV - Dr. Carrie Madej Warns About New Vaccine Technology](#) (2020-11-07 duration 24:29)

[87 Thousand Doctors/Nurses Come Out Against COVID 19 & Vaccine](#) (2020-11-12 duration 4:18)

[Dr. Roger Hodkinson: This is a Meeting Privately Recorded in Edmonton Alberta Canada](#) (2020-11-17 duration 5:27 – Dr. Hodkinson statements on the COVID-19 hoax)

[The Great Reset: SECRET Plot to Reset the Economy? \(FED\)](#) (2020-11-23 duration 8:29)

[What NO ONE is Saying About the Lockdowns](#) (2020-11-24 duration 9:08)

[Thousands of Doctors Declare Lockdown Harmful to Public Health | Pearson Sharp Reports](#) (2020-11-24 duration 2:52)

[Dr. Ron Paul: Covid 19 Vaccines: Paving the Way for the Surveillance State](#) (2020-12-03 duration 30:50)

[America in Twilight: Calling All Patriots](#) (2020-12-03 duration 36:36)

[Your Guide to the Great Monetary Reset](#) (2020-12-04 duration 1:08:58)

[Dark Journalist - Catherine Austin Fitts Stopping the Technocrat Takeover!](#) (2020-12-06 duration 1:10:07)

[Top EU Scientist Warns COVID-19 Vaccine Linked to Sterilization of Women](#) (2020-12-06 duration 59:59)

[Don't Trust Any COVID Vaccine](#) (2020-12-07 duration 28:34 – International doctors speak out against COVID Vaccine)

[Dr. Pierre Kory Senate Testimony on Early COVID-19 Treatments](#) (2020-12-09 duration 8:42)

[Preventing COVID-19: Dr. Pierre Kory Pushes for Approval of Ivermectin for Treatment of COVID-19](#) (2020-12-12 duration 10:20)

[The Future of Vaccines](#) (2020-12-23 duration 41:34)

[PCR Deception](#) (2020-12-24 duration 15:07 - PCR test inventor Dr. Kary Mullis on Fauci and much more)

[Learn How COVID-19 Controllers Took Over The World In 2020 - The Truth About COVID-19](#) (2020-12-26 duration 21:42)

[Nurse Gets Bells Palsy from "Vaccine"](#) (2020-12-28 duration 3:18)

[The 1976 Swine Flu Hoax. COVID-19 Is Not the First Fake Pandemic Hoax to Push Dangerous Vaccines](#) (2020-12-31 duration 15:05 – 1979 Mike Wallace 60 Minutes Story)

[Doctors Refuse Vaccine! - The Fight Has Just Begun!](#) (2021-01-02 duration 12:55)

[Brave Reporter Goes Off Script \(Risk Life to Reveal Truth About COVID On-Air\)](#) (2021-01-03 duration 16:35)

[Whistleblower: NYC's COVID Nightmare](#) (2021-01-04 duration 13:06)

[New Study Suggests Strong COVID-19 Immunity Lasts Nearly 8 Months](#) (2021-01-09 duration 2:30)

[Shawn Skelton after Moderna COVID19 Vaccine!](#) (2021-01-14 – deleted from YouTube and Facebook)

[COVID and the Vaccine](#) (2021-01-14 duration 56:08 – Dr. Simone Gold)

[Bio-Warfare & Weaponization of Medicine Amid COVID](#) (2021-01-15 duration 30:11)

[Top Medical Inventor: COVID mRNA "Vaccine" Not A Vaccine](#) (2021-01-19 duration 28:58 – Dr. Lee Merrit, MD)

[Vernon Coleman - The PCR Test Is Useless for COVID19 \(But Useful for Crooked Governments\)](#) (2021-01-23 duration 6:28)

[World Health Organization Revises PCR Tests After Current Method Yielded Too Many 'False Positives'](#) (2021-01-23 duration 2:16)

[Health Care Policy Advisor, Dr. Scott Atlas, MD, on New York Nursing Homes, COVID-19 & Mask Mandates](#) (2021-02-01 duration 5:21)

[Planet Lockdown | Catherine Austin Fitts \(Full Interview\)](#) (2021-02-01 duration 48:31)

[Doctors Playing Into Delusional Fear - COVID & Masks](#) (2021-02-03 duration 3:44)

Leading Causes of Death

[CDC: Leading Causes of Death \(Data are for the U.S.\)](#)

[MNT: What Are the Leading cause of Death in the US?](#)

1. Heart disease: 647,457
2. Cancer: 599,108
3. Accidents (unintentional injuries): 169,936
4. Chronic lower respiratory diseases: 160,201
5. Stroke (cerebrovascular diseases): 146,383
6. Alzheimer's disease: 121,404
7. Diabetes: 83,564
8. Influenza and pneumonia: 55,672

9. Kidney disease (nephritis, nephrotic syndrome, and nephrosis): 50,633
10. Intentional self-harm (suicide): 47,173

Yet never in U.S. history has any one of them motivated the government to shut down the entire country resulting in the collapse of our economic system, destruction of thousands of businesses, putting tens of millions of people out of work, and unconstitutionally placing everyone under virtual house arrest (for 6 weeks as of April 30, 2020).

COVID-19 (Coronavirus) 2019-2020 Pandemic

[CDC: Cases of Coronavirus Disease \(COVID-19\) in the U.S.](#) (as of 2020-04-24)

[CDC: Coronavirus Disease 2019 \(COVID-19\)](#)

1. 895,766 COVID-19 cases including “probable” cases in the U.S.
2. 50,439 COVID-19 deaths including “probable” deaths in the U.S.
3. 661,712 PUI (People Under Investigation) cases in the U.S. (as of 2020-04-14)

Authority Figure Quotes, Changing Projections and Inflated Death Counts

[Fauci on 60 Minutes: Coronavirus: Should You Wear a Face Mask?](#) (3030-03-08 duration 1:27)

[Larry Elder: What Exactly Did the Experts Say About the Coronavirus Outbreak?](#)

[Bloomberg: 99% of Those Who Died From Virus Had Other Illness, Italy Says](#) (2020-03-18)

[Dr. Ioannidis on Why We Don't Have Reliable Data Surrounding COVID-19](#) (2020-04-03 Journeyman Pictures duration 9:49)

[NatGeo: See How a Sneeze Can Launch Germs Much Farther Than 6 Feet](#) (2020-04-17)

[The Truth About Fauci - Featuring Dr. Judy Mikovits](#) (2020-04-20)

[OAN Host Claims That the COVID-19 Death Count is Inflated and That Hospitals Are "Fudging the Numbers"](#) (2020-04-21)

[Coronavirus Hype Biggest Political Hoax in History](#) (2020-04-28)

[YouTube Yanks Doctors' Warning of Constitutional Crisis of COVID-19](#) (2020-04-30)

[Project Veritas: BREAKING: Funeral Directors in COVID-19 Epicenter Doubt Legitimacy of Deaths Attributed to Pandemic](#) (2020-04-30 duration 9:58)

[Majority of US Spy Agencies Believe the Coronavirus Escaped from Wuhan Lab](#) (2020-05-02)

[Doctors Say Herd Immunity Will Bring the End of COVID-19](#) (2020-05-02)

[Dr Jeffrey Barke Speaks Out On COVID 19 Madness](#) (2020-05-09 duration 6:07 – thousands of doctors are being silenced)

[Why COVID-19 Is Not the 3rd Leading Cause of Death](#) (2020-10-29)

1. Fauci, January 21: “This is not a major threat to the people in the United States”
2. Nancy Pelosi in China Town, February 24: “Everything’s fine here.” “Come to China Town... Come join us.”
3. NYC Mayor de Blasio, “There’s very little threat here. This disease, even if you were to get it, basically, acts like a common cold or flu.”
4. De Blasio, February 14: “It should not stop you from going about your lives. It should not stop you from going to China Town and going out to eat.”

5. Fauci, March 8: “Wearing a mask might make people feel a little bit better and it might even block a droplet, but it’s not providing the perfect protection that people think that it is and often there are unintended consequences...”
6. De Blasio, March 13: “We want people still to go on about their lives.
7. WHO Dr. April Baller: “If you do not have any respiratory symptoms, such as fever, cough or runny nose, you do not need to wear a medical mask like this one. Masks alone can give you a false feeling of protection and can even be a source of infection when not used correctly. Masks should only be used by healthcare workers, caretakers or by people who are sick with symptoms like fever and cough ”
8. Cuomo’s Medical Expert, Dr. Howard Zucker: “There’s no data to support the effectiveness of face masks...”
9. Fauci: “If this virus acts like every other virus that we know, once you get infected, get better, clear the virus and you’ll have immunity that will protect you from reinfection.”
10. Fauci February projections: 100,000 to 240,000 deaths in the U.S.
11. Fauci March projections: More than 100,000 deaths
12. Fauci April projections: 60,000 deaths
13. Fauci: “I’ve never seen a [computer] model of the diseases I’ve dealt with where the worst-case scenario actually came out. They always overshoot.”
14. Case counts and death counts include both confirmed and “probable” cases and deaths whether tested or not
15. 99% of those who died from virus in Italy had underlying illnesses
16. Doctors are being pressured to add COVID-19 to death reports
17. Few autopsies have been performed, but some show no presence of COVID-19 as cited on the death certificate
18. Federal government doles out more money for hospitals that report more COVID-19 cases as the cause of death
19. NYC Funeral Directors and doctors claim COVID numbers are being inflated
20. Doctors and scientists who challenge the official COVID-19 narrative are increasingly being censored by big tech social media like YouTube, Facebook and Google
21. Pennsylvania removes more than 200 deaths from official coronavirus count as questions mount about reporting process, data accuracy.
22. Stay-at-Home and cleaning all surfaces with disinfectants decreases your immune system’s ability to do its job
23. Shelter-in-place, social distancing and wearing masks all inhibits herd immunity
24. A sneeze can expel droplets at 100 mph and up to 27 feet and can remain airborne for many minutes. The jury is still out on whether COVID-19 can be spread by aerosols (i.e., smaller droplets)
25. Thousands of physicians across the country are being silenced because they disagree with the mainstream media and the “experts” who are telling them what to do.

Coronavirus Pandemic 2020: Environment Omitted

[Jim West: Coronavirus Pandemic 2020: Environment Omitted](#)

[Dr. Sucharit Bhakdi: Epicenters Have "Horrorific" Air Pollution in Common Who: Coronavirus Symptoms \(same as those caused by air pollution\)](#)

1. Major epicenters (e.g., Wuhan, N. Italy, NYC) have highest air pollution in the world
2. Major U.S. epicenters began in NYS (same locations as measles outbreak in 2019)
3. Symptoms same as air pollution symptoms
4. Dr. Devra Davis, President of Clinton's Chemical Safety and Hazard Investigation Board, has documented air pollution cover-ups
5. NY/NJ/CT and New Orleans Gulf regions are within the two largest petrochemical industrial regions in the U.S.

COVID-19 Hypoxia Evidence

[NYC Doctor Claims COVID-19 Is Not What They Say It Is! "We Are Treating The Wrong Disease"](#) (2020-04-05 duration 6:03)

[NYT: Doctors Facing Troubling Question: Are They Treating Coronavirus Correctly?](#) (2020-04-14 duration 7:08)

[Low Blood Oxygen \(Hypoxia\), Pulse Oximeters, Hemoglobin and COVID-19](#) (2020-04-15 duration 4:08 Dr. Jason Sonners)

[Health: 'Silent Hypoxia' Is Making Some Coronavirus Patients Critically Ill--Here's Why It's So Dangerous](#)

[Fox News: 'Silent Hypoxia' May Be Killing COVID-19 Patients, But One Doctor Offers a Possible Solution](#)

[NYT: The Infection That's Silently Killing Coronavirus Patients](#)

[NY Emergency Medicine Physician Claims COVID-19 Is An Oxygen Deprivation Disease Not Like Pneumonia](#)

1. COVID-19 appears to be more like ARDS (Acute Respiratory Distress Syndrome)
2. Resembles high altitude sickness
3. Does not act like pneumonia
4. Patients have low blood oxygen levels

Wuhan Lab, Gain-of-Function & Event 201 Pandemic Simulation

[1st Documentary Movie on the Origin of CCP Virus, Tracking Down the Origin of the Wuhan Coronavirus](#) (2020-04-07 duration 54:16)

[TechStartups: Shocking: U.S. Government Gave \\$3.7 Million Grant to Wuhan Lab Accused of Being the Source of Coronavirus Outbreak...](#) (2020-04-13)

[CIDRAP: Feds Lift Gain-of-Function Research Pause, Offer Guidance](#) (2017-12-19)

[Wuhan Lab Virus Leak 'No Longer Discounted': Cobra](#) (2020-04-06)

[First Coronavirus Patient Had No Connection to Wuhan Seafood Market-So Did the Disease Start Elsewhere?](#) (2020-02-18)

[JHCHS: Event 201 Pandemic Exercise](#) (2019-10-18)

[US Officials Confirm Full-Scale Investigation of Whether Coronavirus Escaped from Wuhan Lab](#) (2020-04-17)

1. Patient zero had never been to the Wuhan seafood market
2. U.S. government gave \$3.7 million to Wuhan lab and has funded coronavirus research for over a decade

3. U.S. government lifted the 3 year ban on ‘Gain-of-Function’ research on potential pandemic viruses. NOTE: GOF is the process of making dangerous pathogens even more dangerous so they have an enhanced potential for creating pandemics. What could possibly go wrong?
4. On October 18, 2019, Johns Hopkins Center for Health Security along with the Bill and Melinda Gates Foundation modeled a coronavirus pandemic that killed 65 million people over an 18 month period. Hey, but it wasn’t a prediction of what was to come just a few weeks later. It was probably just another coincidence like the USG defense war games involving terrorists hijacking planes and flying them into high-profile buildings that were in progress the same morning of 9/11.

COVID-19 Potential Treatments

[NIH: Post-exposure Prophylaxis / Preemptive Therapy for SARS-Coronavirus-2](#) (Preliminary clinical trial results scheduled for 2020-04-21)

[AP: Aytu BioScience Signs Exclusive Global License with Cedars-Sinai for Potential Coronavirus Treatment](#) (2020-04-20)

[Aytu BioScience Signs Development Agreement with Sterling Medical Devices to Advance the Development of Healight as Potential Coronavirus Treatment](#) (2020-04-27)

[Sequential CQ/HCQ Research Papers and Reports January to April 20, 2020](#) (2020-04-20)

[Harvard: Treatments for COVID-19 - Harvard Health](#) (2020-04-24)

[JHSPH: What is Herd Immunity and How Can We Achieve It With COVID-19?](#) (2020-04-10)

[Potential New Treatment for COVID-19 Uncovered by BenevolentAI Enters Trials](#) (2020-04-14)

[AAPS: A Tale of Two Drugs: Money vs. Medical Wisdom](#) (2020-05-07 -- \$10 vs \$1000)

[Dr Karladine Graves Talks About Hydroxychloroquine](#) (2020-05-17 duration 11:18)

From the AAPS article above: “HCQ has been off patent for decades, is available from a dozen U.S. generic manufacturers, and is also produced in China, India, Israel, and other countries. HCQ costs the patient on average *less than \$10* (range 37-63 cents per tablet), for the usual 5-7 day course of treatment. Remdesivir costs upwards of \$1,000 per dose, plus the added costs of having to be hospitalized to receive it.”

1. Hydroxychloroquine has been around for 70 years and was approved by the FDA in 1955
2. Countless reports of people who recovered from COVID-19 using Hydroxychloroquine
3. Hydroxychloroquine-Azithromycin (HCQ-AZ) studies and anecdotal evidence show great promise
4. Remdesivir and chloroquine effectively inhibit the 2019-nCoV virus in vitro
5. Chloroquine phosphate confirmed to have anti-SARS-CoV-2 effect and has been included in diagnostic and therapeutic guidelines
6. Hydroxychloroquine costs \$.63 per dose while Remdesivir costs \$1000 per dose. Any questions?
7. Baricitinib (aka Olumiant) – Clinical trials underway in Canada and soon to begin in the U.S.
8. It’s known that UV light kills viruses and bacteria
9. Healight is found to have a significant impact on eradicating a wide range of viruses and bacteria, including coronavirus
10. Convalescent Plasma (blood plasma from recovered COVID-19 patients)

11. Herd immunity - for example, if 80% of the population has been infected and recovers means that 4 out of 5 people are immune to the disease and the chances of spreading the disease are significantly reduced

COVID-19 Statistics

[ACSH: Rethinking COVID-19 Mortality Statistics](#) (2020-05-27)

From the American Council on Science and Health article above:

“There are two fundamental points often ignored when referring to “the death toll from COVID-19.”

- There is no evidence or proof offered by any scientist, pathologist, or virologist that confirms COVID-19 as the “cause” of death in the certification process.
- An expanded definition of a “COVID-19 death” was enacted by the CDC on March 24th, to include probable cases. This conflates and clusters test results creating a source of both under and overestimation. “COVID-19 deaths are identified using a new ICD-10 code. When COVID-19 is reported as a cause of death or when it is listed as a ‘probable’ or ‘presumed’ cause, it is coded as U07.1 *This can include cases with or without laboratory confirmation.*” [emphasis added]”

CDC Data Includes Confirmed and Presumptive Cases (2020-03-11)

As of March 11, 2020 the CDC data included both confirmed and presumptive cases since 1/21/2020 as follows:

1. 938 U.S. cases
2. 29 U.S. deaths
3. 38 states reporting cases

EBOLA (EVD – Ebola Virus Disease) 2014-2016 Outbreak

[CDC: History of Ebola Virus Disease \(2014-2016\)](#)

[CDC: Ebola By The Numbers](#)

[ScienceMag: WHO, CDC Publish Grim New Ebola Projections](#)

1. Computer model projects up to 1.4 million cases in West Africa
2. After 2 years, 11,315 “probable,” confirmed and “suspected” deaths from 6 countries
3. 4 patients diagnosed with Ebola in the U.S.
4. 1 reported U.S. death
5. 2 healthcare workers in Dallas tested positive for EVD, both recovered
6. 11 people were treated for EVD in the U.S. during the West African Outbreak

Flu (2017-2019 Seasons)

[StatNews: CDC: 80,000 People Died of Flu Last Winter in U.S., Highest Death Toll in 40 Years](#)

[StatNews: Flu Vaccine Provided Dismal Protection Against This Winter's Virus Early Data Suggest](#)

[Time: This Past Flu Season Was the Longest in 10 Years, the CDC Says](#)

1. 2017-2018 Season
 - a. CDC estimated 48.8 million illnesses
 - b. 959,000 hospitalizations
 - c. 80,000 Americans died of flu and its complications
 - d. Flu vaccine didn't work very well
2. 2018-2019 Season
 - a. CDC estimated 42.9 million people got sick from the flu
 - b. 647,000 were hospitalized
 - c. 61,000 died
 - d. CDC says these numbers are on par with a typical flu season
3. The 1918 Flu pandemic killed an estimated 500,000 Americans

Yet none of these pandemics led to the country or world being shut down.

MERS (Middle East Respiratory Syndrome) 2012-2014 Outbreak

[CDC: Middle East Respiratory Syndrome \(MERS\)](#)

[CDC: MERS Fact Sheet PDF](#)

1. About 3 or 4 out of every 10 patients reported with MERS have died
2. Only 2 patients in the U.S. have ever tested positive for MERS
3. MERS represents a very low risk to the general public in the U.S.

SARS (Severe Acute Respiratory Syndrome) 2003 Epidemic

[CDC: SARS Basics Fact Sheet](#)

According to WHO (World Health Organization):

1. 8,098 people infected worldwide
2. 774 resulting deaths worldwide
3. Only 8 people had laboratory evidence of SARS in the U.S.

According to the [Canadian Encyclopedia SARS in Canada](#) (for which the WHO issued a non-essential travel advisory):

1. 438 probable cases of SARS in Canada
2. Thousands were quarantined
3. 44 resulting deaths
4. Less than 3 months later, 500,000 people attended the “SARStock” and “SARS-a-palooza” concert in Toronto

SWINE Flu (H1N1) 2009-2010 Outbreak

[Google: 2009 H1N1 Pandemic](#)

[CDC: 2009 H1N1 Pandemic \(H1N1pdm09 virus\)](#)

[CDC: The 2009 H1N1 Pandemic: Summary Highlights, April 2009-April 2010](#)

1. 60.8 million cases (range 43.3-89.3 million) U.S. cases
2. 274,304 hospitalizations (range 195,086-402,712) U.S. cases
3. 12,469 deaths (range 8868-18,306) U.S. cases

[Jon Rappoport: Here's What Sharyl Attkisson Told Me About the 2009 "Pandemic"](#)

[Dispatches from the War: Mr. Trump, Deliver a Knockout Blow to the Traitorous CDC](#) (2020-07-16)

1. Dr. Fauci reassured people that adverse effects from the Swine Flu vaccine were “very, very, very rare”
 - a. Vaccine increased miscarriage risks in pregnant women in the U.S.
[NCBI: Comparison of VAERS Fetal-loss Reports During Three Consecutive Influenza Seasons](#)
 - b. Provoked spike in adolescent narcolepsy in Scandinavia
[NCBI: Incidence of Narcolepsy after H1N1 Influenza and Vaccinations](#)
[WHO: Statement on Narcolepsy and Vaccination](#)
 - c. Caused febrile convulsions in 1 in 110 vaccinated children in Australia
[NCBI: Febrile Seizures after 2009 Influenza A \(H1N1\) Vaccination and Infection: A Nationwide Registry-based Study](#)

Influenza and Pneumonia Statistics

[CDC: Deaths and Mortality Stats](#)

[DHHS: CDC - Influenza Deaths: Request for Correction \(RFC\)](#)

[Flu Death Numbers Are Greatly Exaggerated](#) (2018-10-12)

[NCBI: Influenza Vaccination and Respiratory Virus Interference Among Department of Defense](#)

[Personnel During the 2017-2018 Influenza Season](#) (2019-10-10)

[Jon Rappoport: Corona: The Case Number Game](#) (2020-03-26)

[The Influenza Vaccine and COVID-19: Flu Injection -- Fatal Infection](#) (Updated August 2020)

1. 62,034 U.S. deaths due to influenza and pneumonia in 2001
2. 61,077 of those deaths attributed to pneumonia
3. 257 of those deaths attributed to flu
4. Only 18 of the 257 “flu” cases were positively identified as the flu

Quotes from The Influenza Vaccine and COVID-19 study:

The Flu Shot: Never Supported by Science

“In 1972, [Dr. John Anthony Morris](#) reported his research findings on the influenza vaccine to his superiors at the FDA. A distinguished doctor and government researcher, Dr. Morris had been commissioned 13 years earlier to scientifically justify the FDA's plans to widely expand the flu vaccination program. To his expectant audience, however, his results were thoroughly disappointing. Dr. Morris reported that the flu shot provided no measurable net benefit, in part because the injected product failed to stimulate antibody production in the lungs, thus allowing for viral replication in this sensitive area. It was later realized that the lack of benefit also derives from the flu shot's ability to *increase* vulnerability to viruses not covered in the shot, including unmatched strains of flu and different respiratory viruses dangerous in their own right. Dr. Morris' finding of no net benefit of the influenza vaccine has been repeatedly verified with contemporary data, including a study by [Simonsen et al. \(2005\)](#) that found that the large increase in flu vaccination of the elderly between 1980 and 2001 failed to decrease flu season mortality, and a [study in Britain](#) which found that the vast increase in flu shot uptake by those who had just turned 65 (vs. those who were just a bit younger) provided no decline in hospitalizations or deaths.”

Corruption, Not Public Health

“Given the powerful results of Dr. Morris' research, the flu vaccine's only perk could be to line the pockets of Big Pharma, and should have been regulated out of existence. Unfortunately, the cozy relationship between the FDA, CDC, and the pharmaceutical industry, [well documented today](#), is not a new phenomena. Instead of reconsidering the vaccination program Dr. Morris' supervisors swiftly [closed his laboratory and blocked publication of his results](#). Breathing a sigh of relief that good science would not be placed in the way of good profits, Big Pharma continued pushing for expansion of the flu shot market. Even if there wasn't a huge benefit in ordinary years, they argued, it was important to have manufacturing in place in order to churn out large quantities of vaccine quickly to save the world during the next serious pandemic (*History of Vaccines*, by Arthur Allen).”

The Flu Shot Makes A Flu Pandemic – Worse?

“Enter 2009, the first major flu pandemic to occur after mass influenza vaccination had become a reality. Big pharma did indeed heroically turn out millions of doses of pandemic influenza vaccine. Unfortunately, most of the doses did not become available to the general public until after the pandemic was nearly over. In addition there was the inconvenient finding that individuals who had obediently taken the seasonal flu vaccine the year before were [more likely to develop pandemic influenza illness that was medically attended](#). Public health experts were [shocked by these findings but kept their lips sealed](#) as Big Pharma and their sponsored government agencies used the public spotlight on the flu in 2009 as a springboard to push for an even larger flu vaccination program. For the first time the flu vaccine was recommended for every American citizen, especially children, who by 2020 were the largest consumers of the shot despite lack of evidence of benefit and the mercury that was allowed to remain in the vaccine.”

The Flu Shot Promotes Other Viruses

“As alluded to above, 2009 was not an anomaly; the flu shot *routinely increases* the rate of infection with other pathogens, negating any benefits of the shot. While many of the studies of this phenomena worked with patients who had freely chosen whether or not to take the flu shot, ([Dierig et al., 2014](#)), one study met the gold standard of a blinded, randomized, placebo controlled trial ([Cowling et al., 2012](#)). While it has been generally hypothesized that the mechanism of the increase in non-flu illnesses is viral interference - [the observation that illness with one virus may block others](#) - it was found by [Riken et al. \(2018\)](#) that the increase in non-flu infections starts in the first 14 days after receipt of the flu vaccine, before any immunity to the flu has developed. This indicates that like the [DTP vaccine](#) and other inactivated pathogen vaccines, the vaccine engenders non-specific immune system changes which increase vulnerability to certain other infections. Most of the studies on the flu vaccine have focused on children, or found statistically significant results only in children, however one study to find an affect in adults found that while the flu shot appeared to offer cross protection against certain pathogens for this population, [the vulnerability to several other pathogens, including coronavirus](#), was specifically increased. [This study was with regards to "old" coronaviruses](#), not COVID-19. The potential of the flu shot to fuel COVID-19, however, was firmly established, and, as we demonstrated above, can now clearly be seen in the COVID data.”

SARS-CoV-2 Coronavirus Multiplex RT-qPCR Kit

[Creative Diagnostics: SARS-CoV-2 Coronavirus Multiplex RT-qPCR Kit](#)

From one of the manufacturers of the PCR test for COVID-19:

Intended Use: “This product is intended for the detection of 2019-Novel Coronavirus (2019-nCoV). The detection result of this product is only for clinical reference, and it should not be used as the only evidence for clinical diagnosis and treatment.”

Limitations: “1. The detection result of this product is only for clinical reference, and it should not be used as the only evidence for clinical diagnosis and treatment. The clinical management of patients should be considered in combination with their symptoms/signs, history, other laboratory tests and treatment responses. The detection results should not be directly used as the evidence for clinical

diagnosis, and are only for the reference of clinicians.

2. The detection result can be affected by operations, including specimen collection, storage and transportation. False negative result may occur if there is any mistakes in the operation. Cross contamination during specimen treatment may lead to false positive result.

3. The detected target sequences of this products are the conservative region of 2019-nCoV's ORF1ab gene and N gene. However, target sequence variations may lead to false negative result.

Massaging COVID-19 Messages

[Sharyl Attkisson on Media Bias](#) (2020-12-06)

CDC August 26, 2020 Data Release

In terms of health, COVID-19 reporting has taken censorship and media manipulation to brand new heights, eclipsing just about all previous efforts. They don't even hide the bias anymore.

All social media platforms are openly [censoring dissenting views](#) about the virus, particularly its origin and treatment. Even well-respected doctors and scientists have been axed for speaking against the desired narrative dictated by the World Health Organization.

August 26, 2020, the CDC had released data³ showing 94% of people who had died during the COVID-19 pandemic in the U.S. died "with" the virus, not "from" it. Only 6% had COVID-19 listed as the sole cause of death on the death certificate. Hence, the real death toll, those who unarguably died as a direct result of the infection, is only around 10,000.

"For deaths with conditions or causes in addition to COVID-19, on average, there were 2.6 additional conditions or causes per death," the CDC stated. This is an important distinction. Yet mainstream media continues to report that nearly 200,000 have died "from" COVID-19 in the U.S, thereby increasing national fear so they can implement their lockdowns and other strategies to limit our personal freedoms and liberty.

When a 'Case' Is Not a Case

The media are also grossly misusing the term "case," in reference to the COVID-19 case load. A case is a medical term for a patient with a symptomatic type of infection. It's not someone who tests positive for antibodies or pieces of viral DNA. By referring to all [positive tests](#) as "cases," they're able to fan the flames of panic, making the situation sound far worse than it actually is.

Many still do not understand that most of those who test positive for SARS-CoV-2 are asymptomatic. They think these are sick people in the hospital and that rising "case" numbers mean there will be a rise in deaths. Statistics reveal this simply isn't true, and that there's not a linear correlation between positive tests and deaths.

"We're at a pretty scary time when scientists who are experts on these issues fear speaking what they believe is the scientific truth because they'll be controversialized." – Sharyl Attkisson

Flu Shots Ineffective in the Elderly

“Well, I was actually told by a top immunization official for the government, when they learned flu shots are ineffective in the elderly ... that the way around that was not to take flu shots away from the elderly — who would think that was dishonest because we've been telling it was necessary for so many years — but to convince parents to get their children and babies flu shots so that they wouldn't 'carry flu to the elderly.’

I remember him saying to me, ‘The trick is going to be to convince parents to give a vaccine to their children who don't really need it themselves.’ In other words, for a secondary supposed benefit for the elderly. And darn it, if you didn't see in the next season, they recommended flu shots for babies and children.

And they didn't tell anybody at the time that they were doing it because flu shots don't work in the elderly. They just started telling people that your kids need flu shots.”

Other Disease Statistics

[CDC: Leading Causes of Death](#)

Heart Disease

[Google: Heart Disease in the United States](#)

[CDC: Heart Disease Facts](#)

1. 647,000 Americans die from heart disease every year (or 1 in 4 deaths)
2. Leading cause of death in the U.S.
3. One person dies every 37 seconds from cardiovascular disease in the U.S.
4. Heart disease costs \$219 billion each year
5. Heart disease is the leading cause of death for men and women in the U.S.
6. 18.2 million adults age 20 and older have CAD (Coronary Artery Disease)
7. 805,000 Americans have a heart attack every year

Cancer

[NIH: National Cancer Institute Cancer Statistics](#)

[NIH: Cancer Stat Facts: Cancer of Any Site](#)

1. In 2018, estimated 1,735,350 new cancer cases in the U.S. and 609,640 will die
2. In 2020, estimated 1,806,509 new cancer cases in the U.S. and 606,520 will die
3. 2nd leading cause of death in the U.S.

Accidents

[CDC: Accidents or Unintentional Injuries](#)

1. 169,936 deaths annually in the U.S.
2. 52.2 deaths per 100,000 population
3. 3rd leading cause of death in the U.S.
4. 40,231 deaths due to motor vehicle accidents
5. 64,795 deaths due to unintentional poisoning

Chronic Lower Respiratory

[CDC: Chronic Obstructive Pulmonary Disease \(COPD\)](#)

1. 9 million diagnosed with chronic bronchitis in the past year
2. 160,201 deaths attributed to chronic lower respiratory disease (including asthma)
3. 4th leading cause of death in the U.S.

Stroke

[Google: Stroke Statistics](#)

[CDC: Stroke Facts](#)

1. 795,000 people in the U.S. have a stroke and 610,000 are first or new strokes

2. 140,000 people in the U.S. die from stroke every year
3. 5th leading cause of death in the U.S.
4. Someone has a stroke every 40 seconds in the U.S.

Alzheimer's

[ALZ: Alzheimers-Dementia Facts and Figures](#)

1. Estimated 5.8 million Americans 65 and older are living with Alzheimer's
2. 6th leading cause of death
3. 1 in 3 seniors die with Alzheimer's or another dementia

Diabetes

[ADA: Statistics About Diabetes](#)

1. 34.2 million Americans (or 10.5% of the population) had diabetes in 2018
2. 83,564 listed as underlying cause of death in 2017
3. 270,702 deaths were mentioned as the cause of death
4. 7th leading cause of death in the U.S.

Despite the fact that these diseases and accidental deaths occur every year, year after year, not one of them has ever motivated the government to shut down the entire economy (placing tens of millions of people out of work) and issue social distancing, shelter-in-place, and other draconian mandates for its citizens and yet few people appear to have any questions or problem with this. Quite amazing!

Deaths and Injuries from Prescription Drugs, Medical Accidents and Malpractice

[JAMA: Incidence of Adverse Drug Reactions in Hospitalized Patients](#) (1998-04-15)

[JAMA: Is US Health Really the Best in the World?](#) (2000-07-26 – Barbara Starfield, MD, MPH)

[The Epidemic of Sickness and Death from Prescription Drugs](#) (2014, November - ASA Volume 42, Issue 8)

[NCBI: Intubation, Mortality, and Risk Factors in Critically Ill COVID-19 Patients](#) (2020-09-07)

[Medical Weapons of Mass Destruction](#) (2021-01-05)

[WSJ: Hospitals Return to Basics for COVID Treatment](#) (2020-01-06)

From JAMA "Incidence of Adverse Drug Reactions in Hospitalized Patients"

"Data Synthesis.— The overall incidence of serious ADRs was 6.7% (95% confidence interval [CI], 5.2%-8.2%) and of fatal ADRs was 0.32% (95% CI, 0.23%-0.41%) of hospitalized patients. We estimated that in 1994 overall 2216000 (1721000-2711000) hospitalized patients had serious ADRs and 106000 (76000-137000) had fatal ADRs, making these reactions between the fourth and sixth leading cause of death.

Conclusions.— The incidence of serious and fatal ADRs in US hospitals was found to be extremely high. While our results must be viewed with circumspection because of heterogeneity among studies and small biases in the samples, these data nevertheless suggest that ADRs represent an important clinical issue."

From ASA “The Epidemic of Sickness and Deaths from Prescription Drugs”

“Epidemiologically, appropriately prescribed, prescription drugs are the fourth leading cause of death, tied with stroke at about 2,460 deaths each week in the United States. About 330,000 patients die each year from prescription drugs in the United States and Europe. They [the drugs] cause an epidemic of about 20 times more hospitalizations [6.6 million annually], as well as falls, road accidents, and [annually] about 80 million medically minor problems such as pains, discomforts, and dysfunctions that hobble productivity or the ability to care for others. Deaths and adverse effects from overmedication, errors, and self-medication would increase these figures.” (ASA publication, “Footnotes,” November 2014)

From NCBI “Intubation, Mortality, and Risk Factors in Critically Ill COVID-19 Patients”

“In conclusion, 76% of critically ill Covid-19 patients died after non-resuscitative intubation and IMV support. Non-survivors had more comorbidities than survivors. Mortality after non-resuscitative intubation in critically ill Covid-19 patients is associated with the disease severity at the time of IMV initiation.”

From “Medical Weapons of Mass Destruction Regarding Dr. Starfield’s 2000 Study”

“Starfield reported that the US medical system kills 225,000 Americans per year. 106,000 as a result of FDA-approved medical drugs, and 119,000 as a result of mistreatment and errors in hospitals. Extrapolate the numbers to a decade: that’s 2.25 million deaths. You might want to read that last number again.

I interviewed Starfield in 2009. I asked her whether she was aware of any overall effort by the US government to eliminate this holocaust. She answered a resounding NO. She also said her estimate of medically caused deaths in America was on the conservative side.”

From “Medical Weapons of Mass Destruction Regarding BMJ 2012 Study”

BMJ June 7, 2012 (BMJ 2012:344:e3989). Author, Jeanne Lenzer. Lenzer refers to a report by the Institute for Safe Medication Practices: “It [the Institute] calculated that in 2011 prescription drugs were associated with two to four million people in the US experiencing ‘serious, disabling, or fatal injuries, including 128,000 deaths.’”

The report called this “one of the most significant perils to humans resulting from human activity.”

The report was compiled by outside researchers who went into the FDA’s own database of “serious adverse [medical-drug] events.”

From “Medical Weapons of Mass Destruction a Quote from Dr. Angell’s Book “Drug Companies & Doctors: A Story of Corruption”

“It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgment of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as an editor of The New England Journal of Medicine.” (Dr. Marcia Angell, NY Review of Books, January 15, 2009, “Drug Companies & Doctors: A Story of Corruption”)

From “WSJ: Hospitals Return to Basics for COVID Treatment”

“It wasn’t long before doctors discovered that ventilators were causing more damage to COVID-19 patients’ lungs than they were helping. Ventilators push air into a person's lungs after a tube is inserted through the mouth and down the trachea.

Even in the best circumstances, ventilators can injure a person's lungs by placing too much pressure against the tissue as the machine pushes air in. Typically, with low oxygen saturation, people are given breathing support with [continuous positive airway pressure \(CPAP\)](#).

This is also used to treat severe sleep apnea as it helps regulate the pressure and level of oxygen using mild pressure gradients to keep the airways open. However, mechanical ventilation became widespread and remained that way even after published reports demonstrated that ventilation did not lower mortality rates, but may have in fact raised them.

Several studies have indicated the fatality rate once patients are on ventilators is more than 50%.¹¹ In a case series of 1,300 critically ill patients admitted to intensive care units (ICUs) in Lombardy, Italy, 88% were on ventilation and the mortality rate was 26%.¹²

A study published in the Journal of the American Medical Association included 5,700 patients who were hospitalized with COVID-19 in the New York City area from March 1, 2020, to April 4, 2020.¹³ They found the mortality rates for those who were on mechanical ventilation ranged from 76.4% to 97.2%, depending on the age bracket.

Another study of 24 patients admitted to Seattle area intensive care units showed 75% were placed on mechanical ventilation and half the 24 patients died between Day 1 and Day 18 after being admitted.¹⁴

There are inherent risks to ventilation, including lung damage to the air sacs from high levels of oxygen and from high pressure used by the machines. Another risk is long-term sedation, which is difficult for some patients to bounce back from.”

RT-PCR (Reverse Transcription Polymerase Chain Reaction) Test Issues

[Dr. Kary Banks Mullis Polymerase Chain Reaction](#)

[Dr. Kary Mullis Nobel Prize in Chemistry for PCR 1993](#)

[Dr. Kary Mullis David J. Brown Interview](#)

[Diazyme: Why Do We Need Antibody Tests for COVID-19 and How to Interpret Test Results](#)

[NCBI Estimating the accuracy of PCR-based tests](#)

[NCBI: Questioning the HIV-AIDS Hypothesis: 30 Years of Dissent](#)

[NEJM: Questionable Reliability of the PCR in Detecting TB](#)

[JAMA: PCR in the Diagnosis and Management of Central Nervous System Infections](#)

[ResearchGate: How Accurate Is the Current Test for Coronavirus COVID-19?](#)

[Was the COVID-19 Test Meant to Detect a Virus? \(2020-04-07\)](#)

[Earthfiles Clip: Professor of Cellular Neurobiology, Jay Couey, Ph.D. on COVID-19 & RT-PCR Test Issues \(2020-04-21 duration 20:33 of original 1:00:39 full video\)](#)

[TX DSHS: COVID-19 Hospital Bed Reporting Data Dictionary \(2020-04-21\)](#)

[Dr. Rashid A Buttar Why Everyone Could Test Positive \(2020-07-02 duration 5:30\)](#)

[SARS-COV-2 Molecular Assay Evaluation: Results \(2020-07-03\)](#)

[CDC 2019-Novel Coronavirus \(2019-nCoV\) Real-Time RT-PCR Diagnostic Panel \(2020-07-13 Rev. 5\)](#)

[TWiV 641: COVID-19 with Dr. Anthony Fauci \(2020-07-16 duration 36:46 at ~4:25 Fauci concedes that PCR test cycle thresholds of 35 or more “the chances of it being replication confident are minuscule” i.e., essentially worthless yet CDC/FDA recommendations are to do up to 40 cycles\)](#)

[NYT: Your Coronavirus Test Is Positive. Maybe It Shouldn't Be. \(2020-08-29\)](#)

[Oops: It Looks Like the Vast Majority of Positive COVID Results Should Have Been Negative \(2020-08-29\)](#)

[Experts: US COVID-19 Positivity Rate High Due to 'Too Sensitive' Tests \(2020-08-30\)](#)

[The New York Times Does Accidental Journalism on COVID-19 Testing \(2020-08-31\)](#)

[Bombshell Report: 90% of Positive COVID-19 Tests Should Be Negative \(2020-09-02 duration 3:52\)](#)

[Coronavirus Cases Plummet When PCR Tests Are Adjusted \(2020-09-29\)](#)

[International Class Action Lawsuits Against Corona PCR Test Manufacturers \(2020-10-07\)](#)

[Dr. Pascal Sacré: The COVID-19 RT-PCR Test: How to Mislead All Humanity. Using a "Test" to Lock Down Society \(2020-11-05\)](#)

[Smoking Gun: Fauci States COVID Test Has Fatal Flaw \(2020-11-06\)](#)

[Why COVID-19 Testing Is a Tragic Waste \(2020-11-13\)](#)

[WHO Information Notice for IVD Users: Nucleic Acid Testing \(NAT\) Technologies That Use Real-Time Polymerase Chain Reaction \(RT-PCR\) for Detection of SARS-CoV-2 \(2020-12-14\)](#)

[PCR Deception \(2020-12-24 duration 15:07 - PCR test inventor Dr. Kary Mullis on Fauci and much more\)](#)

[The Criminal WHO Blows Its Own Cover: Fake PCR Test \(2020-12-31\)](#)

[Astonishing COVID-19 Testing Fraud Revealed \(2021-01-13\)](#)

1. Requires high-quality nasopharyngeal swabs containing sufficient amounts of RNA
2. Requires highly trained personnel to obtain samples and run RNA extraction and PCR amplification steps
3. Contamination can be introduced at every step including at collection point
4. Sample must be amplified 30 to 50 times to generate the billions of RNA needed to test. NOTE: As with any amplification method the noise (i.e., contamination and errors) are amplified along with the signal (i.e., the RNA components being copied).
5. No consistent amplification cycles between laboratories. Amplification cycles of 40 or more results in nearly all positive results (i.e., false positives).

6. Dr. Fauci admits that PCR test results of threshold cycles more than 35 are essentially worthless yet the CDC/FDA recommend up to 40 cycles.
7. False positive and false negative results occur often
8. Three different pairs of primers are needed to test against both, presumed, positive and negative samples to satisfy the bare minimum threshold for any scientific paper to say you have a positive result, current labs are using one primer set and they don't care about false positives (i.e., the positive case numbers are being highly inflated)
9. CDC issued updated guidelines for death certificates to include "probable" and "presumed" COVID-19 as the cause of death even if no COVID-19 tests were done.
10. Texas Department of State Health Services issued updated guidelines for classification of COVID-19 patients including "suspected" cases.
11. Head of Chinese Academy of Medical Sciences, Wang Chen, said: "Last month only 30 to 50 percent of confirmed cases had a positive result in the PCR tests, and the throat swabs had possibly generated many fake negative results."
12. Authors of a study published in JAMA in 2006, in which PCR was used with a sample of almost 3,000 people, concluded: "The PCR assay is not sufficiently accurate to be used for the diagnosis of HIV infection without confirmation" [(28), p. 803].
13. Dr. Kary Mullis, creator of the PCR for which he won a Nobel Prize in 1993, said that the test should not be used to diagnose infectious disease.
14. WHO walks back its high RT-PCR test cycle thresholds now that COVID-19 vaccines are being deployed. Could this be in preparation to show fewer positive test results in order to dupe the public into believing the vaccines are working?

Even the New York Times is now admitting (in an August 29, 2020 Health article), that the PCR test is essentially worthless not for the least of which is the fact that the cycle threshold (number of amplification cycles used in the test) are not reported. Why would the CDC not require such crucial information to be included in the test results?

Given the unreliability of the PCR tests, changing guidelines for hospitals and doctors for reporting cases and causes of death as COVID-19—whether tested or not, overworked doctors and nurses incentivized to report COVID-19 to reduce paperwork load and the federal government doling out more taxpayer dollars to local and state governments that report high numbers of COVID-19 deaths, could possibly result in artificially inflating the alleged number of COVID-19 cases and deaths?

From CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel Report

- Detection of viral RNA may not indicate the presence of infectious virus or that 2019-nCoV is the causative agent for clinical symptoms.
- The performance of this test has not been established for monitoring treatment of 2019-nCoV infection.
- The performance of this test has not been established for screening of blood or blood products for the presence of 2019-nCoV.
- This test cannot rule out diseases caused by other bacterial or viral pathogens.

From Dr. Pascal Sacré Article (Ct is Cycle Threshold or amplification cycles)

Above Ct 35, it becomes impossible to isolate a complete virus sequence and culture it!

In France and in most countries, Ct levels above 35, even 40, are still used even today!

The French Society of Microbiology (SFM) issued an opinion on September 25, 2020 in which it does not recommend quantitative results, and it recommends to make positive up to a Ct of 37 for a single gene [20]!

With 1 copy/ μ l of a sample (Ct 35), without cough, without symptoms, one can understand why all these doctors and scientists say that **a positive RT-PCR test means nothing**, nothing at all in terms of medicine and clinic!

Positive RT-PCR tests, without any mention of Ct or its relation to the presence or absence of symptoms, are used as is by our governments as the exclusive argument to apply and justify their policy of severity, austerity, isolation and aggression of our freedoms, with the impossibility to travel, to meet, to live normally!

There is no medical justification for these decisions, for these governmental choices!

In an article published on the website of the New York Times (NYT) on Saturday, August 29, American experts from Harvard University are surprised that RT-PCR tests as practiced can serve as tests of contagiousness, even more so as evidence of pandemic progression in the case of SARS-CoV-2 infection [21].

According to them, the threshold (Ct) considered results in positive diagnoses in people who do not represent any risk of transmitting the virus!

The binary “yes/no” answer is not enough, according to this epidemiologist from the Harvard University School of Public Health.

*“It’s the **amount of virus** that should dictate the course of action for each patient tested. »*

The amount of virus (viral load); but also and above all the clinical state, symptomatic or not of the person!

This calls into question the use of the binary result of this RT-PCR test to **determine whether a person is contagious and must follow strict isolation measures**.

These questions are being raised by many physicians around the world, not only in the United States but also in France, Belgium ([Belgium Health Experts Demand Investigation Of WHO For Faking Coronavirus Pandemic](#)), France, Germany, Italy, the United Kingdom, the United States and the United Kingdom. in Germany, Spain...

According to them: *“We are going to put tens of thousands of people in confinement, in isolation, for nothing. »* [22]. [22] And inflict suffering, anguish, economic and psychological dramas by the thousands!

Most RT-PCR tests set the Ct at 40, according to the NYT. Some set it at 37.

“Tests with such high thresholds (Ct) may not only detect live virus but also gene fragments, remnants of an old infection that do not represent any particular danger,” the experts said.

A virologist at the University of California admits that an RT-PCR test with a Ct greater than 35 is too sensitive. *“A more reasonable threshold would be between 30 and 35,”* she adds.

Almost no laboratory specifies the Ct (number of amplification cycles performed) or the number of copies of viral RNA per sample μ l.

In Massachusetts, **between 85 and 90%** of people who tested positive in July with a Ct of 40 would have been considered **negative with a Ct of 30**, adds the NYT. **And yet, all these people had to isolate themselves, with all the dramatic psychological and economic consequences, while they were not sick and probably not contagious at all.**

From The Criminal WHO Blows Its Own Cover: Fake PCR Test

In early 2020, the WHO accepted a PCR test for “SARS-CoV-2” that was designed without having possession of the virus. Yet the test is meant to detect...the missing virus. This is evidence of deep criminal intent.

But as of December 14, 2020, WHO has made a correction. Thereby blowing its own cover. Why?

Two reasons. Huge numbers of people have caught on to the PCR test scam. And by their correction, WHO paves the way for “declining COVID case numbers”---thereby making it appear the new vaccine is a roaring success. I predicted this development.

A brief review. The PCR test (a complete fraud for several reasons) is run in “cycles.” Each cycle is a giant magnification of a tiny portion of the swab sample taken from the patient.

As I’ve reported, even Tony Fauci readily asserts that if the PCR is run at 35 cycles or higher, it’s meaningless.

Every positive result---indicating “infection with the virus”---occurring at 35 cycles or higher is meaningless.

BUT, as I’ve also pointed out, public health agencies recommend running the PCR test at up to 40 cycles. Therefore, labs comply.

Therefore, millions upon millions of PCR tests results, over the last nine months, which indicate “infection,” are a vast lie.

Therefore, the COVID case numbers are a vast lie, and the lockdowns, which are based on those numbers, are absurd, insane, criminal, and predatory.

NOW, the WHO is walking back their stance on how the PCR should be run, for the reasons I mentioned above.

The WHO document is titled, *“WHO Information Notice for IVD Users/Nucleic acid testing (NAT) technologies that use real-time polymerase chain reaction (RT-PCR) for detection of SARS-CoV-2.”*

Here are the money quotes. The language is mealy-mouthed, intentionally confusing, cautious, and sterile. Nevertheless, we can see the intent to lower the number of test cycles.

“Users of RT-PCR reagents should read the IFU [Information for Use] carefully to determine if manual adjustment of the PCR positivity threshold is necessary to account for any background noise which may lead to a specimen with a high cycle threshold (Ct) value result being interpreted as a positive result.”

Translation: Using too many test cycles---aka “high cycle threshold (Ct) value”---has resulted in patients being told they’re infected, which is a lie.

“In some cases, the IFU will state that the cut-off should be manually adjusted to ensure that specimens with high Ct values are not incorrectly assigned SARS-CoV-2 detected due to background noise.”

Translation: Running the test with a high number of cycles yields “background noise”---aka a false positive result. The patient is told he’s infected but he’s not.

“The design principle of RT-PCR means that for patients with high levels of circulating virus (viral load), relatively few cycles will be needed to detect virus and so the Ct value will be low. Conversely, when specimens return a high Ct value, it means that many cycles were required to detect virus. In some circumstances, the distinction between background noise and actual presence of the target virus is difficult to ascertain.”

Translation: When the test is run with a high number of cycles, we can’t tell the difference between “irrelevant” and “meaningful.”

A frank and honest translation of the WHO message: “We’re changing the way we’re doing PCR tests. We were running them with a high number of cycles and getting millions of false positives, and those numbers were deployed to justify the lockdowns---but NOW we’re moving to a lower number of cycles. This change, all on its own, will result in fewer positive results, fewer case numbers, making the vaccine look VERY GOOD.”

Face Mask Information

CDC Mask Information

[CDC Frequently Asked Questions About Personal Protective Equipment](#) (Last reviewed: March 14, 2020)

[CDC: Nonpharmaceutical Measures for Pandemic Influenza in Nonhealthcare Settings--Personal Protective and Environmental Measures](#) (Volume 26, Number 5—May 2020)

[CDC Study Based on 14 Clinical Trials Shows Face Masks Do Not Work](#) (2020-07-22)

[Study--Review Published By the CDC: Face Masks Don't Work](#) (2020-07-22)

[CDC Study: 85% of Coronavirus Patients Reported Wearing Masks 'Always' or 'Often'](#) (2020-10-14)

Respirators

Should I Wear a Respirator in Public?

CDC does not recommend the routine use of respirators outside of workplace settings (in the community). Most often, [spread](#) of respiratory viruses from person-to-person happens among [close contacts](#) (within 6 feet). CDC recommends everyday preventive actions to prevent the spread of respiratory viruses, such as avoiding people who are sick, avoiding touching your eyes or nose, and covering your cough or sneeze with a tissue. People who are sick should [stay home](#) and not go into crowded public places or visit people in hospitals. Workers who are sick should follow CDC guidelines and [stay home when they are sick](#).

What is an N95 Filtering Facepiece Respirator (FFR)?

An N95 FFR is a type of respirator which removes particles from the air that are breathed through it. These respirators *filter out at least 95% of very small (0.3 micron) particles*. N95 FFRs are capable of filtering out all types of particles, including bacteria and viruses.

What Makes N95 Respirators Different From Facemasks (aka Surgical Masks)?

Specification	Surgical Mask	N95 Respirator
Testing and Approval	Cleared by the U.S. Food and Drug Administration (FDA)	Evaluated, tested, and approved by NIOSH as per the requirements in 42 CFR Part 84
Intended Use & Purpose	Fluid resistant and provides the wearer protection against large droplets, splashes, or sprays of bodily or other hazardous fluids. Protects the patient from the wearer's respiratory emissions.	Reduces wearer's exposure to particles including small particle aerosols and large droplets (only non-oil aerosols).
Face Seal Fit	Loose-fitting	Tight-fitting
Fit Testing Requirement	No	Yes
User Seal Check Requirement	No	Yes. Required each time the respirator is donned (put on)
Filtration	Does NOT provide the wearer with a reliable level of protection from inhaling smaller airborne particles and is not considered respiratory protection	Filters out at least 95% of airborne particles including large and small particles
Leakage	Leakage occurs around the edge of the mask when user inhales	When properly fitted and donned, minimal leakage occurs around edge of the respirator when user inhales
Use Limitations	Disposable. Discard after each patient encounter.	Ideally should be discarded after each patient encounter and after aerosol-generating procedures. It should also be discarded when it becomes damaged or deformed; no longer forms an effective seal to the face; becomes wet or visibly dirty; breathing becomes difficult; or if it becomes contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients.

What is a Surgical N95 respirator and who needs to wear it?

- A surgical N95 (also referred as a medical respirator) is recommended only for use by healthcare personnel (HCP) who need protection from both airborne and fluid hazards (e.g., splashes, sprays). These respirators are not used or needed outside of healthcare settings. In times of shortage, only HCP who are working in a sterile field or who may be exposed to high velocity splashes, sprays, or splatters of blood or body fluids should wear these respirators, such as in operative or procedural settings. Most HCP caring for confirmed or suspected COVID-19 patients should not need to use surgical N95 respirators and can use standard N95 respirators.
- If a surgical N95 is not available for use in operative or procedural settings, then an unvalved N95 respirator may be used with a faceshield to help block high velocity streams of blood and body fluids.

From the CDC Study: Nonpharmaceutical Measures for Pandemic Influenza in Nonhealthcare Settings—Protective and Environmental Measures (Volume 26, Number 5—May 2020)

Face Masks

In our systematic review, we identified 10 RCTs that reported estimates of the effectiveness of face masks in reducing laboratory-confirmed influenza virus infections in the community from literature published during 1946–July 27, 2018. In pooled analysis, we found no significant reduction in influenza transmission with the use of face masks (RR 0.78, 95% CI 0.51–1.20; $I^2 = 30%$, $p = 0.25$) (Figure 2). One study evaluated the use of masks among pilgrims from Australia during the Hajj pilgrimage and reported no major difference in the risk for laboratory-confirmed influenza virus infection in the control or mask group (33). Two studies in university settings assessed the effectiveness of face masks for primary protection by monitoring the incidence of laboratory-confirmed influenza among student hall residents for 5 months (9,10). The overall reduction in ILI or laboratory-confirmed influenza cases in the face mask group was not significant in either studies (9,10). Study designs in the 7 household studies were slightly different: 1 study provided face masks and P2 respirators for household contacts only (34), another study evaluated face mask use as a source control for infected persons only (35), and the remaining studies provided masks for the infected persons as well as their close contacts (11–13,15,17). None of the household studies reported a significant reduction in secondary laboratory-confirmed influenza virus infections in the face mask group (11–13,15,17,34,35). Most studies were underpowered because of limited sample size, and some studies also reported suboptimal adherence in the face mask group.

Disposable medical masks (also known as surgical masks) are loose-fitting devices that were designed to be worn by medical personnel to protect accidental contamination of patient wounds, and to protect the wearer against splashes or sprays of bodily fluids (36). There is limited evidence for their effectiveness in preventing influenza virus transmission either when worn by the infected person for source control or when worn by uninfected persons to reduce exposure. Our systematic review found no significant effect of face masks on transmission of laboratory-confirmed influenza.

Discussion

In this review, we did not find evidence to support a protective effect of personal protective measures or environmental measures in reducing influenza transmission. Although these measures have mechanistic support based on our knowledge of how influenza is transmitted from person to person, randomized trials of hand hygiene and face masks have not demonstrated protection against laboratory-confirmed influenza, with 1 exception ([18](#)). We identified only 2 RCTs on environmental cleaning and no RCTs on cough etiquette.

We did not find evidence that surgical-type face masks are effective in reducing laboratory-confirmed influenza transmission, either when worn by infected persons (source control) or by persons in the general community to reduce their susceptibility ([Figure 2](#)). However, as with hand hygiene, face masks might be able to reduce the transmission of other infections and therefore have value in an influenza pandemic when healthcare resources are stretched.

CIDRAP (Center for Infectious Disease Research and Policy)

[COMMENTARY: Masks-for-all for COVID-19 not based on sound data](#) (Apr 01, 2020)

Data lacking to recommend broad mask use

We do not recommend requiring the general public who do not have symptoms of COVID-19-like illness to routinely wear cloth or surgical masks because:

- There is no scientific evidence they are effective in reducing the risk of SARS-CoV-2 transmission
- Their use may result in those wearing the masks to relax other distancing efforts because they have a sense of protection
- We need to preserve the supply of surgical masks for at-risk healthcare workers.

Sweeping mask recommendations—as many have proposed—will not reduce SARS-CoV-2 transmission, as evidenced by the widespread practice of wearing such masks in Hubei province, China, before and during its mass COVID-19 transmission experience earlier this year. Our review of relevant studies indicates that cloth masks will be ineffective at preventing SARS-CoV-2 transmission, whether worn as source control or as PPE.

In Summary, Cloth vs Surgical vs N95 Masks

Cloth masks as source control

In sum, given the paucity of information about their performance as source control in real-world settings, along with the extremely low efficiency of cloth masks as filters and their poor fit, there is no evidence to support their use by the public or healthcare workers to control the emission of particles from the wearer.

Cloth masks as PPE (Personal Protective Equipment)

In sum, very poor filter and fit performance of cloth masks described earlier and very low effectiveness for cloth masks in healthcare settings lead us to conclude that cloth masks offer no protection for healthcare workers inhaling infectious particles near an infected or confirmed patient.

Surgical masks as source control

In sum, wearing surgical masks in households appears to have very little impact on transmission of respiratory disease. One possible reason may be that masks are not likely worn continuously in households. These data suggest that surgical masks worn by the public will have no or very low impact on disease transmission during a pandemic.

Surgical masks as PPE

While the data supporting the use of surgical masks as PPE in real-world settings are limited, the two meta-analyses and the most recent randomized controlled study⁵¹ combined with evidence of moderate filter efficiency and complete lack of facepiece fit lead us to conclude that surgical masks offer very low levels of protection for the wearer from aerosol inhalation. There may be some protection from droplets

and liquids propelled directly onto the mask, but a faceshield would be a better choice if this is a concern.

N95 FFR as source control

In summary, *N95 FFRs on patients will not be effective and may not be appropriate, particularly if they have respiratory illness or other underlying health conditions.* Given the current extreme shortages of respirators needed in healthcare, we do not recommend the use of N95 FFRs in public or household settings.

N95 FFRs as PPE

In sum, this study, the meta-analyses, randomized controlled trial described above,^{49,51} and laboratory data showing high filter efficiency and high achievable fit factors *lead us to conclude that N95 FFRs offer superior protection from inhalable infectious aerosols likely to be encountered when caring for suspected or confirmed COVID-19 patients.*

Conclusions

While this is not an exhaustive review of masks and respirators as source control and PPE, we made our best effort to locate and review the most relevant studies of laboratory and real-world performance to inform our recommendations. Results from laboratory studies of filter and fit performance inform and support the findings in real-world settings.

Cloth masks are ineffective as source control and PPE, surgical masks have some role to play in preventing emissions from infected patients, and respirators are the best choice for protecting healthcare and other frontline workers, but not recommended for source control. These recommendations apply to pandemic and non-pandemic situations.

Leaving aside the fact that they are ineffective, telling the public to wear cloth or surgical masks could be interpreted by some to mean that people are safe to stop isolating at home. It's too late now for anything but stopping as much person-to-person interaction as possible.

Masks may confuse that message and give people a false sense of security. If masks had been the solution in Asia, shouldn't they have stopped the pandemic before it spread elsewhere?

FDA Mask Information

[FDA: N95 Respirators, Surgical Masks, and Face Masks](#) (2020-08-20)

N95 Respirators Not for Use by the Public

The Centers for Disease Control and Prevention (CDC) does not recommend that the general public wear N95 respirators to protect themselves from respiratory diseases, including coronavirus (COVID-19). The best way to prevent illness is to avoid being exposed to this virus. However, as a reminder, [CDC always recommends everyday preventive actions](#), such as hand washing, to help prevent the spread of respiratory diseases.

For the general American public, there is no added health benefit to wear a respiratory protective device (such as an N95 respirator), and the immediate health risk from COVID-19 is considered low.

Surgical Masks (Face Masks)

The Centers for Disease Control and Prevention (CDC) does not recommend that people who are well wear a face mask to protect themselves from respiratory diseases, including coronavirus (COVID-19).

A surgical mask is a loose-fitting, disposable device that creates a physical barrier between the mouth and nose of the wearer and potential contaminants in the immediate environment. Surgical masks are regulated under 21 CFR 878.4040. Surgical masks are not to be shared and may be labeled as surgical, isolation, dental, or medical procedure masks. They may come with or without a face shield. These are often referred to as face masks, although not all face masks are regulated as surgical masks. ...

N95 Respirators

An N95 respirator is a respiratory protective device designed to achieve a very close facial fit and very efficient filtration of airborne particles.

The 'N95' designation means that when subjected to careful testing, the respirator blocks at least 95 percent of very small (0.3 micron) test particles. If properly fitted, the filtration capabilities of N95 respirators exceed those of face masks. However, even a properly fitted N95 respirator does not completely eliminate the risk of illness or death.

General N95 Respirator Precautions

People with chronic respiratory, cardiac, or other medical conditions that make breathing difficult should check with their health care provider before using an N95 respirator because the N95 respirator can make it more difficult for the wearer to breathe. Some models have exhalation valves that can make breathing out easier and help reduce heat build-up. Note that N95 respirators with exhalation valves should not be used when sterile conditions are needed.

All FDA-cleared N95 respirators are labeled as "single-use," disposable devices. If your respirator is damaged or soiled, or if breathing becomes difficult, you should remove the respirator, discard it properly, and replace it with a new one. To safely discard your N95 respirator, place it in a plastic bag and put it in the trash. Wash your hands after handling the used respirator.

N95 respirators are not designed for children or people with facial hair. Because a proper fit cannot be achieved on children and people with facial hair, the N95 respirator may not provide full protection.

N95 Respirators in Industrial and Health Care Settings

Most N95 respirators are manufactured for use in construction and other industrial type jobs that expose workers to dust and small particles. They are regulated by the National Personal Protective Technology Laboratory (NPPTL) in the National Institute for Occupational Safety and Health (NIOSH), which is part of the Centers for Disease Control and Prevention (CDC)

However, some N95 respirators are intended for use in a health care setting. Specifically, single-use, disposable respiratory protective devices used and worn by health care personnel during procedures to protect both the patient and health care personnel from the transfer of microorganisms, body fluids, and particulate material. These surgical N95 respirators are class II devices regulated by the FDA, under 21 CFR 878.4040, and CDC NIOSH under 42 CFR Part 84.

N95s respirators regulated under product code MSH are class II medical devices exempt from 510(k) premarket notification, unless:

- The respirator is intended to prevent specific diseases or infections, or
- The respirator is labeled or otherwise represented as filtering surgical smoke or plumes, filtering specific amounts of viruses or bacteria, reducing the amount of and/or killing viruses, bacteria, or fungi, or affecting allergenicity, or
- The respirator contains coating technologies unrelated to filtration (e.g., to reduce and or kill microorganisms).

The FDA has a [Memorandum of Understanding \(MOU\)](#) with CDC NIOSH which outlines the framework for coordination and collaboration between the FDA and NIOSH for regulation of this subset of N95 respirators.

For additional differences between surgical masks and N95 respirators, please see [CDC's infographic](#).

JAMA N95 Respirators vs Medical Masks

[JAMA: N95 Respirators vs Medical Masks for Preventing Influenza Among Health Care Personnel: A Randomized Clinical Trial](#) (2019-09-03)

Results Among 2862 randomized participants (mean [SD] age, 43 [11.5] years; 2369 [82.8%] women), 2371 completed the study and accounted for 5180 HCP-seasons. There were 207 laboratory-confirmed influenza infection events (8.2% of HCP-seasons) in the N95 respirator group and 193 (7.2% of HCP-seasons) in the medical mask group (difference, 1.0%, [95% CI, -0.5% to 2.5%]; $P = .18$) (adjusted odds ratio [OR], 1.18 [95% CI, 0.95-1.45]). There were 1556 acute respiratory illness events in the respirator group vs 1711 in the mask group (difference, -21.9 per 1000 HCP-seasons [95% CI, -48.2 to 4.4]; $P = .10$); 679 laboratory-detected respiratory infections in the respirator group vs 745 in the mask group (difference, -8.9 per 1000 HCP-seasons, [95% CI, -33.3 to 15.4]; $P = .47$); 371 laboratory-confirmed respiratory illness events in the respirator group vs 417 in the mask group (difference, -8.6 per 1000

HCP-seasons [95% CI, -28.2 to 10.9]; $P = .39$); and 128 influenzalike illness events in the respirator group vs 166 in the mask group (difference, -11.3 per 1000 HCP-seasons [95% CI, -23.8 to 1.3]; $P = .08$). In the respirator group, 89.4% of participants reported “always” or “sometimes” wearing their assigned devices vs 90.2% in the mask group.

Conclusions and Relevance Among outpatient health care personnel, N95 respirators vs medical masks as worn by participants in this trial resulted in no significant difference in the incidence of laboratory-confirmed influenza.

Cambridge Epidemiology & Infection

[Face Masks to Prevent Transmission of Influenza Virus: A Systematic Review](#) (2010-01-22)

None of the studies reviewed showed a benefit from wearing a mask, in either HCW or community members in households (H). See summary Tables 1 and 2 therein.

NIH Use of Surgical Face Masks Controlled Trial

[NIH: Use of Surgical Face Masks to Reduce the Incidence of the Common Cold Among Health Care Workers in Japan: A Randomized Controlled Trial](#) (2009-02-12)

Results: Thirty-two health care workers completed the study, resulting in 2464 subject days. There were 2 colds during this time period, 1 in each group. Of the 8 symptoms recorded daily, subjects in the mask group were significantly more likely to experience headache during the study period ($P < .05$). Subjects living with children were more likely to have high cold severity scores over the course of the study.

Conclusion: Face mask use in health care workers has not been demonstrated to provide benefit in terms of cold symptoms or getting colds. A larger study is needed to definitively establish noninferiority of no mask use.

Mask Efficacy & Recommendations Articles from Various Media

[NIH: Preliminary Report on Surgical Mask Induced Deoxygenation during Major Surgery](#) (2008-04-19)

[BMJ: A Cluster Randomized Trial of Cloth Masks Compared with Medical Masks in Healthcare Workers](#) (2015-03-25)

[WHO stands by recommendation to not wear masks if you are not sick or not caring for someone who is sick](#) (March 31, 2020)

[BBC News: Coronavirus: Who needs masks or other protective gear?](#) (April 2, 2020)

[WHO: Face Masks Are Not Effective In Preventing COVID-19 Spread in Asymptomatic People](#) (2020-04-08)

[NASEM: Effectiveness of Homemade Fabric Masks to Protect Others from Spread of COVID-19 Examined...](#) (2020-04-09)

[Physicist's New Study: Why Masks Don't Work & How Governments Are Operating a Science Vacuum](#) (2020, August)

[Quick Demo of How Masks \(Don't\) Help](#) (2020-08-01 duration 6:07 – Dr. Ted Noel)

[Europe's Top Health Officials Say Masks Aren't Helpful in Beating COVID-19](#) (2020-08-06)

[The World Health Organization](#)

The WHO says only two types of people should wear masks, those who are:

- sick and show symptoms
- caring for people suspected to have the coronavirus

Why doesn't everyone wear one?

Surgical masks are not recommended for the general public because:

- they can be contaminated by other people's coughs and sneezes or when putting them on or removing them
- frequent hand-washing and social distancing are more effective
- they might offer a false sense of security

BMJ Randomized Clinical Trial of Cloth Masks Conclusion

“This study is the first RCT of cloth masks, and the results caution against the use of cloth masks. This is an important finding to inform occupational health and safety. Moisture retention, reuse of cloth masks and poor filtration may result in increased risk of infection.”

[Cedars-Sinai: COVID-19: FAQ](#)

[U.S. Health Officials Say Americans Shouldn't Wear Face Masks to Prevent Coronavirus -- There Are 3 Other Reasons Not to Wear Them](#) (2020-03-02)

<https://www.livescience.com/coronavirus-do-face-masks-work.html> (March 31, 2020)

Should I wear a mask in public?

You don't need to wear a mask if you're healthy. When you wear a mask, the outer surface can become contaminated, which can potentially increase your risk of becoming infected if you pull it down under your nose or chin or touch it with your hands.

However, people who are ill with a severe cough can wear a mask to prevent spreading the illness to others.

[Masks Don't Work - Vaccine Choice Canada - A Review of Science Relevant to COVID-19 Social Policy](#) (2020, April)

[The WHO Is Telling Us Something Else About Mask-Wearing](#) (2020-05-29)

Current WHO Recommendations:

- If you are healthy, you only need to wear a mask if you are taking care of a person with COVID-19
- Wear a mask if you are coughing or sneezing
- Masks are effective only when used in combination with frequent hand-cleaning with alcohol-based hand rub or soap and water
- If you wear a mask, then you must know how to use it and dispose of it properly.

[AAPS: Mask Facts](#) (2020-06-01)

[WHO: Asymptomatic Rarely Spread COVID-19](#) (2020-06-08)

[WHO Retracts Claim of Asymptomatic Spread of COVID-19](#) (2020-06-09)

[Doctor Kelly Victory Is Explaining Everything \(the Truth\) About COVID-19](#) (2020-07-04 duration 17:31
Kelly Victory, M.D. Trauma & Emergency Specialist Steamboat Springs, CO)

[Proof That Faces Masks Do More Harm Than Good](#) (2020, October – Dr. Vernon Coleman PDF)

[America's Frontline Doctors - White Coat Summit II](#) (2020-10-22 duration 36:41)

[Landmark Study Finds Masks Are Ineffective](#) (2020-12-03)

[Time to Defund the Forced Maskers](#) (2020-12-28)

What Does the Science Say About Masks?

Surgical masks and N95 masks perform about the same — A 2009 study¹⁸ published in JAMA compared the effectiveness of surgical masks and N95 respirators to prevent seasonal influenza in a hospital setting; 24% of the nurses in the surgical mask group still got the flu, as did 23% of those who wore N95 respirators.

Cloth masks perform far worse than medical masks — A study¹⁹ published in 2015 found health care workers who wore cloth masks had the highest rates of influenza-like illness and laboratory-confirmed respiratory virus infections, when compared to those wearing medical masks or controls (who used standard practices that included occasional medical mask wearing).

Compared to controls and the medical mask group, those wearing cloth masks had a 72% higher rate of lab-confirmed viral infections. According to the authors:

"Penetration of cloth masks by particles was almost 97% and medical masks 44%. This study is the first RCT of cloth masks, and the results caution against the use of cloth masks ... Moisture retention, reuse of cloth masks and poor filtration may result in increased risk of infection."

"No evidence" masks prevent transmission of flu in hospital setting — In September 2018, the Ontario Nurses Association (ONA) won its second of two grievances filed against the Toronto Academic Health Science Network's (TAHSN) "vaccinate or mask" policy. As reported by the ONA:²⁰

"After reviewing extensive expert evidence submitted ... Arbitrator William Kaplan, in his September 6 decision,²¹ found that St. Michael's VOM policy is 'illogical and makes no sense' ...

In 2015, Arbitrator James Hayes struck down the same type of policy in an arbitration that included other Ontario hospitals across the province ... Hayes found there was 'scant evidence' that forcing nurses to use masks reduced the transmission of influenza to patients ...

ONA's well-regarded expert witnesses, including Toronto infection control expert Dr. Michael Gardam, Quebec epidemiologist Dr. Gaston De Serres, and Dr. Lisa Brosseau, an American expert on masks, testified that there was ... no evidence that forcing healthy nurses to wear masks during the influenza season did anything to prevent transmission of influenza in hospitals.

They further testified that nurses who have no symptoms are unlikely to be a real source of transmission and that it was not logical to force healthy unvaccinated nurses to mask."

No significant reduction in flu transmission when used in community setting — A policy review paper²² published in *Emerging Infectious Diseases* in May 2020, which reviewed "the evidence base on the effectiveness of nonpharmaceutical personal protective measures ... in non-healthcare settings" concluded, based on 10 randomized controlled trials, that there was "no significant reduction in influenza transmission with the use of face masks ..."

Risk reduction may be due to chance — In 2019, a review of interventions for flu epidemics published by the World Health Organization concluded the evidence for face masks was slim, and may be due to chance:²³

"Ten relevant RCTs were identified for this review and meta-analysis to quantify the efficacy of community-based use of face masks ...

In the pooled analysis, although the point estimates suggested a relative risk reduction in laboratory-confirmed influenza of 22% in the face mask group, and a reduction of 8% in the face mask group regardless of whether or not hand hygiene was also enhanced, the evidence was insufficient to exclude chance as an explanation for the reduced risk of transmission."

"No evidence" that universal masking prevents COVID-19 — A 2020 guidance memo by the World Health Organization pointed out that:²⁴

"Meta-analyses in systematic literature reviews have reported that the use of N95 respirators compared with the use of medical masks is not associated with any statistically significant lower risk of the clinical respiratory illness outcomes or laboratory-confirmed influenza or viral infections ...

At present, there is no direct evidence (from studies on COVID-19 and in healthy people in the community) on the effectiveness of universal masking of healthy people in the community to prevent infection with respiratory viruses, including COVID-19."

Vast majority of COVID-19 patients wore mask — According to the Centers for Disease Control and Prevention^{25,26,27} 71% of COVID-19 patients reported "always" wearing a cloth mask or face covering in the 14 days preceding their illness; 14% reported having worn a mask "often."

Mask or no mask, same difference — A meta-analysis and scientific review²⁸ led by respected researcher Thomas Jefferson, cofounder of the Cochrane Collaboration, posted on the prepublication server medRxiv in April 2020, found that, compared to no mask, mask wearing in the general population or among health care workers did not reduce influenza-like illness cases or influenza.

In one study, which looked at quarantined workers, it actually increased the risk of contracting influenza, but lowered the risk of influenza-like illness. They also found there was no difference between surgical masks and N95 respirators.

First COVID-specific mask study fails to show benefit — The first randomized controlled trial^{29,30} to assess the effectiveness of surgical face masks against SARS-CoV-2 infection specifically, was published November 18, 2020, in the Annals of Internal Medicine.³¹ It included 3,030 individuals assigned to wear a surgical face mask and 2,994 unmasked controls.

Of them, 80.7% completed the study. Based on the adherence scores reported, 46% of participants always wore the mask as recommended, 47% predominantly as recommended and 7% failed to follow recommendations.

Among mask wearers, 1.8% (42 participants) ended up testing positive for SARS-CoV-2, compared to 2.1% (53) among controls. When they removed the people who reported not adhering to the recommendations for use, the results remained the same — 1.8% (40 people), which suggests adherence makes no significant difference.

Among those who reported wearing their face mask "exactly as instructed," 2% (22 participants) tested positive for SARS-CoV-2 compared to 2.1% (53) of the controls. In conclusion, they found that masks may reduce your risk of SARS-CoV-2 infection by as much as 46%, or it may increase your risk by 23%.

COVID Conflicts, Asymptomatic Testing, Lack of Danger to Kids

[COVID Conflicts: Asymptomatic Testing, Lack of Danger to Kids](#) (2020-12-29)

Ivor Cummins is a biochemical engineer with a background in medical device engineering and leading teams in complex problem-solving. On his website, TheFatEmperor.com,¹ he offers guidance on how to decode science to transform your health. In a podcast from December 11, 2020, he interviewed Dr. Reid Sheftall about SARS-CoV-2, the virus that causes COVID-19.

Sheftall is an intelligent surgeon, having scored in the 99.95 percentile on the SATs and off the scale on his medical board and surgical board exams. He begins by explaining that the SARS-CoV-2 is only 100 nanometers in diameter, which is smaller by one-fourth than SARS-2 virus, which is only 125 nanometers in diameter, which is smaller, by one-fourth, than the shortest wavelength that we can see in the visible spectrum.

He's been using social media to write essays about different aspects of the virus and the policies that were enacted because of what he calls "mistakes that were made early on" in the pandemic. Here are seven of Sheftall's predictions and corrections, along with the date in which he made them, which are covered in more detail during the interview:

1. Sars-CoV-2 has an infection mortality rate that is equal to or less than the flu (March 15).
2. Masks won't reduce the transmissibility (March 15), but experts still say they do.
3. Lockdowns not only will not work, but will cause much death and destruction, including loss of jobs and insurance, life savings and other resources, up to and including loss of life (March 17). Experts are still lobbying for use of lockdowns.
4. We should not close schools because we don't close them for the flu, which is a much deadlier disease than SARS-2 in that age group (March 18).
5. The reason the cases and deaths are so low in Asian countries is not because of better testing, racing and lockdowns, as the experts have said and continue to say, but is because of "immunity in place" due to cross reactivity of SARS-2 with previously encountered coronaviruses. This is mediated by cross reacting memory B and T cells, secretory IgA (August 10, not yet proven).
6. We're not experiencing "second waves" in the U.S. They are first waves in different parts of the country as the virus marches through different climate types in different regions (August 10).
7. There are not 40 million cases in the U.S. There are at least 160 million (October 17).

Infection Fatality Rate Has Been Wrong Since the Beginning

Early on during the pandemic, infection mortality rate claims varied from 2.7% to 7%, with most being in the 4% range. According to Sheftall, that's "about 40 times too high" and ended up causing panic and fear in the public. He figured out the infection mortality rate was wrong because he noticed something important: The wide fluctuations in mortality rates didn't add up:

"As a surgeon, we noticed that surgical outcomes are very close. From a very good surgeon to a very mediocre surgeon, the mortality and morbidity is very close.

Yet, when I heard the information about what had happened in Italy, where 7%, supposedly, of the people infected were dying and in Germany, where it was much lower, I'm thinking that doesn't make sense because the Italians would call their German colleagues and find out if something was being done differently and change something, and the rate should be very close to the same. So, I knew there was a problem."

Sheftall suggested that selection bias was being used in the counting of cases, and organizations such as the World Health Organization and the U.S. Centers for Disease Control and Prevention were drastically undercounting the number of people who were infected, which inflated the mortality rate.

Sheftall looked for data in which every case had been counted, ending up with a cruise ship, in which every person had been tested, and a small town in Germany that had also tested all residents. "When I crunched the numbers, the infection fatality rate came out to 0.14%, so I knew ... there were some gross errors going on."

Sheftall posted his findings on Facebook, only to be told he was wrong. He then wrote letters to Fox and CNN, hoping to share the information with the public, but he didn't hear back.

"What happened, unfortunately, is that everybody accepted those numbers as gospel, if you will, and proceeded to make models that were way off. Epidemiologists appeared on television, and they were way off.

The general population, as I said before, began to panic and then the politicians were able to — and I'm not saying they were nefarious in this — but they were able to institute some policies, which were extremely destructive ... I don't think the general public would have agreed to lockdowns, for example, if they had known that the infection fatality rate is 0.1% ... the same as the flu."

Other experts, like Stanford University's disease prevention chairman Dr. John Ioannidis — an epidemiologist who has made a name for himself by exposing bad science — have also criticized [global lockdown measures](#), saying they were implemented based on flawed modeling and grossly unreliable data. Like Sheftall, Ioannidis suggested the infection fatality rate was actually 0.05% to 1%, with a median of about 0.25%.²

Shutting Down Schools 'Makes Absolutely No Sense'

Sheftall cites COVID-19 survival rates by age, posted by the CDC September 10, 2020, which are as follows:

- Ages birth to 19: 99.997%
- Ages 20 to 49: 99.98%
- Ages 50 to 69: 99.5%
- Ages 70 and up: 94.6%

This translates into a 0.1% infection fatality rate, using the CDC's own numbers — and the CDC is one of the agencies that cited a 4% infection fatality rate early on. Sheftall couldn't find data on the survival rate of school-aged children from 5 to 17 years, but he did uncover that there were 51 COVID-19 deaths reported in that age range from March 1 to September 10, 2020.

"Now there are 56.4 million students in elementary, middle and high school in the United States so that means the chances by population, not by infection but by population, are less than 1 in a million per year for a student in school, and that's very important because we've shut down the schools in America, which causes a lot of problems," he said.

Given these numbers, shutting down schools "makes absolutely no sense," as he noted that every year more than 200 school-aged children, on average, die from the flu during a five-month flu season. "So, if you want to be consistent ... if you're going to close the schools for SARS-CoV-2 you must close them every year for the flu because it's actually much more severe in the school-age group."

But closing schools has consequences, as has been made readily apparent during the pandemic. Interruptions in learning are common — "they did a survey in Boston and only half the children were logging in" to virtual learning, Sheftall said, while others don't have money for a computer or internet connection. Other issues that may have been picked up on at school, like problems with vision or hearing, or cases of abuse, may also go unnoticed.

Asymptomatic Testing Goes 'Against Good Practice'

According to The Atlantic's COVID Tracking Project, more than 230.3 million [COVID-19 tests](#) have been conducted in the U.S. as of December 20, 2020,³ which includes an unknown number of tests conducted on people with no symptoms.

The costs for such testing could be used for a more productive purpose, according to Sheftall. Cummins also notes that "it's kind of unethical and it's against good practice" to test asymptomatic people at such a massive rate. "The whole basis of medicine," he says, is to test people with symptoms so you can find out what's wrong and treat them accordingly. Sheftall continues:

"In 2017 to 2018 ... between 70 and 80 million people in America got the flu ... nobody noticed for the most part and no one was tested. I'm a doctor and I vaguely remember that it was a bad flu season. That was it. And yet with COVID we're testing so many people you wouldn't believe it."

During a June 8, 2020, press briefing, Maria Van Kerkhove, the World Health Organization's technical lead for the COVID-19 pandemic, made it very clear that [asymptomatic transmission is very rare](#), meaning an individual who tests positive but does not exhibit symptoms is highly unlikely to transmit live virus to others.

A study in Nature Communications also found "there was no evidence of transmission from asymptomatic positive persons to traced close contacts."⁴ Meanwhile, the COVID-19 tests are problematic in and of themselves.

These positive reverse transcription polymerase chain reaction (RT-PCR) tests have been used as the justification for keeping large portions of the world locked down for the better part of 2020, despite the fact that [PCR tests](#) have proven remarkably unreliable with high false result rates.

A positive test does not actually mean that an active infection is present. The PCR swab collects RNA from your nasal cavity. This RNA is then reverse transcribed into DNA. However, the genetic snippets are so small they must be amplified in order to become discernible.

What this does is amplify any, even insignificant sequences of viral DNA that might be present to the point that the test reads "positive," even if the viral load is extremely low or the virus is inactive. According to Sheftall:

"When we see all these positive cases, some of them are older than they're letting on. They're calling them new cases. The test looks for messenger RNA fragments in the oral pharynx, OK? It's the swab test. It's an antigen test, OK, as opposed to an antibody test."

And those fragments can stay in there for months after the patient has recovered. That's No. 1. And No. 2, think of the name — it's polymerase chain reaction. The PCR test is an amplification test. It can take a tiny fragment and amplify it into a billion fragments ...

There are different types of immunological responses to a pathogen, one of which is the barrier immunity. And you can have fragments of messenger RNA in your oral pharynx and have never gotten sick from the disease, never even registered on the scale, no bullet, no signal, no nothing because the barrier immunity injured the viruses early on and broke them into pieces, and then the PCR picks it up as a new test."

Masks, Lockdowns Don't Work

Sheftall also compiled daily new deaths for six countries, including the United Kingdom, France, Italy, Spain, Germany and Sweden. All of them have similar death curves, despite whether they instituted lockdowns or not. He also found a graph (pictured at 40 minutes in the video) in which scientists compared the number of cases in a region with how stringent the measures were by the government, including degree of lockdown, group restrictions and mask mandates.

"You can see that there's no reverse correlation like you would expect ... if the measures are not stringent you should see more cases, according to their thinking ... [but] it's the exact opposite of what the people were saying," Sheftall said. In fact, the graph largely shows lower cases when less stringent measures were taken.

"It's the same with mask introductions," Cummins added. "If you look at around 10 or 12 countries where they brought in mask mandates, there was no impact on the curve ... whatsoever so the empirical science of our own eyes is screaming at us: Masks and lockdowns don't really move the needle much, maybe a little, but no one wants to know. It's an ideology now. It's a religion."

Sheftall studied mask usage extensively and found mask mandates did not noticeably change the number of cases or deaths the way they should if they actually reduce transmissibility. Countries that used minimal masks were not worse off than neighboring countries with mask mandates.

"Due to statements by experts and CNN commercials claiming that masks prevent viral spread, mass hysteria descended on the world over the wearing of masks," he said. There have been cases of hot coffee being thrown in the faces of people not wearing masks, fines issued and other hysteria, over a measure that's not proven to work.

In fact, in the first randomized controlled trial of more than 6,000 individuals to assess the effectiveness of surgical face masks against SARS-CoV-2 infection found masks did not statistically significantly reduce the incidence of infection. Among mask wearers, 1.8% ended up testing positive for SARS-CoV-2, compared to 2.1% among controls.⁵

When they removed the people who did not adhere to proper mask use, the results remained the same — 1.8%, which suggests adherence makes no significant difference.

Study Praising Mask Mandates Retracted

A study that found COVID-19 hospitalizations decreased after mask mandates were put in place in 1,083 U.S. counties was withdrawn in November 2020, after changes in the number of cases caused researchers to second-guess their conclusions:

*"The authors have withdrawn this manuscript because there are increased rates of SARS-CoV-2 cases in the areas that we originally analyzed in this study. New analyses in the context of the third surge in the United States are therefore needed ..."*¹⁵

Meanwhile, the first randomized controlled trial of more than 6,000 individuals to assess the effectiveness of surgical [face masks against SARS-CoV-2](#) infection found masks did not statistically significantly reduce the incidence of infection.¹⁶ Among mask wearers, 1.8% ended up testing positive for SARS-CoV-2, compared to 2.1% among controls.

When they removed the people who did not adhere to proper mask use, the results remained the same — 1.8%, which suggests adherence makes no significant difference. Among those who reported wearing their face mask "exactly as instructed," 2% tested positive for SARS-CoV-2 compared to 2.1% of the controls.

The findings further call into question the effectiveness of mandated masks for preventing COVID-19, as does a case-control investigation of people with COVID-19 who visited 11 U.S. health care facilities. The U.S. Centers for Disease Control and Prevention report revealed factors associated with getting the disease,¹⁷ including the use of cloth face coverings or masks in the 14 days before becoming ill.

The majority of them — [70.6% — reported that they "always" wore a mask](#), but they still got sick. Among the interview respondents who became ill, 108, or 70.6%, said they always wore a mask, compared to six, or 3.9%, who said they "never" did, and six more, or 3.9%, who said they "rarely" did.

Taken together, this shows that, of the symptomatic adults with COVID-19, 70.6% always wore a mask and still got sick, compared to 7.8% for those who rarely or never did.

17 Ways That Masks Can Cause Harm

Medical masks adversely affect respiratory physiology and function	Medical masks lower oxygen levels in the blood
Medical masks raise carbon dioxide levels in the blood	SAR-CoV-2 has a "furin cleavage" site that makes it more pathogenic, and the virus enters cells more easily when arterial oxygen levels decline, which means wearing a mask could increase COVID-19 severity
Medical masks trap exhaled virus in the mouth/mask, increasing viral/infectious load and increasing disease severity	SARS-CoV-2 becomes more dangerous when blood oxygen levels decline
The furin cleavage site of SARS-CoV-2	Cloth masks may increase the risk of contracting COVID-19

increases cellular invasion, especially during low blood oxygen levels	and other respiratory infections
Wearing a face mask may give a false sense of security	Masks compromise communications and reduce social distancing
Untrained and inappropriate management of face masks is common	Masks worn imperfectly are dangerous
Masks collect and colonize viruses, bacteria and mold	Wearing a face mask makes the exhaled air go into the eyes
Contact tracing studies show that asymptomatic carrier transmission is very rare	Face masks and stay at home orders prevent the development of herd immunity
Face masks are dangerous and contraindicated for a large number of people with pre-existing medical conditions and disabilities	

NCBI (National Center for Biotechnology Information)

Division of the U.S. National Library of Medicine and National Institutes of Health

[Coronavirus: An Overview of Their Replication and Pathogenesis](#) (2016-01-01)

This document provides information about the Coronaviruses belonging to the *Nidovirales* order (i.e., largest group of CoVs; e.g., SARS-CoV and MERS-CoV). Since I couldn't find data specifically on the SARS-CoV-2 (COVID-19) virus, I'm assuming the size is still relevant.

Coronavirus Size

Coronavirus virions are spherical with diameters of approximately **125 nm** as depicted in recent studies by cryo-electron tomography and cryo-electron microscopy [2,3].

NOTE: 125 nano-meters is 0.125 microns or approximately 42% smaller than the smallest particle (.3 microns) an N95 respirator can filter out. So how is it that any mask (including N95 respirators) can be effective at preventing the virus from being breathed in, or exhaled, by the wearer?

OSHA Respiratory Protection Standard

[OSHA: Respiratory Protection Standard 29 CFR 1910.134 and Personal Protection Equipment](#) (2011-06-08)

[Letter to OSHA Regarding Respiratory Protection Standard, 29 CFR 1910.134](#) (2007-04-02)
[OSHA: Personal Protection Equipment Fit Testing Procedures \(1910.134 App A\)](#) (2004-08-04)
[Taught to Believe Masks Aren't Harmful, Here's Proof It Is!](#) (2020-06-28 duration 14:21)

- **OSHA: Oxygen Deficient Atmosphere** means an atmosphere with an oxygen content below 19.5% by volume
- **OSHA Respiratory Protection Standard:** Paragraph (d)(2)(iii) of the Respiratory Protection Standard considers any atmosphere with an oxygen level below 19.5 percent to be oxygen-deficient and immediately dangerous to life or health.
- **OSHA: 1910.134(i)(1)(ii)(A)** Oxygen content (v/v) of 19.5-23.5%
- **Federal Register, Vol. 63, p. 1159** “The rulemaking record for the Respiratory Protection Standard clearly justifies adopting the requirement that air breathed by employees must have an oxygen content of at least 19.5 percent. A lesser concentration of oxygen in employees’ breathing air could endanger them physiologically and diminish their ability to cope with other hazards that may be present in the workplace.”
- Surgical, N95 Respirator and simple masks when worn all tested below OSHA’s minimal 19.5% oxygen by volume (i.e., they were an immediate health hazard)

Consider This

The following was copied from a concerned citizen’s Facebook message on July 17, 2020:

I am not a masker or a non masker. But I do know we are being set up for something, and I believe it is far worse than what we are enduring.

For all of my friends defending the mask, I won’t unfriend you, no matter how hard you try to push your views down my throat, but read this... ↓□

When you ask why I won’t wear a mask and say - “It’s just a mask.”

.....“It's just a mask" can turn into "it's just a vaccine" very quickly. And it will, you can bet your bottom dollar on that!

In less than 5 months, our government has successfully divided the country into "obedient mask wearers" versus "selfish people that refuse to wear masks.”

"It's just a mask, you guys." It's for "the greater good!"

Where have we heard this phrase before?

In less than 5 months, our government has dictated what events are acceptable versus unacceptable to attend. Riots are OK, but church and family funerals are not. Standing in a graduation line is a "safety hazard,” but feel free to line up at WalMart, Lowes, and Home Depot.

But it's "just a mask" & "safety precautions,” you guys.

In less than 5 months, our government successfully facilitated the closing of family-owned businesses while granting authority to large corporations that they have invested interests in.

It's "just a mask" and "safety precautions" you guys. Oh & here's a measly \$1200 that we stole from you in the first place. Enjoy!

In less than 5 months, our government was able to successfully sway the population into believing that a CASHLESS SOCIETY is a good thing! In the name of a government sponsored virus. (Also, have you noticed that many businesses are strongly suggesting you use your debit or credit cards instead of cash- or expect you to pay in exact change..because there is a "shortage" of cash and coins at the federal reserve. Supports the cashless society agenda doesnt it??)

In less than 5 months, our government closed down public schools, and has "restructured" school moving forward under the guise of "public safety" from a "virus." These same schools fed children crap per the corrupt USDA food pyramid. But "health" matters when it comes to a government sponsored virus !

It's "just a mask" & "heightened safety precautions," you guys.

In less than 5 months, our government demonstrated how easily people assimilate to "guidelines" (that have NO scientific premise whatsoever) when they are fearful.

What was up with all that toilet paper?

It's "just a mask" & "6 foot social distancing," you guys. Oh, and dooky paper.

In less than 5 months, our government has successfully instilled fear in a majority of the population in America.

But citizens are not "afraid" of the people in power who are responsible for the removal of their "freedoms." Instead, they're fearful of their neighbors and family, human touch, and air. Government created division.

There are thousands of viruses that *could* affect the population, but these viruses do not matter because MSM didn't say they do.

It's absolutely terrifying to me that so many people do not question authority because they see that authority as "all knowing." It's even more terrifying that these same people rely on corrupt "leaders" to be led, thus lacking all critical thinking skills/independence.

Slaves to the system that keeps them oppressed.

How quickly history is forgotten and repeated!

What's most problematic to me about all of this is that the people who are wearing masks "for the greater good" will be the first to sign up for this shiny new vaccine that's had 0 longitudinal safety tests against an inert placebo.

What's more problematic to me is that this Vaccine MAY be the deciding factor in life moving forward.

You thought a mask was inconvenient? Wait until you're told that you cannot enter a store without proof of the Covid-19 vaccine. Wait until you cannot go to public events, or travel, without proof of having received this vaccine.

To everyone that doesn't believe this is possible - do you understand that our government just successfully dictated to people WHEN they were allowed to be outside, where they were allowed to go, and how their children would be educated, in less than 5 months? And that a majority of the population followed blindly because they were told to do so.

You're kidding yourself if you believe that they're not going to repeat this behavior with a vaccine.

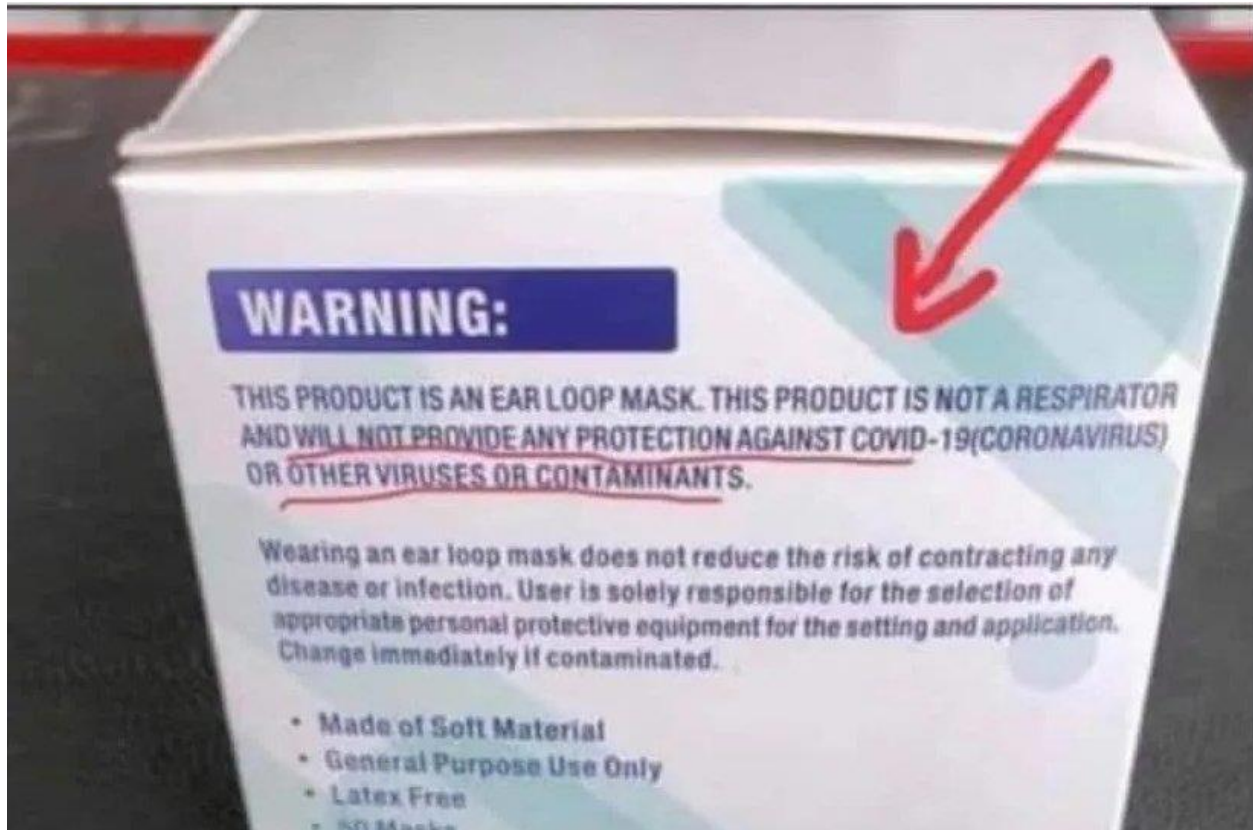
If people have not protested the occurrences in America over the last 5 months, they will assuredly continue to abide by unsubstantiated "guidelines" that will include a vaccine.

It's not about a mask, it's about CONTROL.

This is a copy and paste, but after all that has happened it needs to be read and considered.

*Copy and share

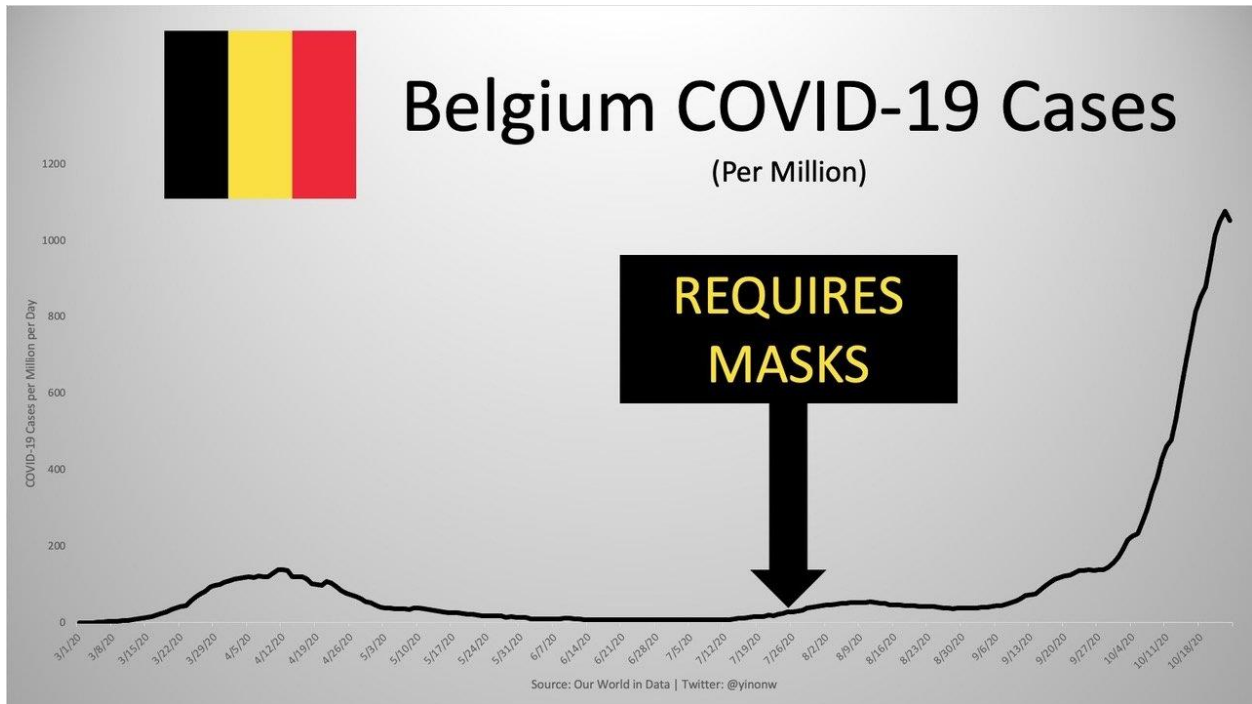
Apparently Face Mask Manufacturers Aren't Aware That Their Masks Protect Against COVID-19



Graphs That Show Face Masks Do Nothing to Stop COVID-19 Spread

- [WebMD: Why Are COVID Cases Increasing So Fast Right Now](#) (2020-11-20)

Foreign Countries

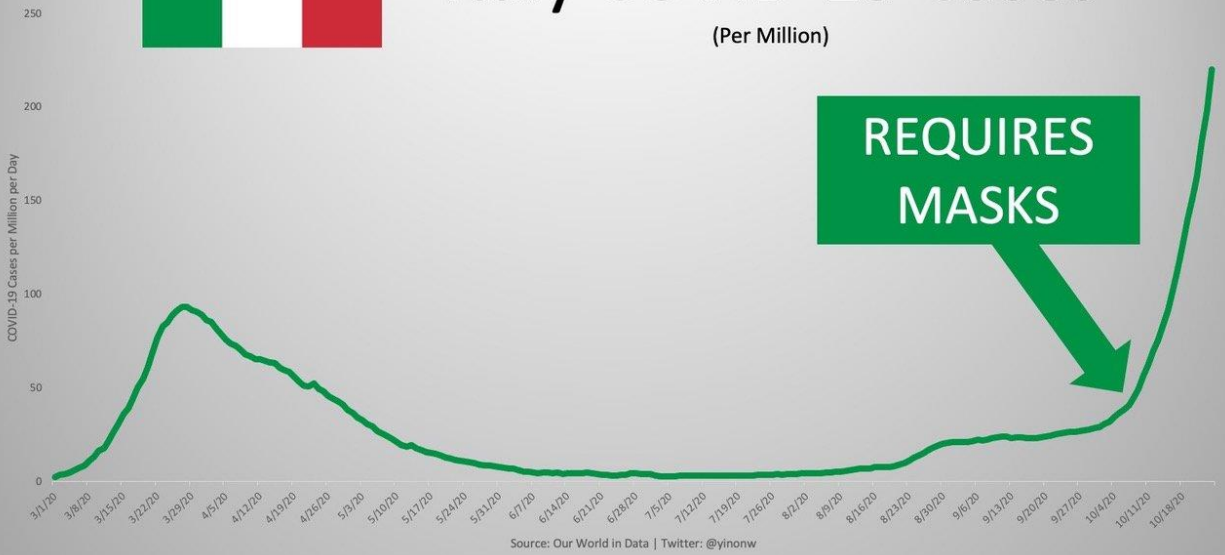






Italy COVID-19 Cases

(Per Million)



Source: Our World in Data | Twitter: @yionw



Spain COVID-19 Cases

(Per Million)



Source: Our World in Data | Twitter: @yionw



UK COVID-19 Cases

(Per Million)



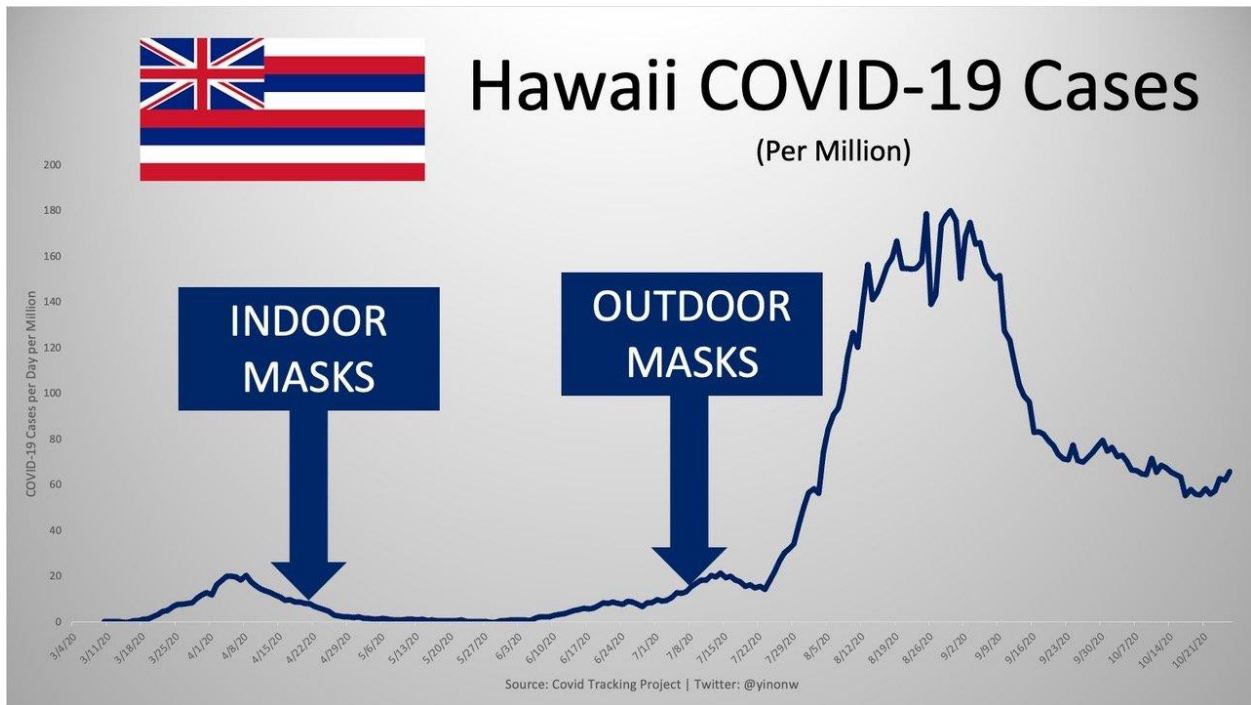
European COVID-19 Cases

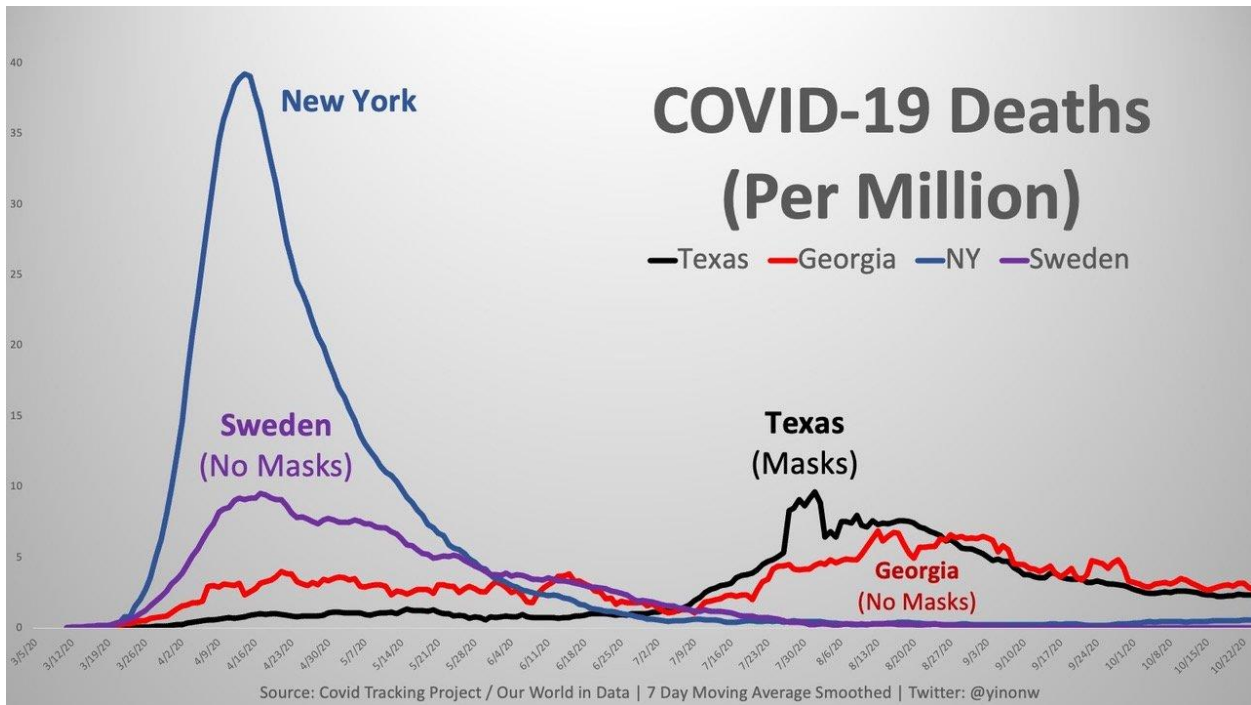
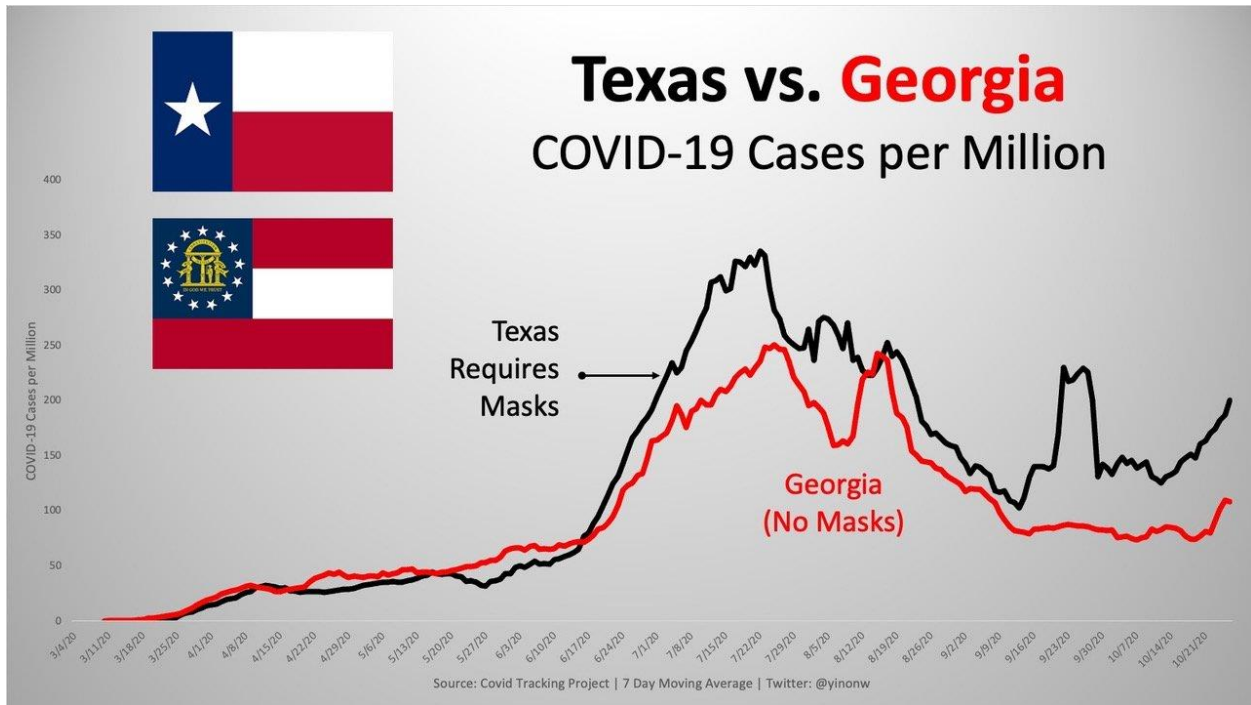
(Per Million)

Masks Required Vs. **No Masks Required**



United States





The Great Barrington Declaration

[The Great Barrington Declaration](#) (2020-10-04)

The Great Barrington Declaration – As infectious disease epidemiologists and public health scientists we have grave concerns about the damaging physical and mental health impacts of the prevailing COVID-19 policies, and recommend an approach we call Focused Protection.

Coming from both the left and right, and around the world, we have devoted our careers to protecting people. Current lockdown policies are producing devastating effects on short and long-term public health. The results (to name a few) include lower childhood vaccination rates, worsening cardiovascular disease outcomes, fewer cancer screenings and deteriorating mental health – leading to greater excess mortality in years to come, with the working class and younger members of society carrying the heaviest burden. Keeping students out of school is a grave injustice.

Keeping these measures in place until a vaccine is available will cause irreparable damage, with the underprivileged disproportionately harmed.

Fortunately, our understanding of the virus is growing. We know that vulnerability to death from COVID-19 is more than a thousand-fold higher in the old and infirm than the young. Indeed, for children, COVID-19 is less dangerous than many other harms, including influenza.

As immunity builds in the population, the risk of infection to all – including the vulnerable – falls. We know that all populations will eventually reach herd immunity – i.e. the point at which the rate of new infections is stable – and that this can be assisted by (but is not dependent upon) a vaccine. Our goal should therefore be to minimize mortality and social harm until we reach herd immunity.

The most compassionate approach that balances the risks and benefits of reaching herd immunity, is to allow those who are at minimal risk of death to live their lives normally to build up immunity to the virus through natural infection, while better protecting those who are at highest risk. We call this Focused Protection.

Adopting measures to protect the vulnerable should be the central aim of public health responses to COVID-19. By way of example, nursing homes should use staff with acquired immunity and perform frequent PCR testing of other staff and all visitors. Staff rotation should be minimized. Retired people living at home should have groceries and other essentials delivered to their home. When possible, they should meet family members outside rather than inside. A comprehensive and detailed list of measures, including approaches to multi-generational households, can be implemented, and is well within the scope and capability of public health professionals.

Those who are not vulnerable should immediately be allowed to resume life as normal. Simple hygiene measures, such as hand washing and staying home when sick should be practiced by everyone to reduce the herd immunity threshold. Schools and universities should be open for in-person teaching. Extracurricular activities, such as sports, should be resumed. Young low-risk adults should work normally, rather than from home. Restaurants and other businesses should open. Arts, music, sport and

other cultural activities should resume. People who are more at risk may participate if they wish, while society as a whole enjoys the protection conferred upon the vulnerable by those who have built up herd immunity.

As of December 3, 2020, the Great Barrington Declaration has been signed by:

Concerned Citizens: 675,536

Medical & Public Health Scientists: 12,575

Medical practitioners: 37,427

Facts and Questions That Should Demand Answers

The following is a list of just a few of the facts and questions that should demand answers. Hopefully, it will stimulate many more questions regarding the COVID-19 pandemic.

1. Event 201 Coronavirus Pandemic Simulation on October 18, 2019 eerily depicts actual Coronavirus pandemic that began just a few weeks later. Coincidence?
 - [The Event 201 Scenario](#) (2019-10-18)
 - [JHCHS: Event 201 Pandemic Exercise](#) (2019-10-19)
2. The Lancet publishes first clinical cases calling into question that the Wuhan seafood market was the source then more investigations took place. What happened to the investigations of the Wuhan Virology Lab?
 - [Lancet: Clinical Features of Patients Infected with 2019 Novel Coronavirus in Wuhan, China](#) (2020-01-24)
 - [AAAS: Wuhan Seafood Market May Not Be Source of Novel Virus Spreading Globally](#) (2020-01-26)
 - [First Coronavirus Patient Had No Connection to Wuhan Seafood Market-So Did the Disease Start Elsewhere?](#) (2020-02-18)
 - [NYP: US Officials Confirm Investigation Into Whether Coronavirus Escaped from Wuhan Lab](#) (2020-04-17)
 - [Corona Blame Wuhan Lab 'Did Absolutely Crazy Things' to Manipulate Coronavirus Into Infecting Humans, Russian Microbiologist Claims](#) (2020-04-23)
 - [Exclusive--Congressman: Nancy Pelosi Blocking Investigation Into Chinese Coronavirus Origins, Tax Money to Wuhan Lab](#) (2020-05-03)
 - [WHO to Visit Wuhan Lab During Investigation Into Cause of Coronavirus](#) (2020-08-28)
 - [NYP: Chinese Virologist Claims She Has Proof COVID-19 Was Made in Wuhan Lab](#) (2020-09-11)
 - [FOX: Coronavirus Whistleblower Speaks Out About Possible COVID Origin on 'Tucker'](#) (2020-09-15 duration 6:36 Dr. Li-Meng Yan Chinese Virologist)
 - [Lawsuits Begin Over SARS-CoV-2 Lab Leak](#) (2020-11-17)
 - [The Biggest Conspiracy Behind COVID-19 Now Proven](#) (2020-12-16)
 - [China Deletes Key SARS-CoV-2 Related Science](#) (2021-01-23 – What are they covering up?)
3. First U.S. COVID-19 case arrived from Wuhan China in Seattle, Washington on January 15, 2020. The same day Pelosi finally delivered articles of impeachment to Senate.
 - [NYT: House Delivers Impeachment Charges to Senate, Paving the Way for a Trial](#) (2020-01-15)
 - [CDC: Evidence for Limited Early Spread of COVID-19 Within the United States January - February 2020](#) (2020-05-29)
4. Fauci and CDC said COVID-19 was nothing more than flu.
 - [Dr. Fauci Concedes Coronavirus Death Rate Like 'Very Bad Flu'](#) (2020-03-27)

- [CDC Director Reacts to Resurfaced Tape of Fauci Downplaying Virus Threat](#) (2020-03-27)
 - [COVID Conflicts: Asymptomatic Testing, Lack of Danger to Kids](#) (2020-12-29)
 - [Exposed: Fauci and CDC Clash; Can't Keep Their Story Straight](#) (2021-01-12)
5. Why did Pelosi encourage people to come to China town and celebrate—nothing to fear—weeks after President Trump’s China travel ban? And why do “leaders” who make the face mask, social distancing and lockdown rules and regulations ignore them if COVID is so dangerous? Rules for thee, but not for me.
- [Pelosi Encouraged Public Gatherings in Late February, Weeks After Trump's China Travel Ban](#) (2020-03-30)
 - [Chicago Mayor Lightfoot Violates Her Own Quarantine Advice to Get a Haircut](#) (2020-04-07)
 - [When Those Calling the Shots Break Their Own COVID-19 Rules, Something Far Worse Than Hypocrisy Is Revealed](#) (2020-08-06)
 - [Pelosi Admits Breaking Lockdown for Salon Visit; Blames Business, Says She Did Nothing Wrong](#) (2020-09-01)
 - [Calif. Gov. Newsom, Officials Caught Defying Their Own COVID-19 Restrictions](#) (2020-11-19)
 - [Our Hypocritical Leaders Refuse to Obey Their Own COVID-19 Rules](#) (2020-11-20)
6. Why did the U.S. government place a moratorium on Gain-of-Function studies in 2014 and then lift the ban in 2017? If it was unethical and dangerous to make a pathogen more transmissible and deadly and more capable of creating a pandemic in 2014 then why was it suddenly no longer a problem three years later and then two years later we have COVID-19?
- [ASM: Biocontainment in Gain-of-Function Infectious Disease Research](#) (2012-10-12)
 - [US Scientist Professor Yoshihiro Kawaoka's Mutated H1N1 Flu Virus 'Poses a Threat to Human Population If It Should Escape,' Says Critic](#) (2014-07-07)
 - [U.S. Halts Funding for New Risky Virus Studies, Calls for Voluntary Moratorium](#) (2014-10-17)
 - [NIH: NIH Lifts Funding Pause on Gain-of-Function Research](#) (2017-12-19)
 - [Lancet: Ban on Gain-of-Function Studies End](#) (2018-01)
 - [Dr. Fauci Backed Controversial Wuhan Lab with U.S. Dollars for Risky Coronavirus Research](#) (2020-04-28)
 - [NYP: Top Vaccine Scientist Says Coronavirus is 'Almost Perfectly Human Adapted'](#) (2020-05-27)
 - [Norwegian Virologist Claims Coronavirus is 'Chimera' Made in Chinese Lab](#) (2020-06-10)
 - [British-Norwegian Study Calls COVID-19 Man-Made in China](#) (2020-06-10)
 - [Could COVID-19 Have Escaped from a Lab?](#) (2020-09-09)
 - [Lawsuits Begin Over SARS-CoV-2 Lab Leak](#) (2020-11-17)
 - [The Biggest Conspiracy Behind COVID-19 Now Proven](#) (2020-12-16)

NOTE: Could it be that scientists have been warning of a global pandemic for years because they know what they've been working on (i.e., virus gain-of-function) in their virology labs for years? And why

would the media and “mainstream science” immediately rush to ridicule and/or censor any scientist or doctor who dares to refute the official narratives rather than having an open/public and honest debate laying out their alleged evidence and “facts” that they both claim to have? The scientists who refute the official narratives want this, but the media and their “go to” scientists apparently don’t. Why?

From the “Could COVID-19 Have Escaped from a Lab” Article

“Despite the evidence, the scientific community quickly dismissed the idea. Peter Daszak, president of EcoHealth Alliance, which has funded the work of the Wuhan Institute of Virology and other labs searching for new viruses, called the notion “preposterous,” and many other experts echoed that sentiment.

That wasn’t necessarily what every scientist thought in private, though. “They can’t speak directly,” one scientist told me confidentially, referring to the virology community’s fear of having their comments sensationalized in today’s politically charged environment. “Many virologists don’t want to be hated by everyone in the field.”

There are other potential reasons for the pushback. There’s long been a sense that if the public and politicians really knew about the dangerous pathogen research being conducted in many laboratories, they’d be outraged. Denying the possibility of a catastrophic incident like this, then, could be seen as a form of career preservation. “For the substantial subset of virologists who perform gain-of-function research,” Richard Ebright, a Rutgers microbiologist and another founding member of the Cambridge Working Group, told me, “avoiding restrictions on research funding, avoiding implementation of appropriate biosafety standards, and avoiding implementation of appropriate research oversight are powerful motivators.” Antonio Regalado, biomedicine editor of *MIT Technology Review*, put it more bluntly. If it turned out COVID-19 came from a lab, he tweeted, “it would shatter the scientific edifice top to bottom.”

That’s a pretty good incentive to simply dismiss the whole hypothesis, but it quickly amounted to a global gaslighting of the media—and, by proxy, the public. An unhealthy absolutism set in: Either you insisted that any questions about lab involvement were absurd, or you were a tool of the Trump administration and its desperation to blame China for the virus. I was used to social media pundits ignoring inconvenient or politically toxic facts, but I’d never expected to see that from some of our best scientists.”

7. Why did the U.S. government (NIH) give the Wuhan Institute of Virology \$3.7 million in 2017 to do coronavirus experiments? Interestingly, the same year the ban on gain-of-function was lifted. Coincidence?

- [TWT: Anthony Fauci Should Explain '\\$3.7 Million to the Wuhan Laboratory'](#) (2020-04-27)
- [TechStartups: Shocking: U.S. Government Gave \\$3.7 Million Grant to Wuhan Lab Accused of Being the Source of Coronavirus Outbreak...](#) (2020-04-13)
- [Norwegian Virologist Claims Coronavirus is 'Chimera' Made in Chinese Lab](#) (2020-06-10)
- [NYP: Chinese Virologist Claims She Has Proof COVID-19 Was Made in Wuhan Lab](#) (2020-09-11)

8. Why did the U.S. government change the guidelines for classifying hospitalized patients who possibly exhibit coronavirus symptoms as COVID-19 patients and those with coronavirus who died as COVID-19 deaths regardless of the actual cause of death?
 - [CDC: Guidance for Certifying Deaths Due to Coronavirus Disease 2019 \[COVID-19\]](#) (2020, April)
 - [Birx Says Government Is Classifying All Deaths of Patients With Coronavirus As COVID-19 Deaths, Regardless of Cause](#) (2020-04-07)
 - [ACSH: Rethinking COVID-19 Mortality Statistics](#) (2020-05-27)
 - [NHS Nurse Publicly Resigns, Blasts COVID Lockdown Policy](#) (2020-11-05)

9. RT-PCR tests are proven unreliable, yet they're still pushed for COVID-19 and used for quarantine basis.
 - [NEJM: Questionable Reliability of the PCR in Detecting TB](#) (1993-12-30)
 - [NEJM: Questionable Reliability of the Polymerase Chain Reaction in the Detection of Mycobacterium Tuberculosis](#) (1999-12-30)
 - [NCBI: Estimating the Accuracy of Polymerase Chain Reaction-Based Tests Using Endpoint Dilution](#) (2003, Sep)
 - [Was the COVID-19 Test Meant to Detect a Virus?](#) (2020-04-07)
 - [SARS-COV-2 Molecular Assay Evaluation: Results](#) (2020-07-03)
 - [CDC 2019-Novel Coronavirus \(2019-nCoV\) Real-Time RT-PCR Diagnostic Panel](#) (2020-07-13 Rev. 5)
 - [NRCC: No Records of SARS-CoV-2 Isolation Found](#) (2020-07-14)
 - [TWiV 641: COVID-19 with Dr. Anthony Fauci](#) (2020-07-16 duration 36:46 at ~4:25 Fauci concedes that PCR test cycle thresholds of 35 or more “the chances of it being replication confident are minuscule” i.e., essentially worthless yet CDC/FDA recommendations are to do up to 40 cycles)
 - [CEBM: Are You Infectious If You Have a Positive PCR Test Result for COVID-19?](#) (2020-08-05)
 - [NYT: Your Coronavirus Test Is Positive. Maybe It Shouldn't Be.](#) (2020-08-29)
 - [Oops: It Looks Like the Vast Majority of Positive COVID Results Should Have Been Negative](#) (2020-08-29)
 - [Experts: US COVID-19 Positivity Rate High Due to 'Too Sensitive' Tests](#) (2020-08-30)
 - [The Whole Scam Just Fell Apart: COVID Test Overwhelming Number of False Positives](#) (2020-09-01)
 - [Bombshell Report: 90% of Positive COVID-19 Tests Should Be Negative](#) (2020-09-02 duration 3:52)
 - [Coronavirus Cases Plummet When PCR Tests Are Adjusted](#) (2020-09-29)
 - [International Class Action Lawsuits Against Corona PCR Test Manufacturers](#) (2020-10-07)
 - [Dr. Pascal Sacré: The COVID-19 RT-PCR Test: How to Mislead All Humanity. Using a "Test" to Lock Down Society](#) (2020-11-05)
 - [Why COVID-19 Testing Is a Tragic Waste](#) (2020-11-13)
 - [Don't Believe the COVID Case Numbers; It's a Scam](#) (2020-11-17)
 - [Portuguese Court Rules PCR Tests As Unreliable & Unlawful to Quarantine People](#) (2020-11-18)
 - [Landmark Legal Ruling Finds That COVID Tests Are Not Fit for Purpose](#) (2020-11-27)
 - [Lockdowns Are Based on Fraud: Open Letter to People Who Want Freedom](#) (2020-12-03)
 - [PCR Test for Coronavirus Questioned by Prominent Scientists](#) (2020-12-16)
 - [COVID-19 Testing COVID-19 Scandal Deepens](#) (2020-12-18)

- [PCR Deception](#) (2020-12-24 duration 15:07 - PCR test inventor Dr. Kary Mullis on Fauci and much more)
- [COVID Conflicts: Asymptomatic Testing, Lack of Danger to Kids](#) (2020-12-29)
- [NYT: You're Infected With the Coronavirus. But How Infected?](#) (2020-12-29)
- [Astonishing COVID-19 Testing Fraud Revealed](#) (2021-01-13)
- [Vernon Coleman - The PCR Test Is Useless for COVID19 \(But Useful for Crooked Governments\)](#) (2021-01-23 duration 6:28)
- [World Health Organization Revises PCR Tests After Current Method Yielded Too Many 'False Positives'](#) (2021-01-23 duration 2:16)

10. A COVID-19 test, at best, can only determine if a person may have components of a COVID-19 viral load (i.e., they may not be infectious or the test could indicate they have an inactive cold or flu virus). So if the test is negative will they be required to be tested weekly or daily? And if they test positive and it's a false positive, is it fair and ethical to quarantine the person for days or weeks?

- [COVID-19 Antibody Tests Not Reliable Right Now, Bryan Doc Says](#) (2020-06-25)
- [The New York Times Does Accidental Journalism on COVID-19 Testing](#) (2020-08-31)
- [Why COVID-19 Testing Is a Tragic Waste](#) (2020-11-13)
- [Landmark Legal Ruling Finds That COVID Tests Are Not Fit for Purpose](#) (2020-11-27)
- [Lockdowns Are Based on Fraud: Open Letter to People Who Want Freedom](#) (2020-12-03)
- [Asymptomatic People Do Not Spread COVID-19](#) (2020-12-04)
- [Vernon Coleman - The PCR Test Is Useless for COVID19 \(But Useful for Crooked Governments\)](#) (2021-01-23 duration 6:28)

11. If face masks truly helped prevent the spread of the COVID-19 coronavirus, why haven't we been told to wear them to help prevent the spread of the flu, cold and other coronavirus' and why did the WHO, CDC and Fauci tell us masks won't prevent the spread of COVID-19 and not to wear them and then do an about-face? Clearly, the experts can't agree because there is little evidence to support the claims.

- [BMJ: A Cluster Randomized Trial of Cloth Masks Compared with Medical Masks in Healthcare Workers](#) (2015-03-25)
- [U.S. Health Officials Say Americans Shouldn't Wear Face Masks to Prevent Coronavirus -- There Are 3 Other Reasons Not to Wear Them](#) (2020-03-02)
- [Fauci on 60 Minutes: Coronavirus: Should You Wear a Face Mask?](#) (3030-03-08 duration 1:27)
- [BMJ: Covid-19: What Is the Evidence for Cloth Masks?](#) (2020-04-07)
- [Should We All Be Wearing Face Masks? Here's Why Experts Are So Conflicted](#) (2020-04-09)
- [Neurosurgeon Expresses Concerns Over Face Masks \[Correction\]](#) (2020-05-14)
- [The WHO Is Telling Us Something Else About Mask-Wearing](#) (2020-05-29)
- [WHO: Asymptomatic Rarely Spread COVID-19](#) (2020-06-08)
- [Dr. Simone Gold: The Uselessness of Masks](#) (2020-06-24)

- [Doctor Kelly Victory Is Explaining Everything \(the Truth\) About COVID-19](#) (2020-07-04 duration 17:31 Kelly Victory, M.D. Trauma & Emergency Specialist Steamboat Springs, CO)
 - [CDC Study Based on 14 Clinical Trials Shows Face Masks Do Not Work](#) (2020-07-22)
 - [Quick Demo of How Masks \(Don't\) Help](#) (2020-08-01 duration 6:07 – Dr. Ted Noel)
 - [Dr. Simone Gold: 19 of 20 Areas with the Highest COVID-19 Cases Have a Mandatory Mask Mandate](#) (2020-10-10)
 - [CDC Study: 85% of Coronavirus Patients Reported Wearing Masks 'Always' or 'Often'](#) (2020-10-14)
 - [Doctors Speak Out Against Masks](#) (2020-10-18 duration 4:11)
 - [Physicians: 'Masks Don't Control Viruses, They Control You,' 'Pandemic Is Over'](#) (2020-10-29)
 - [Post-Thanksgiving Mask Charts: Still No Evidence That Masks Work](#) (2020-12-06 date derived from latest chart date)
 - [COVID Conflicts: Asymptomatic Testing, Lack of Danger to Kids](#) (2020-12-29)
 - [Mask Mandates Are Absolutely Useless](#) (2020-12-31)
12. If the most effective mask (N95 respirator) can only trap particles up to .3 microns (300 nanometers) in size and the coronavirus is .125 microns (125 nanometers) in size (58% smaller than the smallest particle an N95 respirator can filter), how can any mask realistically prevent the virus from entering or leaving the mask wearer's body—particularly when it's being exhaled under significant force from a cough or sneeze?
- [Coronavirus: An Overview of Their Replication and Pathogenesis](#) (2016-01-01)
 - [AAPS: Mask Facts](#) (2020-06-01)
 - [Taught to Believe Masks Aren't Harmful, Here's Proof It Is!](#) (2020-06-28 duration 14:21)
 - [CDC Report: 70.6% of COVID Patients Always Wore a Mask](#) (2020-10-27)
13. If aerosol (small droplet) spray from a cough or sneeze can travel up to 27 feet and remain suspended for many minutes, how are 6 foot social distancing protecting people from inhaling a coronavirus?
- [JAMA: Turbulent Gas Clouds and Respiratory Pathogen Emissions](#) (2020-03-26)
14. Why would they continue to push for face masks to be worn when they have been proven to be ineffective and responsible for oxygen deprivation that can be an immediate threat to health and even life according to the OSHA Respiratory Protection Standard?
- [Letter to OSHA Regarding Respiratory Protection Standard, 29 CFR 1910.134](#) (2007-04-02)
 - [CDC: Nonpharmaceutical Measures for Pandemic Influenza in Nonhealthcare Settings--Personal Protective and Environmental Measures](#) (Volume 26, Number 5—May 2020)
 - [OSHA: Respiratory Protection Standard 29 CFR 1910.134 and Personal Protection Equipment](#) (2011-06-08)
 - [JAMA: N95 Respirators vs Medical Masks for Preventing Influenza Among Health Care Personnel: A Randomized Clinical Trial](#) (2019-09-03)

- [Masks Don't Work - Vaccine Choice Canada - A Review of Science Relevant to COVID-19 Social Policy](#) (2020, April)
- [Dr. Simone Gold: The Uselessness of Masks](#) (2020-06-24)
- [Taught to Believe Masks Aren't Harmful, Here's Proof It Is!](#) (2020-06-28 duration 14:21)
- [Truth That Will Blow Your Mind Dr Rashid Buttar](#) (2020-07-07 duration 30:14 – Regarding Masks)
- [What Is Causing the Spike in COVID-19 Cases?](#) (2020-07-09 duration 22:36 – Dr. Jeffrey Barke, M.D. Newport Beach, CA)
- [Study--Review Published By the CDC: Face Masks Don't Work](#) (2020-07-22)
- [OSHA: Personal Protection Equipment Fit Testing Procedures \(1910.134 App A\)](#) (2004-08-04)
- [Europe's Top Health Officials Say Masks Aren't Helpful in Beating COVID-19](#) (2020-08-06)
- [Proof That Faces Masks Do More Harm Than Good](#) (2020, October – Dr. Vernon Coleman PDF)
- [Dr. Simone Gold: 19 of 20 Areas with the Highest COVID-19 Cases Have a Mandatory Mask Mandate](#) (2020-10-10)
- [CDC Study: 85% of Coronavirus Patients Reported Wearing Masks 'Always' or 'Often'](#) (2020-10-14)
- [CDC Report: 70.6% of COVID Patients Always Wore a Mask](#) (2020-10-27)
- [Twitter Censors Top White House COVID Adviser for Mask Post](#) (2020-10-19)
- [The Great Mask Deception, How PCR Tests Create a COVID Illusion & Thinking for Yourself Is a Threat](#) (2020-11-22)
- [Landmark Study Finds Masks Are Ineffective](#) (2020-12-03)
- [Post-Thanksgiving Mask Charts: Still No Evidence That Masks Work](#) (2020-12-06 date derived from latest chart date)
- [Horowitz: Comprehensive Analysis of 50 States Shows Greater Spread with Mask Mandates](#) (2020-12-21)
- [Time to Defund the Forced Maskers](#) (2020-12-28)
- [COVID Conflicts: Asymptomatic Testing, Lack of Danger to Kids](#) (2020-12-29)
- [Mask Mandates Are Absolutely Useless](#) (2020-12-31)

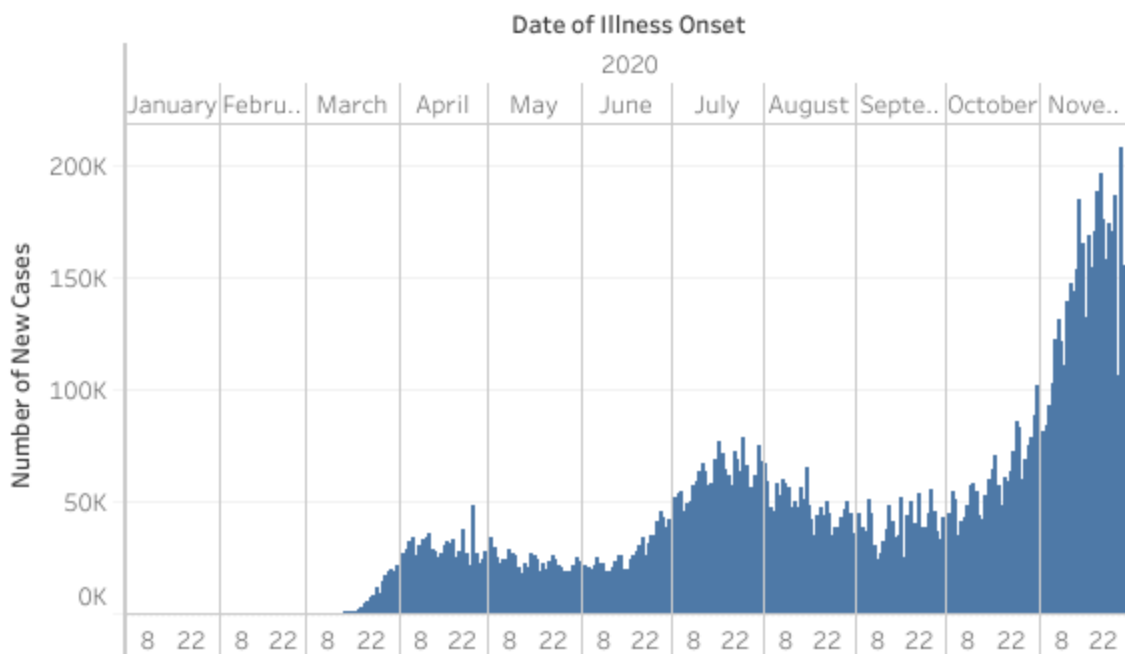
15. If face masks, social distancing and hand washing are so important to curtailing the spread of the Coronavirus, why hasn't the homeless and other high risk populations infection rates been higher than those of the general public who adhere to the guidelines?

- [False Perception of COVID-19's Impact on the Homeless](#) (2020-05-18)
- [AP: Coronavirus Hasn't Devastated the Homeless As Many Feared](#) (2020-08-16)
- [Africa's Low COVID-19 Death Rate Has Multiple Causes, WHO Says](#) (2020-09-24)

16. If face masks work why do the COVID-19 case numbers continue to increase?

- [Doctors Concerned About Increase in COVID-19 Cases in Massachusetts](#) (2020-09-28)
- [These 12 Graphs Show Mask Mandates Do Nothing to Stop COVID](#) (2020-10-29)
- [WebMD: Why Are COVID Cases Increasing So Fast Right Now](#) (2020-11-20)
- [Here Are the States Where COVID-19 Is Increasing](#) (2020-12-03)
- [Horowitz: Comprehensive Analysis of 50 States Shows Greater Spread with Mask Mandates](#) (2020-12-21)

U.S. COVID-19 New Cases by Date



Data from [European Centre for Disease Prevention and Control](#)

17. Why would Medicare pay hospitals more money to code patients with COVID-19 whether confirmed or presumed and pay them triple if they are intubated for COVID-19? So is there an incentive for hospitals to code for COVID-19?

- [FOX: Hospitals are paid more money for Medicare patients confirmed or presumed to have Coronavirus](#) (2020-05-04)
- [UNDR3RCOV3R - NUR\\$3 Turned Journalist - Exposes New York's Elmhurst Hospital](#) (2020-06-14 duration 25:07)
- [Dispatches from the War: The Killing Fields of New York; Putting Cuomo and Trump on Notice](#) (2020-08-28)

18. Why would the CDC change death certificate guidelines to conflate COVID-19 with underlying conditions for cause of death just as they do with the Flu and Pneumonia (including accidents, gunshots, drug overdoses, etc.)? What might be their purpose in artificially inflating the number of COVID-19 cases and death tolls?

- [Flu Death Numbers Are Greatly Exaggerated](#) (2018-10-12)
- [CDC: Guidance for Certifying Deaths Due to Coronavirus Disease 2019 \[COVID-19\]](#) (April 2020)
- [Birx Says Government Is Classifying All Deaths of Patients With Coronavirus As COVID-19 Deaths, Regardless of Cause](#) (2020-04-07)
- [The CDC Confesses to Lying About COVID-19 Death Numbers](#) (2020-04-13)

- [Dr. Birx Admits Coronavirus Death Count "Liberal", "Different"](#) (2020-04-19 duration 1:18)
- [Drug Overdose, Head Trauma Deaths Added to Coronavirus Death Toll](#) (2020-04-27)
- [Washington Health Officials: Gunshot Victims Counted as COVID-19 Deaths](#) (2020-05-21)
- [ACSH: Rethinking COVID-19 Mortality Statistics](#) (2020-05-27)
- [George Floyd Was Infected with COVID-19 Autopsy Reveals](#) (2020-06-04, yet his death wasn't counted as a COVID death like so many other non-COVID deaths are)
- [Florida Health Official Says Man Who Died in Motorcycle Crash Listed As Coronavirus Death](#) (2020-07-17)
- [If COVID Fatalities Were 90.2% Lower, How Would You Feel About Schools Reopening?](#) (2020-07-24)
- [CDC: Weekly Updates Comorbidities](#) (2020-08-26 Only 6% of deaths COVID only)
- [Texas County Drops from 4600+ Active COVID Cases to Under 100 After Audit](#) (2020-08-28)
- [New CDC Report Shows 94% of COVID-19 Deaths in US Had Contributing Conditions](#) (2020-08-30)
- [COVID Is a Data-Driven Operation, But Suppose the Data Are Wrong?](#) (2020-09-23)
- [WHO Finally Agrees Our March Analysis Was Correct: The WHO's Early Coronavirus Mortality Rate Was Irresponsibly Overstated and We Called Them Out with the Correct Numbers!](#) (2020-10-03)
- [Don't Believe the COVID Case Numbers; It's a Scam](#) (2020-11-17)
- [Johns Hopkins: A Closer Look at U.S. Deaths Due to COVID-19](#) (2020-11-27)
- [Johns Hopkins Study Explodes COVID Death Hoax; It's Re-Labeling on a Grand Scale](#) (2020-11-30)
- [Grand County Coroner Raises Concern on Deaths Among COVID Cases](#) (2020-12-15)
- [An Hour After Joe Biden Is Sworn In, WHO Admits Their Testing Grossly Overstates Individuals Testing Positive for COVID](#) (2021-01-20)

Isn't it interesting that some people who died as the result of a car or motorcycle accident, gunshot wound, drug overdose, etc. are counted as a "COVID-19" death if they tested positive for COVID-19, but George Floyd's death wasn't counted as a COVID death despite the fact he tested positive for COVID-19—or that he had a lethal dose of Fentanyl in his system and was complaining that he couldn't breathe long before the cop kneeled on his neck? Maybe it's because it doesn't support the narrative that's being shoved down the American public's throat.

19. If 99% of COVID-19 deaths in Italy and 96% in the U.S. were elderly patients with one or more underlying diseases, why did the government lock down the entire U.S. destroying countless businesses and families in the interim?

- [Bloomberg: 99% of Those Who Died From Virus Had Other Illness, Italy Says](#) (2020-03-18)

20. Why would certain Governors return elderly patients to nursing homes knowing full well that nursing homes are the "hot zones" for COVID-19?

- [WSJ: New York Mandates Nursing Homes Take COVID-19 Patients Discharged From Hospitals](#) (2020-03-26)
- [Coronavirus US: Faced with 20,000 Dead, Care Homes Seek Shield from Lawsuits](#) (2020-05-03)
- [Nursing Homes Are Being Sued for Obeying Liberal Governors' Orders](#) (2020-05-11)
- [GOP Lawmakers Grill Whitmer on Michigan Nursing Home Deaths at U.S. House Hearing](#) (2020-06-02)
- [House GOP: Dems' COVID Policy for Nursing Homes Was Deadly](#) (2020-06-15)
- [House GOP Push Democratic Governors for Answers On COVID-19 Patients In Nursing Homes](#) (2020-06-16)
- [DOJ Requesting Data from Governors of States That Issued COVID-19 Orders That May Have Resulted in Deaths of Elderly Nursing Home Residents](#) (2020-08-26)

21. Why are some alleged Coronavirus deaths found not to be COVID-19 deaths?

- [Funeral Directors Blow the Whistle on Deaths Falsely Attributed to Coronavirus](#) (2020-04-30)
- [Grand County Coroner Raises Concern on Deaths Among COVID Cases](#) (2020-12-15)

22. Why is Hydroxychloroquine, used by thousands of doctors and healthcare workers worldwide with thousands more COVID patients recovering quickly after using it, being suppressed or downplayed by CDC, WHO, media and big tech? And why would they push Remdesivir that costs upwards of \$1000 per dose versus Hydroxychloroquine which costs about \$.63 per tablet when, according to the NEJM Clinical Study, showed that Remdesivir only reduced the duration of the disease by a few days and nearly one fourth of those who received it had “serious adverse events?”

- [NCBI: Chloroquine Is a Potent Inhibitor of SARS Coronavirus Infection and Spread](#) (2005-08-22)
- [Nature: Hydroxychloroquine, a Less Toxic Derivative of Chloroquine, is Effective in Inhibiting SARS-CoV-2 Infection in Vitro](#) (2020-03-18)
- [Harvard Health Pub: Treatments for COVID-19](#) (2020-04-09)
- [AAPs: A Tale of Two Drugs: Money vs. Medical Wisdom](#) (2020-05-07 -- \$10 vs \$1000)
- ["Full Measure with Sharyl Attkisson: Hydroxychloroquine" of 5/19/2020 Removed by YouTube](#) (2020-05-20 duration 8:43)
- [Dr. Richard Bartlett | ACWT Interview 7.2.20](#) (2020-07-03 duration 31:11 – Dr. Bartlett of Midland, TX on Budesonide corticosteroid COVID treatment)
- [Hydroxychloroquine Is Effective, 'Helped Save Lives,' New Peer-Reviewed Study Finds](#) (2020-07-03)
- [McKinney Doctor On Covid 19 How He Treats This](#) (2020-07-07 duration 9:42 – Brian C. Proctor, M.D. @ McKinney Family Medicine McKinney, TX)
- [See the DC Doctor Press Conference Big Tech Is Fighting to Suppress](#) (2020-07-28 duration 47:44)
- [Yale Epidemiologist: Dr. Fauci Running 'Misinformation Campaign' Against Hydroxychloroquine](#) (2020-07-29)
- [Hydroxychloroquine Protocol Continues Getting Censored](#) (2020-08-08)
- [Hydroxychloroquine 'Vey Safe,' Says Dr. Scott Atlas; Blasts 'Garbage' Medical Studies](#) (2020-08-29)
- [Studies Show Countries Using HCQ Have Fewer COVID-19 Deaths | OAN](#) (2020-09-10 duration 2:10)

- [The Lancet Changes Editorial Policy After Hydroxychloroquine Covid Study Retraction](#) (2020-09-22)
- [AMA: Resolution 509, Page 3 Lines 4-23 Rescinds Stopping Physicians from Using HCQ](#) (2020-10-30 – AMA Memo Rescinds Stopping Physicians from Using HCQ, Resolution: 509, Page 3, Lines 4-23)
- [NEJM: Remdesivir for the Treatment of COVID-19 - Final Report](#) (2020-11-05)
- [WSJ: Hospitals Return to Basics for COVID Treatment](#) (2021-01-06)
- [AJM: Pathophysiological Basis and Rationale for Early Outpatient Treatment of SARS-CoV-2 \(COVID-19\) Infection](#) (2021, January Volume 134, Issue 1 – HCQ and other therapeutic treatments)
- [After 440,000 Americans are Dead - Facebook and American Journal of Medicine Admit Their Stand on HCQ Was Wrong - These people Should Be Prosecuted!](#) (2021-01-28)
- [Journal of Medicine Says HCQ +Zinc Reduces COVID Deaths](#) (2021-02-01)

23. Why is Ivermectin, a drug that has been used since the 70s, is FDA approved safe, costs pennies per dose and that has shown incredible results in multiple trials and countries at stopping (curing) COVID-19 being ignored by the CDC, WHO, media and others? It is even claimed to be superior to Hydroxychloroquine. And what about other successful treatments like Regeneron's antibody treatment given to President Trump?

- [NCBI: Ivermectin, 'Wonder Drug' from Japan: The Human Use Perspective](#) (2011-02-10)
- [NIH: The FDA-Approved Drug Ivermectin Inhibits the Replication of SARS-CoV-2 In Vitro](#) (2020-04-03)
- [Breakthrough Drug: Ivermectin Shows 'Astounding' Results Against Coronavirus](#) (2020-05-22)
- [The FDA-Approved Drug Ivermectin Inhibits the Replication of SARS-CoV-2 in Vitro](#) (2020, June)
- [Nature: Ivermectin: A Systematic Review from Antiviral Effects to COVID-19 Complementary Regimen](#) (2020-06-12)
- [Ivermectin Study Reveals Fantastic Results: 100% of 60 Patients Better in an Average of Just Under 6 Days](#) (2020-06-28)
- [NIH: Clinical Trials of Monoclonal Antibodies to Prevent COVID-19 Now Enrolling](#) (2020-08-10)
- [Florida Doctors Found a Coronavirus Cure That's Nearly 100% Effective](#) (2020-09-26)
- [Update: Here's What Is Known About Trump's COVID-19 Treatment](#) (2020-10-05)
- [The Most Promising Treatments for COVID-19 So Far](#) (2020-10-11)
- [IJID: A Five-Day Course of Ivermectin for the Treatment of COVID-19 May Reduce the Duration of Illness](#) (2020-12-02)
- [Dr. Pierre Kory Senate Testimony on Early COVID-19 Treatments](#) (2020-12-09 duration 8:42)
- [Preventing COVID-19: Dr. Pierre Kory Pushes for Approval of Ivermectin for Treatment of COVID-19](#) (2020-12-12 duration 10:20)
- [Review of the Emerging Evidence Demonstrating the Efficacy of Ivermectin in the Prophylaxis and Treatment of COVID-19](#) (2020-12-18)
- [Efficacy and Safety of Ivermectin for Treatment and Prophylaxis of COVID-19 Pandemic](#) (2020-12-28)
- [Dr Risinger - Implores NIH and WHO to Review Evidence that Ivermectin is a Game Changer for COVID-19](#) (2020-12-29)
- [Artemisinin From Sweet Wormwood Inhibits SARS-CoV-2](#) (2021-01-04)

24. Why are thousands of doctors and scientists who challenge the official COVID-19 narratives being censored, marginalized or worse?

- [The Coronavirus Is Man Made According to Luc Montagnier the Man Who Discovered HIV](#) (2020-04-16)
- [YouTube to Ban Content That Contradicts WHO on COVID-19 Despite the UN Agency's Catastrophic Track Record of Misinformation](#) (2020-04-23)
- [TWT: YouTube Yanks Doctors' Warning of Constitutional Crisis of COVID-19](#) (2020-04-30)
- [BREAKING: California Doctors Go on Ingraham Angle, Challenge Official COVID Policy -- YouTube Then Takes Down Their Video](#) (2020-04-27)
- [StatNews: Scientists Who Express Different Views on Covid-19 Should Be Heard, Not Demonized](#) (2020-04-27)
- [YouTube Now Censoring Doctors Who Question Govt? Dave Rubin Responds | MEDIA | Rubin Report](#) (2020-04-29 duration 4:59)
- [Dr. Anthony Fauci's Ex-Employee, Jailed, Tells All \(Full Video\) AKA Pandemic](#) (2020-05-06 duration 26:07)
- ["Full Measure with Sharyl Attkisson: Hydroxychloroquine" of 5/19/2020 Removed by YouTube](#) (2020-05-20 duration 8:43)
- [Dr. Richard Bartlett | ACWT Interview 7.2.20](#) (2020-07-03 duration 31:11 – Dr. Bartlett of Midland, TX on Budesonide corticosteroid COVID treatment)
- [McKinney Doctor On Covid 19 How He Treats This](#) (2020-07-07 duration 9:42 – Brian C. Proctor, M.D. @ McKinney Family Medicine McKinney, TX)
- [Dr. Simone Gold: SquareSpace Shuts Down America's Frontline Doctors Website](#) (2020-07-28)
- [See the DC Doctor Press Conference Big Tech Is Fighting to Suppress](#) (2020-07-28 duration 47:44)
- [Europe's Top Health Officials Say Masks Aren't Helpful in Beating COVID-19](#) (2020-08-06)
- [NYP: Twitter Suspends Chinese Virologist Who Says COVID-19 Was Made in Wuhan Lab](#) (2020-09-16)
- [Unusual Features of the SARS-CoV-2 Genome Suggesting Sophisticated Laboratory Modification Rather Than Natural Evolution and Delineation of Its Probable Synthetic Route](#) (2020-09-14)
- [Interview Transcript: Dr. Li-Meng Yan on Tucker Carlson Tonight](#) (2020-09-17)
- [1,000+ Doctors Come Out Against COVID](#) (2020-09-19 duration 9:31)
- [Crimes Against Humanity \(Dr. Reiner Fuellmich\)](#) (2020-10-04 duration 49:00)
- [The Great Barrington Declaration](#) (2020-10-04 Tens of thousands of Epidemiologists and Health Scientists declaration against the COVID-19 Policies and Lockdowns)
- [Only Poisoned Monkey Kidney Cells 'Grew' the 'Virus'](#) (2020-10-15)
- [World Doctors Alliance 10-10-2020](#) (2020-10-15 duration 17:13)
- [Twitter Censors Top White House COVID Adviser for Mask Post](#) (2020-10-19)
- [America's Frontline Doctors - White Coat Summit II](#) (2020-10-22 duration 36:41)
- [Physicians: 'Masks Don't Control Viruses, They Control You,' 'Pandemic Is Over'](#) (2020-10-29)

- [Watch Censored World Doctors Alliance Speak Out Against World Lockdown](#) (2020-10-17 duration 16:49)
- [Top Medical Journal Caught in Massive Cover-Up](#) (2020-11-05)
- [America's Frontline Doctors Summit II - Corruption of the Scientific Process - Dr. James Todaro](#) (2020-11-05 duration 16:04)
- [87 Thousand Doctors/Nurses Come Out Against COVID 19 & Vaccine](#) (2020-11-12 duration 4:18)
- [Sharyl Attkisson on Media Bias](#) (2020-11-22)
- [Thousands of Doctors Declare Lockdown Harmful to Public Health | Pearson Sharp Reports](#) (2020-11-24 duration 2:52)
- [Johns Hopkins: A Closer Look at U.S. Deaths Due to COVID-19](#) (2020-11-26)
- [Author's Response to "A Closer Look at U.S. Deaths Due to COVID-19"](#) (2020-11-27)
- [Psychiatrist Blows the Whistle on Pandemic Fearmongering](#) (2020-11-29)
- [Sharyl Attkisson on Media Bias](#) (2020-12-06)
- [Don't Trust Any COVID Vaccine](#) (2020-12-07 duration 28:34 – International doctors speak out against COVID Vaccine)
- [Brave Reporter Goes Off Script \(Risk Life to Reveal Truth About COVID On-Air\)](#) (2021-01-03 duration 16:35)
- [Dr. Mercola Defamed by Digital 'Anti-Hate' Group](#) (2021-01-08)
- [COVID and the Vaccine](#) (2021-01-14 duration 56:08 – Dr. Simone Gold)
- [Bio-Warfare & Weaponization of Medicine Amid COVID](#) (2021-01-15 duration 30:11)
- [Vernon Coleman - The PCR Test Is Useless for COVID19 \(But Useful for Crooked Governments\)](#) (2021-01-23 duration 6:28)

Note: Dr. Li-Meng Yan is a Chinese virologist who worked at the University Hong Kong World Health Organization (WHO) reference lab, the top coronavirus lab in the world, and who was asked to investigate the new "SARS-like" virus (i.e., COVID-19) in Wuhan on December 31, 2019.

25. The human body contains countless viruses and it has survived epidemics and pandemics throughout history due our immune system and herd immunity, yet never before has a pandemic resulted in the country (or world) being shut down. Why this time?

- [Meet the 380 Trillion Viruses Inside Your Body](#) (2018-10-18)
- [Why Did the World Shut Down for COVI-19 But Not Ebola, SARS or Swine Flu?](#) (2020-04-14)

26. Gate's GAVI organization is pushing to have Coronavirus vaccine in 12-18 months despite it normally taking 7-10 years for a vaccine to come to market. How many human guinea pigs will line up to take this new and untested vaccine? What could possibly go wrong?

- [GAVI: A COVID-19 Vaccine Might Be Ready Within 18 Months. But What Happens Then?](#) (2020-04-28)
- [Human Challenge Trials With Live Coronavirus Aren't the Answer to a COVID-19 Vaccine](#) (2020-06-23)

- [Warp Speed Vaccine Will Be Shielded from Liability](#) (2020-09-22)
- [KLA.TV - Dr. Carrie Madej Warns About New Vaccine Technology](#) (2020-11-07 duration 24:29)
- [Top EU Scientist Warns COVID-19 Vaccine Linked to Sterilization of Women](#) (2020-12-06 duration 59:59)

27. COVID-19 vaccines being tested are mRNA vaccines (i.e., they modify human DNA) with no long term testing planned before release (i.e., vaccinated people will be human experiments).

- [Moderna Announces Positive Interim Phase 1 Data for its mRNA Vaccine \(mRNA-1273\) Against Novel Coronavirus](#) (2020-05-18)
- [CBS: Bill Gates on Coronavirus Vaccine Trials](#) (2020-07-25 duration 2:57)
- [Warp Speed Vaccine Will Be Shielded from Liability](#) (2020-09-22)
- [Dr Chistiane Northrup Discusses the Covid 19 Vaccine Mark of Beast!](#) (2020-10-07 duration 37:59)
- [KLA.TV - Dr. Carrie Madej Warns About New Vaccine Technology](#) (2020-11-07 duration 24:29)
- [How COVID-19 Vaccine Can Destroy Your Immune System](#) (2020-11-11)
- [WABE: Why Does Pfizer's COVID-19 Vaccine Need to Be Kept Colder Than Antarctica?](#) (2020-11-17)
- [Former Pfizer Science Officer Reveals Great COVID-19 Scam](#) (2020-11-25)
- [Bill Gates Admits COVID Vaccine Changes DNA, Now Doctors Rebel!](#) (2020-12-05)
- [Top EU Scientist Warns COVID-19 Vaccine Linked to Sterilization of Women](#) (2020-12-06 duration 59:59)
- [Don't Trust Any COVID Vaccine](#) (2020-12-07 duration 28:34 – International doctors speak out against COVID Vaccine)
- [The Future of Vaccines](#) (2020-12-23 duration 41:34)
- [COVID and the Vaccine](#) (2021-01-14 duration 56:08 – Dr. Simone Gold)
- [Bio-Warfare & Weaponization of Medicine Amid COVID](#) (2021-01-15 duration 30:11)

From WABE Article

“It’s a vaccine technology that’s so new, no mRNA vaccines have ever been approved by the Food and Drug Administration.” -- What could possibly go wrong?

From The Future of Vaccines Video – SARS-COV-2 Vaccine Facts

- They are the most rushed vaccines ever developed.
- The manufacturers have been given total immunity from liability if their experimental vaccines cause injury.
- The clinical trials testing the safety of these injections are not finished, meaning that every member of the public who takes one is now a human guinea pig in an ongoing medical experiment with the population of the planet.
- The Pfizer and Moderna mRNA vaccines are themselves part of an experimental class of injection that has never before been given to the public.

- These vaccines have not been tested for their ability to prevent infection or spread of SARS-CoV-2 and are not intended to do so.
- There is absolutely no long-term data about these vaccines to determine what their effects may be on fertility, the potential for pathogenic priming, or any other serious adverse reaction.

28. If the COVID vaccine will be so safe and effective (or any vaccine for that matter), why did the government create laws and setup programs and Federal courts to handle the anticipated injuries and deaths from vaccines and why are drug and vaccine manufacturers shielded from any lawsuits (i.e., they've been shielded from lawsuits for decades) and what is the incentive for drug companies to ensure the safety and efficacy of any of their products when the American taxpayers have to pick up the tab for their failures and mistakes? And why are so many front-line workers and others now refusing to take the COVID vaccine?

- [Congress: H.R.5546 - National Childhood Vaccine Injury Act of 1986](#) (1986-10-14)
- [Federal Register: Declaration Under the Public Readiness and Emergency Preparedness Act for Medical Countermeasures Against COVID-19](#) (2020-03-17)
- [HRSA: Countermeasures Injury Compensation Program \(CICP\)](#) (2020, June revised)
- [Drugmakers Shielded from COVID Vaccine Liability But Funds for Injury Claims in Doubt](#) (2020-08-14)
- [Exposed: There's a New Federal Court to Handle All the Expected COVID Vaccine-Injury Claims](#) (2020-09-21)
- [Warp Speed Vaccine Will Be Shielded from Liability](#) (2020-09-22)
- [COVID-19 Vaccination May Be Difficult to Avoid](#) (2020-12-14)
- [The 1976 Swine Flu Hoax. COVID-19 Is Not the First Fake Pandemic Hoax to Push Dangerous Vaccines](#) (2020-12-31 duration 15:05 – 1979 Mike Wallace 60 Minutes Story)
- [Many Front-Line Workers Refuse COVID Vaccines as Distribution Rollout Struggles](#) (2020-12-31)
- [Doctors Refuse Vaccine! - The Fight Has Just Begun!](#) (2021-01-02 duration 12:55)

From H.R.5546 – National Childhood Vaccine Injury Act of 1986 Absolving Vaccine Manufacturers from Liability

The US Congress passed the “National Childhood Vaccine Injury Act” (NCVIA) in 1986, which was to "leave judgments about vaccine design to the FDA and the National Vaccine Program rather than juries," ~ Justice Antonin Scalia wrote

No Vaccine manufacturer shall be liable in a civil action for damages arising from a vaccine-related injury or death associated with the administration of a vaccine after October 1, 1988, if the injury or death resulted from side effects that were unavoidable even though the vaccine was properly prepared and was accompanied by proper directions and warnings – §300aa–22(b)(1).

29. Why do the COVID-19 clinical trials not prove the effectiveness of the vaccine for more than **mild symptoms** of the disease—for which no vaccine is needed—and why do they downplay or fail to mention that the vaccine won't prevent COVID-19 infection?

- [How CDC/WHO Will Fake the Effects of the COVID Vaccine to Make It Look Like a Success](#) (2020-09-22)
- [NYT: These Coronavirus Trials Don't Answer the One Question We Need to Know](#) (2020-09-22)
- [COVID Vaccine Clinical Trials Doomed to Fail; Fatal Design Flaw; NY Times Opinion Piece Expose All Three Major Clinical Trials](#) (2020-09-24)
- [Could the COVID Vaccine Be Canceled Before the First Injection](#) (2020-09-29)
- [20 Volunteers Suffer Serious Reactions to Johnson & Johnson's COVID-19 Vaccine](#) (2020-10-05)
- [BMJ: COVID-19 Vaccine Trial Protocols Released](#) (2020-10-21)
- [COVID-19 Vaccine Trials Not Designed to Detect Risk Reduction: Expert](#) (2020-10-22)
- [How COVID-19 Vaccine Trials Are Rigged](#) (2020-10-27)
- [Eli Lilly Halts Antibody Trial in Hospitalized COVID-19 Patients](#) (2020-10-27)
- [The Truth About the Coronavirus Vaccine Trials - #NewWorldNextWeek](#) (2020-10-29 duration 23:45)
- [How COVID-19 Vaccine Can Destroy Your Immune System](#) (2020-11-11)
- [How They'll Fake the Success of the COVID Vaccine](#) (2020-11-13)
- [Thinking About Taking COVID-19 Vax? Think Again - Hard](#) (2020-11-15)
- [COVIDGATE: The Corruption of Clinical Trials \(Part 1\)](#) 2020-11-18)
- [BMJ: COVID-19 Vaccines: Where Are The Data?](#) (2020-11-27)
- [The AstraZeneca Covid Vaccine Data Isn't Up to Snuff](#) (2020-11-25)
- [Dr. Ron Paul: Covid 19 Vaccines: Science Abuse in the Furtherance of Tyranny](#) (2020-12-04)
- [Emergency COVID-19 Vaccines May Cause Massive Side Effects](#) (2020-12-08)
- [French Infectious Disease Expert Shocked by the Number of Adverse Reactions to COVID-19 Vaccine](#) (2020-12-11)
- [When the Elderly and Frail Die After Receiving the COVID Vaccine](#) (2020-12-16)
- [COVID-19 Testing COVID-19 Scandal Deepens](#) (2020-12-18)
- [Why You Shouldn't Believe the COVID Vaccine Is Effective](#) (2020-12-21)
- [Top Medical Inventor: COVID mRNA "Vaccine" Not A Vaccine](#) (2021-01-19 duration 28:58)

From the BMJ "COVID-19 Vaccines: Where Are the Data?" article

“All these data for the different vaccines are potentially very promising, but none of the phase III trials have been published in peer reviewed journals or analysed by age group, gender and case description (asymptomatic, mild, severe), virus transmissibility after immunisation, or duration of protection. “

“As public health professionals, we believe that the results of clinical trials, whether interim or final, should be subject to an appropriate systematic process, and then published in peer-reviewed professional journals. Reporting the covid-19 vaccine trial results in press releases before publication in journals is neither good scientific practice nor does it help to build public trust in vaccines. If trial data for covid-19 candidate vaccines are prematurely announced, this may threaten the integrity and credibility of the trials. This could distort what should be a rigorous peer review process. [7] We believe that data and conclusions should not be released as credible before the

scientific community can judge the validity of those claims by assessing a complete account of what was done. [8] “

30. Why are the government and media suppressing or downplaying the serious side effects and deaths caused by the COVID-19 vaccines? And why is it that Internet search engines push only the government sanctioned sources to the top, if you can even find any sources that challenge their propaganda anymore? Does any rational critical thinking person really believe it is to protect us from “misinformation/disinformation?”

- [75-Year Old Israeli Man Dies 2 Hours after Getting COVID-19 Vaccine](#) (2020-12-28)
- [Nurse Gets Bells Palsy from "Vaccine"](#) (2020-12-28 duration 3:18)
- [Hundreds of Israelis Get Infected with COVID-19 after Receiving Pfizer/BioNTech Vaccine - Reports](#) (2021-01-01)
- [Mexican Doctor Hospitalized After Receiving COVID-19 Vaccine](#) (2021-01-02)
- [Portuguese Health Worker, 41, Dies Two Days After Getting the Pfizer COVID Vaccine as Her Father Says He 'Wants Answers'](#) (2021-01-04)
- [32-Year Old Mexican Doctor Suffers Seizures and is Paralyzed After Receiving the Pfizer Experimental Vaccine](#) (2021-01-05)
- [Hundreds Sent to Emergency Room after Getting COVID-19 Vaccines](#) (2021-01-05)
- [EXCLUSIVE: Wife of 'Perfectly Healthy' Miami Doctor, 56, Who Died of a Blood Disorder 16 Days after Getting Pfizer COVID-19 Vaccine is Certain It Was Triggered by the Jab, as Drug Giant Investigates First Death with a Suspected Link to Shot](#) (2021-01-06)
- [Texans among Dozens Reporting Allergic Reactions to COVID-19 Vaccine, CDC Still Recommends](#) (2021-01-06)
- [Coronavirus Vaccinations Seem to be Causing 50 Times the Adverse Events of Flu Vaccination after Just the First of Two Shots](#) (2021-01-06)
- [Norway Probes Deaths of Two Nursing Home Residents Who Got Pfizer's COVID Vaccine](#) (2021-01-07)
- [Vaccine Rollout Hits Snag as Health Workers Balk at Shot](#) (2021-01-08)
- [Pfizer Vaccine Deaths Mount in Israel as 240 Contract COVID 19 after Injection](#) (2021-01-09)
- [Coffey Country Health Department Nurses Decline to Give the COVID Vaccine](#) (2021-01-13)
- [Side-Effects of Second Dose of Vaccine Even Worse than from the First Dose](#) (2021-01-13)
- [Johns Hopkins Scientist: 'A Medical Certainty' Pfizer Vaccine Caused Death of Florida Doctor](#) (2021-01-13)
- [Shawn Skelton after Moderna COVID19 Vaccine!](#) (2021-01-14 – deleted from YouTube and Facebook)
- [Compilation of Recent Stories and Videos Covering COVID Vaccine Injuries, Side Effects and Deaths](#) (2021-01-14)
- [COVID Vaccine May Not Prevent Infection, Disease Transmission](#) (2021-01-14)
- [10 Dead In Germany within 4 Days of COVID-19 Vaccine Inoculation; Probe Ordered](#) (2021-01-15)
- [CDC Vaccine Adverse Event Reporting System \(VAERS\) Results](#) (2021-01-15)
- [Bio-Warfare & Weaponization of Medicine Amid COVID](#) (2021-01-15 duration 30:11 – Dr. Lee Merrit, MD)
- [55 People Have Died in US After Receiving COVID-19 Vaccines: Reporting System](#) (2021-01-16)

- [13 Israelis Suffer Facial Paralysis After Taking Pfizer COVID Jab, Amid Influx of Reports Detailing Adverse Effects](#) (2021-01-16)
- ['Not Alarmed' Norway Adjusts COVID Vaccine Advice On Who Gets Jab After Doctors 'Can't Rule Out' Side Effects Were Behind 23 Deaths](#) (2021-01-16)
- [COVID-19 Vaccine Side Effects World Map](#) (2021-01-17)
- [Adverse Events Post COVID-19 Vaccination: AIIMS' Security Guard Admitted to ICU](#) (2021-01-18)
- [CDC, FDA Investigating California Moderna COVID-19 Vaccine Lot with 'Higher Than Usual' Allergic Reactions](#) (2021-01-18)
- [A Man and Woman in South Dakota Die a Day After Getting COVID-19 Vaccines](#) (2021-01-24)
- [32 Nursing Home Residents Die in COVID-19 Outbreak During Mass Vaccination Drive](#) (2021-01-24)
- [NYP: Merck Scraps COVID-19 Vaccines That Produced 'Inferior' Immune Response](#) (2021-01-25)
- [CNA Nursing Home Whistleblower: Seniors Are Dying Like Flies After COVID Injections!](#) (2021-01-26 duration 47:17)
- [Seniors Dying After COVID Vaccine Labeled As Natural Causes](#) (2021-02-02)

31. COVID-19 vaccines planned for over 7 billion people (i.e., they're going to push for everyone to be vaccinated despite the fact that no vaccine is 100% effective and average 40% efficacy and H3N2 flu vaccine was only 10% effective and virtually all vaccines have Micro- and Nano-particle contaminants that can have their own side effects and consequences).

- [Bill Gates says the world will need 7 billion vaccine doses to end COVID-19 pandemic](#) (2020-04-30)
- [H3N2 Flu Shot Only 10 Percent Effective This Year](#)
- [IJVV: New Quality-Control Investigations on Vaccines: Micro- and Nanocontamination](#) (2017-01-23)
- [Luciferase - Bill Gates Quantum Dot Microneedle Vaccine to Alter Your DNA](#) (2020-05-08 duration 20:54)
- [Trust Stamp Integrating Biometric Hash Solution with Mastercard on Children's Vaccine Record System](#) (2020-07-06)
- [Africa to Become Testing Ground for "Trust Stamp" Vaccine Record and Payment System](#) (2020-07-10)
- [Trust Stamp - Bill Gates Funded Program That Will Create Your Digital Identity Based On Your Vaccination History](#) (2020-07-19)
- [Could the COVID Vaccine Be Canceled Before the First Injection](#) (2020-09-29)
- [New England Journal of Medicine Publishes 'Strategy' for States on How to Consider COVID-19 Vaccine Mandates](#) (2020-10-02)
- [What Could They Put in the COVID Vaccine?](#) (2020-10-07)
- [Airports Begin Testing 'COVID Passport' That Will Record Whether Someone Has Been Vaccinated Before Travel](#) (2020-10-07)
- [The COVID-19 Genocide of 2020 By Claire Edwards](#) (2020-10-29 duration 21:13)

- [NYLJ: State Bar Passes Mandatory COVID-19 Vaccination Recommendation](#) (2020-11-07)
- [Dispatches from the War: Vote Fraud, Lawyers, COVID Vaccine, Biden Plan, Police Powers, the Constitution](#) (2020-11-09)
- [Former Pfizer Science Officer Reveals Great COVID-19 Scam](#) (2020-11-25)
- [The Plan Is Unfolding for How Vaccines Will Be Monitored](#) (2020-12-01)
- [Bill Gates Admits COVID Vaccine Changes DNA, Now Doctors Rebel!](#) (2020-12-05)
- [Bio-Warfare & Weaponization of Medicine Amid COVID](#) (2021-01-15 duration 30:11)

32. If you believed vaccinating everyone in the world was a “conspiracy theory” then the WHO, GAVI, Trust Stamp, Mastercard and many other organizations are involved in, arguably, the greatest conspiracy theory in history. The United Nation’s World Health Organization’s global Immunization Agenda 2030 (IA2030) vaccination strategy, the ID2020 Alliance for global digital IDs and “Social Credit Scores” that will control your access to virtually everything are not a pipe dream and are being implemented worldwide. What is their real agenda?

- [UN: ID2020 Summit 2016](#) (2016-05-20 – U.N. global initiative launched; Sustainable Development Goal 16.9)
- [ID2020 and Partners Launch Program to Provide Digital ID with Vaccines](#) (2019-09-20)
- [WHO: Immunization Agenda 2030: A Global Strategy to Leave No One Behind](#) (2020-04-02)
- [Social Credit Scores Are Already Here](#) (2020-06-27)
- [Africa to Become Testing Ground for "Trust Stamp" Vaccine Record and Payment System](#) (2020-07-10)
- [WEF: COVID-19: The Great Reset](#) (2020-07-14 duration 1:02:44)
- ['Trust Stamp' Vaccine Record and Payment System to Be Tested on Low-Income Africans](#) (2020-07-15)
- [Trust Stamp - Bill Gates Funded Program That Will Create Your Digital Identity Based On Your Vaccination History](#) (2020-07-19)
- [Trust Stamp, Digital Vaccine Record, Cashless Payment System, Biometric Program](#) (2020-07-20 duration 10:57)
- [New England Journal of Medicine Publishes 'Strategy' for States on How to Consider COVID-19 Vaccine Mandates](#) (2020-10-02)
- [NYP: Ticketmaster Exploring Negative COVID-19 Test or Vaccination to Attend Concerts](#) (2020-11-11)
- [Report: Airlines to Require "Health Pass," Vaccine Certificated Before Allowing Passengers to Fly](#) (2020-11-13)
- [China's Corporate Social Credit System](#) (2020-11-16 – PDF)
- [Immunity Certificates and Health-Passes Are a Hoax](#) (2020-11-24)
- [First Airline Confirms: COVID Vaccination Will Be Required to Fly](#) (2020-11-24)
- [Global Vaccine Passport Will Be Required for Travel](#) (2020-11-24)
- [Dr. Ron Paul: Covid 19 Vaccines: Science Abuse in the Furtherance of Tyranny](#) (2020-12-04)
- [Bill Gates Admits COVID Vaccine Changes DNA, Now Doctors Rebel!](#) (2020-12-05)

- [The Greatest Hoax Ever Perpetuated on an Unsuspecting Public](#) (2020-12-09)
- [LA Rolls Out Digital Vaccine Verification](#) (2021-01-13)
- [Bio-Warfare & Weaponization of Medicine Amid COVID](#) (2021-01-15 duration 30:11)
- [Global Initiative for COVID-19 Vaccine Records](#) (2021-01-26)

33. What toll has the pandemic inflicted on American livelihoods, businesses and lives? And why do studies and empirical evidence that shows that lockdowns are ineffective ongoing and why are the government and media unconcerned—especially in light of much higher survival rates than were originally predicted?

- [AEI: Lockdowns Don't Work](#) (2020-04-21)
- [NCBI: COVID-2019 Suicides: A Global Psychological Pandemic](#) (2020-04-23)
- [NPR: Coronavirus Takes Unprecedented Toll On American Livelihoods](#) (2020-04-29)
- [WaPo: Small Businesses Used to Define America's Economy. The Pandemic Could Change That Forever.](#) (2020-05-12 – more than 100,000 small businesses have closed forever)
- [More Than 100,000 Small Businesses Have Permanently Closed Due to Coronavirus, Study Estimates](#) (2020-05-13)
- [Nearly 43 Million Americans Filed for Unemployment Benefits During Coronavirus Pandemic](#) (2020-06-04)
- [Are We Facing a Post-COVID-19 Suicide Epidemic?](#) (2020-06-07)
- [Research Finds Lockdowns Are Far Worse for Health and Lives Than Coronavirus](#) (2020-06-16)
- [All the Household-Name Companies That Have Filed for Bankruptcy Due to Coronavirus](#) (2020-06-25)
- [What Was the Impact of Sweden's Soft Approach to Lockdown?](#) (2020-07-14)
- [The COVID-19 Eviction Crisis: An Estimated 30-40 Million People in America Are At Risk](#) (2020-08-07)
- [AIER: Lockdowns and Mask Mandates Do Not Lead to Reduced COVID Transmission Rates or Deaths, New Study Suggests](#) (2020-08-26)
- [Dr. Peter Breggin - NEW-COVID-19-LEGAL-REPORT.pdf](#) (2020-08-30)
- [WSJ: The Failed Experiment of COVID Lockdowns](#) (2020-09-01)
- [CDC Said There Have Been More Suicides Than Death By COVID-19](#) (2020-09-06)
- [NCBI: Intubation, Mortality, and Risk Factors in Critically Ill COVID-19 Patients](#) (2020-09-07)
- [Unicef: 150 Million Additional Children Plunged Into Poverty Due to COVID-19, UNICEF, Save the Children Say](#) (2020-09-16)
- [New CDC Coronavirus Survival Rates Torches the Democrats' Lockdown Regime](#) (2020-09-28)
- [Thousands of Health Experts Sign Declaration Calling for End to Lockdown, Warn of 'Irreparable Damage'](#) (2020-10-07)
- [COVID-19 to Add as Many as 150 Million Extreme Poor by 2021](#) (2020-10-07)
- [AZ Rep Andy Biggs: No Cases of COVID-19 Can Be Traced Back to Arizona Gyms or Bars](#) (2020-10-10)
- [WHO Official Urges World Leaders to Stop Using Lockdowns as Primary Virus Control Method](#) (2020-10-10)
- [Backflip: W.H.O. Condemns Coronavirus Lockdowns, Just 'Doubling' Global Poverty](#) (2020-10-11)
- [WHO Reverses Course Again, Now Condemns Lockdowns Over 'Economic Consequences'](#) (2020-10-11)
- [WHO Europe Director Says Governments Should Stop Enforcing Lockdowns](#) (2020-10-13)

- [44,000 Scientists, Public Health Experts, and Clinicians Sign Declaration That States Lockdowns Don't Work](#) (2020-11-01)
- [Cambridge Virologist: Lockdowns and Masks Are 'Greatest Hoax Ever'](#) (2020-11-18)
- [Asymptomatic 'Casedemic' Is a Perpetuation of Needless Fear](#) (2020-11-19)
- [FEE: Lockdowns Not Linked With Lower COVID Death Rates, New Study Finds](#) (2020-11-23)
- [What NO ONE is Saying About the Lockdowns](#) (2020-11-24 duration 9:08)
- [Thousands of Doctors Declare Lockdown Harmful to Public Health | Pearson Sharp Reports](#) (2020-11-24 duration 2:52)
- [UN: Pandemic Pushed 32M People Into Extreme Poverty](#) (2020-12-03)
- [The Greatest Hoax Ever Perpetuated on an Unsuspecting Public](#) (2020-12-09)
- [Lockdowns Don't Work. That's What the Science Says.](#) (2020-12-10)
- [Scientific Compendium Proves Lockdowns Don't Work... They Actually Cost Lives](#) (2020-12-11)
- [Reuters Celebrates Maskless Partygoers Living It Up In Wuhan](#) (2020-12-18)
- [AIER: Lockdowns Do Not Control the Coronavirus: The Evidence](#) (2020-12-19)
- [FaceTime Farewells: Grief In COVID Era](#) (2020-12-24)
- [Learn How COVID-19 Controllers Took Over The World In 2020 - The Truth About COVID-19](#) (2020-12-26 duration 21:42)
- [Mutated COVID Virus Marketed to Justify New Lockdowns](#) (2021-01-05)
- [Lockdown Civilization: Phase One and Phase Two](#) (2021-01-06)
- [Florida Puts New York to Shame in Rational Pandemic Policies](#) (2021-01-10)
- [EJCI: Assessing Mandatory Stay-At-Home and Business Closure Effects on the Spread of COVID-19](#) (2021-01-05)
- [Lockdown Extremism: An Obsession for the Insane and the Fascists](#) (2021-01-21)

34. Why are “experts” with questionable credibility and flawed data relied upon by the government and mainstream media to force everyone to wear masks, social distance, self-quarantine, shutter businesses and lockdown our country? And why are studies being suppressed that refute the official narratives and that show the actual chances of dying from COVID-19 to be exponentially lower than what the government and MSM would have us believe?

- [WHO Chief's Questionable Past Comes Into Focus Following Coronavirus Response](#) (2020-03-27)
- [5 Shocking Facts About WHO Chief Tedros Adhanom Ghebreyesus](#) (2020-04-10)
- [The List: Dr. Fauci's 12 Deadly Mistakes and Contradictions - Including His Worst Mistake of Delaying Herd Immunity While Destroying US Economy](#) (2020-04-25)
- [Neil Ferguson's Lockdown Model Ridiculed After its Code is Open Sourced](#) (2020-05-08)
- [Lockdown Sceptics: Code Review of Ferguson's Model](#) (2020-05-10)
- [Update - The List - Dr. Fauci's 15 Deadly Mistakes and Contradictions - Including the Devastation of the US Economy Based on a Garbage Model](#) (2020-05-12)
- [How Could the CDC Make That Mistake?](#) (2020-05-21)
- [Nursing Homes Shocked at 'Insanely Wrong' CMS Data on COVID-19](#) (2020-06-09)
- [New Studies Prove COVID-19 Fatality Rate is as Low as 0.1%, Roughly the Same as the Flu](#) (2020-07-02 duration 3:14)
- [Florida Labs Incorrectly Reported a 100% Positivity Rate for Coronavirus Tests](#) (2020-07-15)
- [CDC Director Robert Redfield: The Letter That Should Have Destroyed His Career](#) (2020-08-05)

- [COVID: How Self-Entitled Frauds at Imperial College Changed the World](#) (2020-08-06)
 - ["COVID" for Ages 50-64 - UCLA & Stanford Studies Your Chances of Dying](#) (2020-09-11 duration 2:50)
 - [Dr. Fauci's COVID-19 Treachery With Chilling Ties to the Chinese Military](#) (2020-10-19)
 - [Govts & Public Ignore Studies Showing No Spread of COVID at Schools, Daycares](#) (2020-10-22 duration 23:01)
 - ["Pandemic is Over" - Former Pfizer Chief Science Officer Says "Second Wave" Faked On False-Positive Tests](#) (2020-11-23)
 - [German Lawyers Initiate Class-Action Coronavirus Litigation](#) (2020-12-05)
 - [Sharyl Attkisson on Media Bias](#) (2020-12-06)
 - [The Greatest Hoax Ever Perpetuated on an Unsuspecting Public](#) (2020-12-09)
 - [Vicious Criminal Neil Ferguson Playing Key Role in New Lockdowns](#) (2020-12-24)
 - [Why Do Hypocritical Officials Violate Their Own COVID Rules?](#) (2021-01-01)
35. Why did the COVID death rates increase in twelve countries and NYC immediately following the lockdowns? And why were lockdowns necessary when the survival rate is 94.6% to 99% depending on age group and other underlying medical conditions?
- [Questions for Lockdown Apologists](#) (2020-05-23)
 - [Jon Rappoport: Murder By Lockdown; Details from a Dozen Countries](#) (2020-07-01)
 - [CDC Data Shows High Virus Survival Rate: 99%-Plus For Ages 69 and Younger, 94.6% for Older](#) (2020-09-25)
 - [Why COVID-19 Is Not the 3rd Leading Cause of Death](#) (2020-10-29)
36. Can the government legitimately restrict our Constitutional rights and freedoms without legitimate justification? And can they mandate or otherwise coerce every person to be vaccinated with a never before created experimental vaccine with dubious benefits and zero repercussions for the manufacturers should the grand experiment harm or kill hundreds of thousands, or even millions, of people?
- [Important Vaccine Message](#) (2019-07-24 duration 06:03)
 - [WSJ: Wisconsin Legislature Files Suit Over Governor's Lockdown Order](#) (2020-04-22)
 - [Democratic Governors Hit with Flurry of Legal Challenges to Coronavirus Lockdowns](#) (2020-05-17)
 - [Pennsylvania Senate Republicans Sue Gov. Wolf Over Refusal to End Coronavirus Lockdown](#) (2020-06-10)
 - [CDC: Interim Operational Considerations for Implementing the Shielding Approach to Prevent COVID-19 Infections in Humanitarian Settings](#) (2020-07-26)
 - [Arkansas Lawmakers Sue Over State's Coronavirus Restrictions](#) (2020-09-03)
 - [COVID: Major Case Filed Against Ohio Governor and the State of Ohio for Restricting Freedom Without Legitimate Justification](#) (2020-09-14)
 - [Federal Court Rules Pennsylvania's Lockdown Order Unconstitutional](#) (2020-09-14)
 - [Health Expert: Mask Wearing Will Remain Mandatory Even After a COVID Vaccine](#) (2020-10-26)

- [German Lawyers Initiate Class-Action Coronavirus Litigation](#) (2020-12-05)
- [How COVID-19 Is Changing the Future of Vaccines](#) (2021-01-12)

37. Could the pandemic be part of the United Nations Agenda 21/2030 and their World Health Organization's IA2030 plans for total world control and reduction of the world population by up to 95%? And why is the World Economic Forum's (WEF) "Great Reset" plan that was created just weeks after COVID hit suddenly being pushed? What does its goal to change and unite the world economic and social structures under a single technocratic controlled government that will eliminate all private ownership have to do with COVID? Why are these and many other things that were once considered "conspiracy theories" becoming easily verifiable conspiracy facts?

- [UN: Agenda 21](#) (1992)
- [WSJ: Billionaires Try to Shrink World's Population, Report Says](#) (2009-05-26)
- ['Georgia Guidestones' Exposed | 10 Commandments of the 'New World Order'](#) (2014-06-25 - Commandment #1: "Maintain humanity under 500,000,000 in perpetual balance with nature")
- [UN: Transforming Our World: The 2030 Agenda for Sustainable Development](#) (2015)
- [UN: Time for Global Acton: The 2030 Agenda for Sustainable Development](#) (2015-10-15 PDF)
- [UN: ID2020 Summit 2016](#) (2016-05-20 – U.N. global initiative launched; Sustainable Development Goal 16.9)
- [More Deadly Than War - A Lecture by G. Edward Griffin \(April 3, 1969\)](#) (2016-10-08 duration 1:14:36)
- [MIT: Storing Medical Information Below the Skin's Surface](#) (2019-12-18)
- [WHO: Immunization Agenda 2030: A Global Strategy to Leave No One Behind](#) (2020-04-02 Draft 4)
- [Police State Contagion: US Plan to Use Bioweapons to Impose Martial Law One Quarantine at a Time](#) (2020-05-22 duration 14:54)
- [All-Cause Mortality During COVID-19: No Plague and a Likely Signature of Mass Homicide by Government Response](#) (2020, June)
- [Gov.UK: High consequence Infectious Diseases \(HCID\)](#) (2020-06-17 – As of 19 March 2020 UK Gov't no longer considered COVID-19 a HCID)
- [Agenda 21 Is a Plan to Depopulate 95% of the World Population By 2030](#) (2020-07-06 duration 48:04 – Misleading title: It's an interview with a doctor about COVID who challenges the official narrative except for the last minute)
- [Trust Stamp Integrating Biometric Hash Solution with Mastercard on Children's Vaccine Record System](#) (2020-07-06)
- [Africa to Become Testing Ground for "Trust Stamp" Vaccine Record and Payment System](#) (2020-07-10)
- [WEF: COVID-19: The Great Reset](#) (2020-07-14 duration 1:02:44)
- ['Trust Stamp' Vaccine Record and Payment System to Be Tested on Low-Income Africans](#) (2020-07-15)
- [Trust Stamp - Bill Gates Funded Program That Will Create Your Digital Identity Based On Your Vaccination History](#) (2020-07-19)

- [Trust Stamp, Digital Vaccine Record, Cashless Payment System, Biometric Program](#) (2020-07-20 duration 10:57)
- [CDC: Interim Operational Considerations for Implementing the Shielding Approach to Prevent COVID-19 Infections in Humanitarian Settings](#) (2020-07-26)
- [How the COVID-19 Fear Peddlers Lost Their Credibility](#) (2020-08-03)
- [Dispatches from the War: Vaccines, Gates, Racism, Liberals, Logic](#) (2020-08-04)
- [Don't Do Your Own Research!!! - #PropagandaWatch](#) (2020-08-05 duration 26:06)
- [The Great Reset: Davos & the Plot to Cancel Trump](#) (2020-08-06 duration 25:18)
- [The Attempted COVID Coup of 2020](#) (2020-08-13)
- [Plandemic Indoctrination World Premiere](#) (2020-08-18 duration 1:24:05 MUST SEE VIDEO!)
- [Dr. Peter Breggin - NEW-COVID-19-LEGAL-REPORT.pdf](#) (2020-08-30)
- [COVID-19: The Greatest Hoax in History](#) (2020, September – PDF)
- [The "COVID Economy": The Plan](#) (2020-10-01)
- [Crimes Against Humanity \(Dr. Reiner Fuellmich\)](#) (2020-10-04 duration 49:00)
- [What Could They Put in the COVID Vaccine?](#) (2020-10-07)
- [Airports Begin Testing 'COVID Passport' That Will Record Whether Someone Has Been Vaccinated Before Travel](#) (2020-10-07)
- [CommonPass Digital Health Pass and Global Trust Framework Launches to Enable Travel and Accelerate Border Reopenings](#) (2020-10-07)
- [COVID: The Virus That Isn't There: The Root Fraud Exposed](#) (2020-10-08)
- [Dr. Elke De Klerk: We Do Not Have a Medical Pandemic](#) (2020-10-16 duration 2:20)
- [More Plandemic Foreknowledge](#) (2020-10-18)
- [Your Guide to The Great Reset](#) (2020-10-18 duration 1:11:57)
- [Dr. Fauci's COVID-19 Treachery With Chilling Ties to the Chinese Military](#) (2020-10-19)
- [Shock Report - COVID is NOT a Pandemic According to Doctors](#) (2020-10-19)
- [The COVID-19 Genocide of 2020 By Claire Edwards](#) (2020-10-29 duration 21:13)
- [After the Virus: The World of 2025](#) (2020-10-31 duration 22:10)
- [CDC Plans COVID Concentration Camps](#) (2020-11-02)
- [COVID-19: Exposed \(Official Movie\)](#) (2020-11-03 duration 30:20)
- [NHS Nurse Publicly Resigns, Blasts COVID Lockdown Policy](#) (2020-11-05)
- [Top Medical Journal Caught in Massive Cover-Up](#) (2020-11-05)
- [How They'll Fake the Success of the COVID Vaccine](#) (2020-11-13)
- [Who Pressed the Great Reset Button?](#) (2020-11-16)
- [Dr. Roger Hodkinson: This is a Meeting Privately Recorded in Edmonton Alberta Canada](#) (2020-11-17 duration 5:27 – Dr. Hodkinson statements on the COVID-19 hoax)
- [The Great Reset: SECRET Plot to Reset the Economy? \(FED\)](#) (2020-11-23 duration 8:29)
- [Former Pfizer Science Officer Reveals Great COVID-19 Scam](#) (2020-11-25)
- [The Plan Is Unfolding for How Vaccines Will Be Monitored](#) (2020-12-01)
- [Covert Op: "The Virus" as Cover Story](#) (2020-12-02)
- [America in Twilight: Calling All Patriots](#) (2020-12-03 duration 36:36)

- [Dr. Ron Paul: Covid 19 Vaccines: Paving the Way for the Surveillance State](#) (2020-12-03 duration 30:50)
- [Your Guide to the Great Monetary Reset](#) (2020-12-04 duration 1:08:58)
- [Dark Journalist - Catherine Austin Fitts Stopping the Technocrat Takeover!](#) (2020-12-06 duration 1:10:07)
- [Freedom of Information Reveals Public Health Agency of Canada Has No Record of "SARS-CoV-2" Isolation Performed By Anyone, Anywhere, Ever](#) (2020-12-07)
- [The Greatest Hoax Ever Perpetuated on an Unsuspecting Public](#) (2020-12-09)
- [Reuters Celebrates Maskless Partygoers Living It Up In Wuhan](#) (2020-12-18)
- [Top Catholic Cardinal Warns COVID-19 Being Used to Usher in "Evil" Great Reset](#) (2020-12-18)
- [Technocracy and the Great Reset](#) (2020-12-19)
- [A Year without Santa Claus?](#) (2020-12-21 Exposé on the Great Reset and what's in store for us all)
- [Learn How COVID-19 Controllers Took Over The World In 2020 - The Truth About COVID-19](#) (2020-12-26 duration 21:42)
- [COVID Conflicts: Asymptomatic Testing, Lack of Danger to Kids](#) (2020-12-29)
- [The 1976 Swine Flu Hoax. COVID-19 Is Not the First Fake Pandemic Hoax to Push Dangerous Vaccines](#) (2020-12-31 duration 15:05 – 1979 Mike Wallace 60 Minutes Story)
- [Why Do Hypocritical Officials Violate Their Own COVID Rules?](#) (2021-01-01)
- [IG Farben: The Roots of the COVID Plan](#) (2021-01-04)
- [Mutated COVID Virus Marketed to Justify New Lockdowns](#) (2021-01-05)
- [Lockdown Civilization: Phase One and Phase Two](#) (2021-01-06)
- [Pentagon Funded Nonprofit Covering up SARS-CoV-2 Origin](#) (2021-01-06)
- [Dr. Mercola Defamed by Digital 'Anti-Hate' Group](#) (2021-01-08)
- [LA Rolls Out Digital Vaccine Verification](#) (2021-01-13)
- [Microsoft, Salesforce and Oracle Back Plan to Develop a Digital COVID Vaccination Passport](#) (2021-01-14)
- [Bio-Warfare & Weaponization of Medicine Amid COVID](#) (2021-01-15 duration 30:11)
- [The Plan for a Global System of Slavery](#) (2021-01-16)
- [Vernon Coleman - The PCR Test Is Useless for COVID19 \(But Useful for Crooked Governments\)](#) (2021-01-23 duration 6:28)
- [Global Initiative for COVID-19 Vaccine Records](#) (2021-01-26)
- [Planet Lockdown | Catherine Austin Fitts \(Full Interview\)](#) (2021-02-01 duration 48:31)
- [The Great Reset and Build Back Better](#) (2021-02-02)
- [Why COVID-19 Cases Will Instantly Drop](#) (2021-02-03)

Do They Really Care About Saving Lives

If the government, CDC, big pharma, big tech and the media truly cared about saving lives then why do they:

- Continue with lockdowns when they've been proven to not work as evidenced by increasing COVID cases and deaths, adjacent countries and counties that didn't lockdown had fewer COVID cases and deaths, and studies show that they not only don't work, but kill more people than they are alleged to save
- Continue to push face masks when studies show they don't work and can even cause more problems than they allegedly solve, when the virus is much smaller than the best (N95) mask can filter out, and COVID cases and deaths increased even under the most stringent conditions (e.g., hospitals and ICUs)
- Continue to push social distancing of 6 feet when government studies and documents show that aerosol spray (which can also contain the COVID virus) from sneezing and coughing can travel up to 27 feet and linger in the air for hours and can't be contained in planes or other confined spaces with recirculated air or when people pass each other by such as in store aisles or on the street
- Continue to push lockdowns, face masks and social distancing despite many of those who mandated and supported such authoritative draconian measures have been caught on camera not following their own orders (what do they know that we don't?)
- Continue to intubate hospitalized COVID patients when statistics, studies and their own data shows a death rate of those intubated at 50-97%
- Continue to order or support patently absurd and inconsistent rules and regulations such as having to wear a mask while entering and exiting a restaurant or bar, but its ok to not wear one while seated, shuttering "non-essential" (which they decide are non-essential) small businesses but keeping multi-billion dollar chain stores open, forcing businesses to close at specific hours as if the virus is only infectious during those closed hours, prohibiting large gatherings unless it's a protest, rally or riot (as if the virus knows not to infect people during those gatherings), shutting down small restaurant outdoor dining while a huge outdoor event across the street is just fine, maintaining 6 foot distance between restaurant tables, but sitting side by side in a plane breathing recirculated air is no problem, food preparers must wear gloves (as if the virus can't attach itself to a glove), table and counter tops and hands must be sanitized regularly, but door handles and toilet and faucet handles are exempt, facial, table and counter polyurethane and plastic shields are good because the virus can't figure out how to get over, under or around the shields, prohibiting the people from having even small gatherings while they congregate with their families and friends, prohibit us from traveling to visit family while they travel to visit their families, vacation outside the country, or enjoying boating with several bikini-clad girls with no masks or social distancing, continue to wear face masks virtually everywhere while they remove their masks as soon as they believe the cameras aren't filming, requiring masks outdoors while they're caught outdoors without a mask, requiring everyone to wear a mask regardless of whether they wear it right, it works, or even if it might help prevent the spread of COVID, the list of laughable dos and don'ts is virtually endless but the majority of the masses mindlessly follow the rules without asking a single question and ignoring the double standards (perhaps we deserve to be called sheep—which is the nicer label they ascribe to us)

- Continue to ignore, marginalize, or censor (or worse) worldwide credible and respected doctors, scientists and others who dare to challenge the official narratives
- Ignore, marginalize or censor doctors around the world who claim to have had a 90-100% success rate of treating thousands of their COVID patients with FDA approved common and inexpensive therapeutics like Hydroxychloroquine, Ivermectin and others
- Ban or make it otherwise difficult to get or be treated with cheaper and more effective therapeutics like Hydroxychloroquine and Ivermectin while promoting extremely expensive big pharm treatments like Remdesivir and Monoclonal Antibody
- Continue to use Neil Ferguson’s COVID prediction models when his years of predictions have been an abysmal failure
- Continue to use Dr. Fauci as the head COVID expert when he has vacillated on recommendations, funded Wuhan lab gain-of-function research to create pandemic level coronaviruses, has a history of wrong predictions and bad decisions, has connections with the Gates Foundation and has a vested interest in the vaccines
- Continue to use Bill Gates as a vaccine proponent spokesman when he has no medical expertise, funded the Johns Hopkins Event 201 Coronavirus pandemic simulation that occurred just weeks before COVID-19 hit, has billions invested in vaccine research and development and stands to make hundreds of billions more from the vaccines, is allied with the ID2020 Alliance and has funded the vaccine-based Trust Stamp, MasterCard and GAVI digital biometric identity coalition, is known for his controversial views on population control, and couldn’t prevent viruses from infecting his own Windows operating system (but we’re supposed to trust that he and his vaccines will prevent COVID from infecting us)
- Spent millions of taxpayer dollars to fund gain-of-function research at the Wuhan Institute of Virology to make deadly corona viruses capable of infecting humans with the potential to create a pandemic
- Continue to push a vaccine a type (mRNA) that has never been created before, modifies the human DNA, was produced in a fraction of the time that all other vaccines have taken to produce, has had no long term studies done for its safety or effectiveness and that the manufacturers admit they have no idea what it will really do to humans
- Continue to push for everyone to get the vaccine (mandated or coerced) even though their own data shows the vaccines won’t prevent COVID-19, may cause infertility, is only effective for mild cases of COVID, many medical professionals won’t take, won’t eliminate the masks, social distancing, and lockdowns, and may only lessen the duration of the disease in infected people by a few days
- Continue to ignore the millions of Americans who have lost their jobs, businesses and/or were forced into bankruptcy, the tens of thousands of people who’ve committed suicide and the countless others who suffer from depression and who’ve developed stress-related illnesses, many of whom have died, as a direct result of the government actions
- Ignore all conflicts of interest between government officials, “experts,” big tech CEOs, media talking heads, etc. and their vested interests and ties to foreign governments, big pharma,

vaccine manufacturers, think tanks, NGOs, and other entities that make millions/billions off of the COVID pandemic

- Continue to ignore where and how the SARS-CoV-2 came into being and why the Pentagon would spend \$39 million to cover it up (could it be because divulging those facts would shine a huge spotlight on the truth about the COVID pandemic and its intended purpose)
- Ignore, marginalize or censor any information that connects the COVID pandemic to Event 201, the ID2020 Alliance, IA2030, UN 2030/Sustainable Development Agenda, the WEF Great Reset and any of the WHO, CDC, big pharma, big tech, media, academic, science and medical professionals ties
- Continue to push fearmongering about the disease with daily new case and death counts rather than provide any positive information that might actually help millions of people to survive the disease
- Continue to report on the few hospitals overrun with COVID patients rather than reporting on far more hospitals that are not overrun and have plenty of beds including those who have plenty of time to do Tik Tok videos of their nurses and doctors doing choreographed dances in their halls
- Continue to tell us that lockdowns will likely continue and we will have to continue wearing masks and social distancing for many more months (perhaps years) and that we will never go back to “normal” even with the vaccine

Bringing in the Great Reset

When the science flies in the face of the restrictions being imposed, it becomes clear that there's a sinister hidden agenda. Many of the global elite need this crisis and have been "fermenting panic for the past eight months. Why they're doing it you can argue but the fact that they're doing it is plain and obvious," Cummins said, adding:

"The WHO drove the masks when it was utterly antiscientific. They're not stupid, so why did they do that? The WHO equally knows the science on lockdowns and the analyses but they remorselessly recently pushed lockdowns again ... they're imploring governments to lock down hard, and they have to know that that's the wrong thing to do.

So you can go to the [World Economic Forum](#) (WEF). They've made it clear that this is an enormous opportunity to bring in the Great Reset and to retool the world."

Ultimately, Cummins believes there's not one "single evil genius stroking a cat" that orchestrated a conspiracy, but rather COVID-19 presented an opportunity that multiple entities have used to further their own agendas. What you can do now is keep your eyes open and your ears tuned to the science, so you don't fall victim to the unnecessary panic and fear they are seeking to cause:

"China certainly exploited a new nasty virus and saw it as an opportunity to send the fat, lazy, soft Westerners into a tailspin. Why not? And the WEF has been very clear on its goals, and it's remorseless in driving them.

The WHO, the U.N., the European vaccine alliances, you know, have plans for vaccine passports by 2021, and they were published a year or two ago. I mean imagine you wanted vaccine and health passports by 2021 and then corona came along.

Can you imagine how you'd feel? You would salivate, you would see an enormous opportunity to move forward long plans and get them done in six months. There's no conspiracy theory. It's just unfortunate that a vast array of very powerful bodies all pretty much see enormous opportunity in Sars-CoV-2, and then they all probably, to greater or lesser extents, they talk to each other and communicate.

So, it's like everyone's got the big payday now and I think what we see is the result of ... this huge remorseless general push toward hysteria because it will enable everyone's goals and the whole of the pharmaceutical industry is salivating. It's just one of those phenomena that unfortunately has been exploited beyond belief."

Conspiracies and Science

For decades now, but particularly in the last few years, media and authority figures have relentlessly used the term “conspiracy theory” to repudiate anything that challenged official narratives and have denigrated (and often labeled as conspiracy theorists) those who dared to challenge the status quo. Clearly this was done to dissuade people from investigating the issues and to lull the masses back to sleep. Yet, history has shown time and again that many conspiracy theories were, in fact, true.

For instance, the 1950s/1960s CIA MK-ULTRA project was a conspiracy theory that was revealed to be fact in the mid-70s and the CIA Heart Attack Gun was alleged to be a conspiracy theory, but the 1975 Senate Church Committee revealed it was a fact. And Area 51 was a favorite conspiracy theory mocked by the mainstream media for years until it too turned out to be a fact.

Science is another term used by the media and authority figures to shutdown dialog and debates. As if science and scientists were never wrong. Nothing could be further from the truth and is proven all the time. Science is far from perfect and scientists are not gods and attempting to treat them as such can have extremely devastating and even fatal consequences.

For example, in the 1500s the geocentric theory that the universe, sun, and stars revolved around the Earth was accepted scientific knowledge. Then in 1543 Nicolas Copernicus posited a heliocentric theory in his “On the Revolutions” paper that the Earth revolved around the sun. In 1600 Giordano Bruno was condemned by the Papal Inquisition and burned at the stake for supporting such heresy and Galileo Galilei was condemned by the Church in 1633 and forced to renounce his beliefs in the Copernican theory lest he suffer the same fate as Bruno. Galileo was sentenced to indefinite imprisonment and spent the rest of his life under house arrest. It wasn’t until the 1700s (i.e., 150 years later) that “science” and the Church finally conceded and accepted the heliocentric model.

How did we get here? Whether one believes that the term “conspiracy theory” was weaponized by the CIA according to a 1967 FOIA document in order to derail investigations and the public’s interest in the JFK assassination is true or not is really immaterial. But there can be no doubt that the intent for using the term is to deter people from further consideration and investigation and to marginalize and/or defame those who dare to question the official stories.

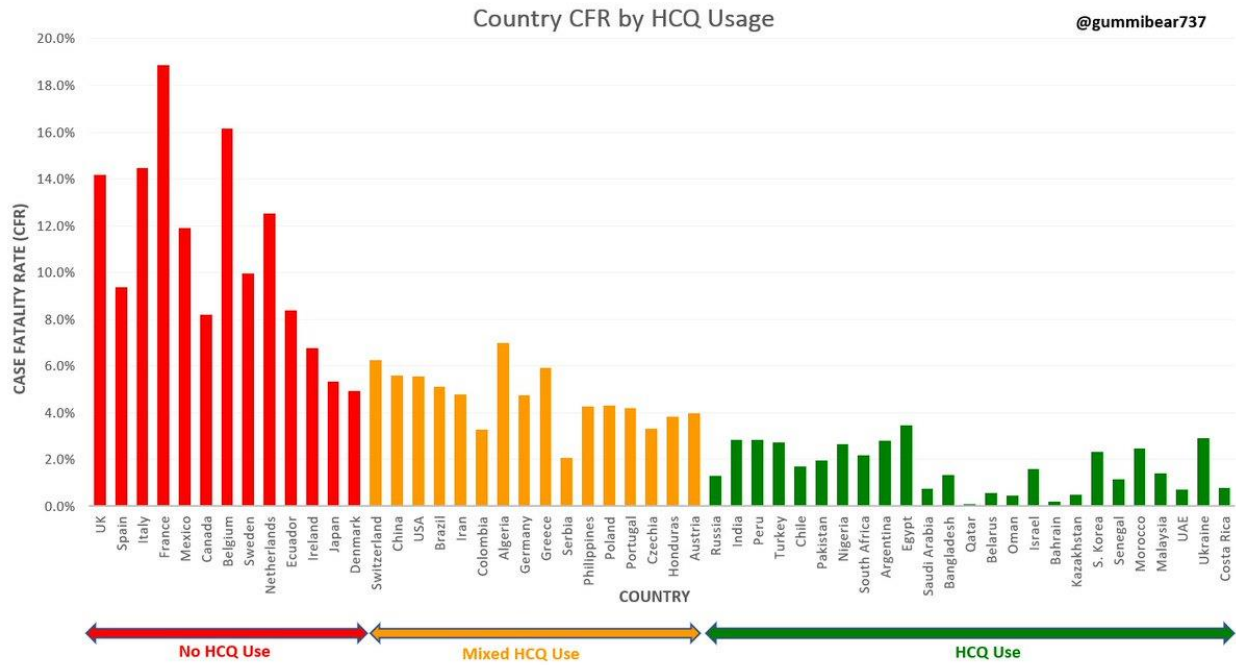
The bottom line is that all people (scientists, government and church officials, media personalities, academics, etc.) all bring to the table their biases, prejudices, and beliefs and most will defend those beliefs rigorously and that behavior can have grave consequences for those who dare challenge them.

Without question some conspiracy theories are nonsense, but not all. Likewise, science does not get everything right. It is simply a tool used to investigate theories and hypotheses and scientists’ conclusions are often proved wrong as new and better research is done and evidence becomes available.

An open mind coupled with critical thinking, logic and rational thought are the tools necessary to arrive at a reasonable conclusion, but even then we cannot be assured that we have arrived at the correct conclusion. We are all immersed in a sea of misinformation, disinformation and outright lies with some

nuggets of truth floating about; all of which were and are created by human beings—some with good intent and some not. The best any of us do is to be set biases, prejudices and beliefs aside, be vigilant at doing research, examine all sides of an argument or theory and attempt to arrive at the best and most logical conclusion we can based on the information and evidence obtained.

Country Case Fatality Rate by HCQ Usage



COVID vs FLU Death Counts in Texas as of July 14, 2020

Infection type/Year	Deaths
Influenza, 2017-2018	11,917
Influenza, 2018-2019	10,020
Covid-19, 2020	3,322

COVID Survival Rate as of August 2020



COVID Survival Rates Posted By the CDC September 10, 2020

- Ages birth to 19: 99.997%
- Ages 20 to 49: 99.98%
- Ages 50 to 69: 99.5%
- Ages 70 and up: 94.6%

COVID Data in US vs the World as of July 12, 2020



UNITED STATES

POPULATION:
330,917,584 (Million)

TOTAL COVID-19 CASES:
3,236,130

TOTAL DEATHS:
134,572

Less than 1%
of Americans
have caught COVID-19.

Current survival rate:
99.96% of the U.S.
population.

WORLD

POPULATION:
7,800,000,000 (Billion)

TOTAL COVID-19 CASES:
12,946,731

TOTAL DEATHS:
569,375

0.17% (less than one
percent) of the world
has caught COVID-19.

Current survival rate:
99.99% of the global
population.

Data as of July 12, 2020 - From [cdc.gov](https://www.cdc.gov) and [worldometer.info](https://www.worldometer.info)

WHO: Herd Immunity Definition Change – Why?



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Coronavirus disease (COVID-19): Serology

Coronavirus disease (COVID-19): Serology

9 June 2020 | Q&A

What is herd immunity?



Herd immunity is the indirect protection from an infectious disease that happens **when a population is immune either through vaccination or immunity developed through previous infection**. This means that even people who haven't been infected, or in whom an infection hasn't triggered an immune response, they are protected because people around them who are immune can act as buffers between them and an infected person. The threshold for establishing herd immunity for COVID-19 is not yet clear.



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Coronavirus disease (COVID-19): Serology,
antibodies and immunity

Coronavirus disease (COVID-19): Serology, antibodies and immunity

13 November 2020 | Q&A

What is herd immunity?



'Herd immunity', also known as 'population immunity', **is a concept used for vaccination**, in which a population can be protected from a certain virus **if a threshold of vaccination is reached**.

Herd immunity is achieved by protecting people from a virus, **not by exposing them to it**. [Read the Director-General's 12 October media briefing speech for more detail.](#)

NIH: "Chloroquine Is A Potent Inhibitor of SARS Coronavirus Infection and Spread" – August 22, 2005; Why Did NIH Change Course?

Well, well, well...look at what the hell just surfaced

🔒 nw-connection.com

The *Virology Journal* – the official publication of Dr. Fauci's National Institutes of Health – published what is now a blockbuster article on August 22, 2005, under the heading – get ready for this – "**Chloroquine is a potent inhibitor of SARS coronavirus infection and spread.**" (Emphasis mine throughout.) Write the researchers, "We report...that chloroquine has strong antiviral effects on SARS-CoV infection of primate cells. These inhibitory effects are observed when the cells are treated with the drug **either before or after exposure to the virus, suggesting both prophylactic and therapeutic advantage.**"

This means, of course, that Dr. Fauci has known for 15 years that chloroquine and its even milder derivative hydroxychloroquine (HCQ) will not only treat a current case of coronavirus ("therapeutic") but prevent future cases ("prophylactic"). So **HCQ functions as both a cure and a vaccine.** In other words, it's a wonder drug for coronavirus. Said Dr. Fauci's NIH in 2005, "concentrations of 10 μM **completely abolished SARS-CoV infection.**" Fauci's researchers add, "chloroquine can effectively **reduce the establishment of infection and spread of SARS-CoV.**"

<https://rdcu.be/b5W7C>

<https://virologyj.biomedcentr...>

If the masks work
WHY the 6 feet?

If the 6 feet works
WHY the masks?

If both work
WHY the lockdown?

You're being trained
and conditioned...

Just get in the boxcar!

WHO Director-General, Brock Chisholm, (1948-1953)



To achieve world government, it is necessary to remove from the minds of men, their individualism, loyalty to family traditions, national patriotism and religious dogmas.

— Brock Chisholm —

AZ QUOTES

William Casey - CIA Director 1981

“We’ll know our disinformation program is complete when everything the American public believes is false.”

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— William Casey, CIA Director 1981



**U.S. Secretary of State, Henry Kissinger, Speaking at Bilderberg Meeting
May 21, 1992**




The Plan

"Today Americans would be outraged if U.N. troops entered Los Angeles to restore order; tomorrow they will be grateful! This is especially true if they were told there was an outside threat from beyond whether real or promulgated, that threatened our very existence. It is then that all peoples of the world will pledge with world leaders to deliver them from this evil.

The one thing every man fears is the unknown. When presented with this scenario, individual rights will be willingly relinquished for the guarantee of their well being granted to them by their world government."

- Henry Kissinger in an address to the Bilderberg meeting at Evian, France, May 21, 1992.

David Rockefeller – U.N. Conference September 14, 1994



"We are on the verge of a global transformation. All we need is the right major crisis and the nations will accept the New World Order."

-- David Rockefeller speaking at a UN Business Conference, Sept. 14, 1994

WEF Founder - Klaus Schwab DAVOS 2020



Infamous Quotes

“Some even believe we are part of a secret cabal working against the best interests of the United States, characterizing my family and me as ‘internationalists’ and of conspiring with others around the world to build a more integrated global political and economic structure – one world, if you will. If that’s the charge, I stand guilty, and I am proud of it.” –David Rockefeller, “Memoirs” 2002

“This present window of opportunity, during which a truly peaceful and interdependent world order might be built, will not be open for too long — We are on the verge of a global transformation. All we need is the right major crisis and the nations will accept the New World Order.” – David Rockefeller, 1994-09-23

“Out of these troubled times, our objective—a new world order—can emerge. Today, that new world is struggling to be born, a world quite different from the one we have known” –George H.W. Bush, 1990-09-11

“Sustainable Development intends to take control of all resources, all production and all consumption on planet earth, leaving all of its inhabitants to be micro-managed by a scientific dictatorship. ~ Patrick Wood

“The pandemic represents a rare but narrow window of opportunity to reflect, reimagine, and reset our world.” –Klaus Schwab WEF Founder and Executive Chairman