

## [So You Want To Believe The So-Called 'Experts'?](#)

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Let's go down the list.

- **This virus was newly discovered in January of 2020. FALSE;** Judicial watch has now *proved* that [Fauci and the NIH knew](#) that Covid-19 was diagnosed *no later than December 2nd 2019 in Wuhan*. This was *deliberately concealed* under confidentiality agreements between China and the NIH. In short Dr. Fauci and the NIH *knowingly and repeatedly lied* about the time of first discovery and diagnosis **and it is documented that this was known in February and early March and not disclosed**. We also now *know* with scientific certainty that the virus was in the US *no later than* the second week of December of 2019 because antibodies were found in about 1.5% of blood donations from that time. This, along with the sequencing back-computation I performed in early 2020 *places the latest the virus entered the US as sometime in October of 2019* and from the blood bank data **it is scientifically proved** it had infected about 1.5% of the population, **or roughly 4 million people in the US**, by the second week of December 2019. This in turn means that we had widespread disease **which was blamed on something else**. Indeed we handled **all 4 million of those cases** just fine up until the hysteria started, didn't we? You didn't even know those 4 million sick people, and those who died of it, existed prior to the hysteria being ginned up.
- **15 days will slow the spread.** "If we all stay home and minimize contact for 15 days -- including closing businesses, schools and not traveling -- Covid will be under control and we can trace infections and stop it." **FALSE** and we now know **impossible because the virus was already all over the country on an uncontrolled basis by that time and the NIH knew the virus had been circulating for at least a month earlier than they admitted at the time**. It is **true** that if you immediately slam your borders shut 100% you can trace and quarantine yourself out of a transmissible epidemic -- *at the cost of essentially all external trade, travel and tourism*. But Fauci *factually knew* when we started that this was impossible because the virus had been spreading here for *at least two months* at the time *and we hadn't done a thing about it for those two months*. We were later to learn it was *four months* and perhaps longer.
- **If you give us 30 more days (remember, this is now six weeks to slow the spread) it'll work. FALSE AGAIN** for the same reason; the NIH and Fauci *knew* there was no possible way to contain the virus when the original 15 days expired as he *knew, factually*, that the virus had been uncontained for *at least* three months.
- **But the lockdowns and restrictions worked to save lives! Nope; this is called the "exception fallacy" and now a peer-reviewed journal entry demonstrates it.** We knew this early on too; indeed for *five decades* we've had "pandemic response plans" that make clear that *once you have widespread community dispersion of an infectious agent* attempting to lock down people or impose any other sort of non-pharmaceutical intervention is futile *and causes harm*. We ignored said *decades of hard-won experience* -- intentionally.
- **We don't have enough ventilators! FALSE;** not one of the DPA-produced ones was ever needed; NY's Governor lied and had plenty of them, as did everyone else.

- **Ventilators not only are needed they will save lives. FALSE;** they killed nearly everyone put on one then, and still do. We knew they didn't work in February as they killed 95% of the people put on then in Wuhan and this had been reported out by March.
- **This is mostly a community-spread disease in places like stores, bars, restaurants, churches, concerts and the local city street. FALSE;** the CDC *itself* documented that more than *half* of all transmission was happening in homes *and the next largest, and only other statistically material spread was occurring in industrial (e.g. meat packing) plants and health care settings.* Nashville suppressed the fact that they could only trace about *one percent* of infections to social businesses such as bars and restaurants and now the CDC itself has stated that *less than 1% of spread is traceable to such public venues as restaurants and bars.* In other words we knew by late spring of 2020 the restrictions, including business closures, school shutdowns and masks couldn't work as *that's not where the virus was spreading; we couldn't shut down the industrial plants without starving the population and destroying both energy production and sanitary services leading to an immediate societal and economic collapse.* Nor could we invade every house and forcibly segment positive-tested people either; we had neither the resources nor would they get away with it without the cops and government goons being turned into swiss cheese. And when it comes to health care *we could have segregated Covid-19 facilities and the people working in care homes but intentionally did not.*
- **Asymptomatic transmission is a major risk. FALSE.** Over millions of contacts traced in China *not one was ever proved to be from an asymptomatic person.* There has never been scientific evidence that asymptomatic spread has been material in any pandemic through history *and there is no documented evidence of material asymptomatic spread for Covid-19 in the US or anywhere else.* Worse, symptomatic persons least able to afford to call out sick due to lack of paid sick time or even the threat of being fired *are those in low-wage and high-contact jobs* such as fast food, grocery, meatpacking and other "essential" service industries never mind care home employees who are poorly paid and often moonlight in home health care among extremely vulnerable people.
- **We had no way to stop the nursing home deaths and did the best we could. FALSE.** I pointed out immediately after Kirkland occurred that *isolating the employees from all general public interaction,* effectively creating a bubble, would stop nearly all of the transmission into these environments. We happened to have a lot of empty hotels at the time too. Yes, we would have had to pay significant bonuses to entice employees to *go nowhere other than that hotel room and to work* but we could have, and if we did it would have saved *nearly 50% of those who died in the first four months.* Not one so-called "expert" demanded or even suggested doing so but I was calling for exactly this *in March of 2020.* This, of course leaves aside the various Executive Orders that *intentionally* seeded the virus into nursing homes in multiple states by multiple Governors. Indeed even this winter in still-locked-down New York *there was still no segregation of employees and residents were killed in size by infection brought into the care home by employees.* Recent small case number spikes have been associated with *vaccine distribution.* How's that possible? There's only one *rational* explanation: *The health care workers are giving the virus to the patients getting the shot!* And yet we are still told that all these people are "heroes" and don't you dare forget it.
- **We didn't -- and don't -- have early treatment options that work. FALSE;** Japan spent their effort on *early treatment and keeping people out of hospitals.* They have roughly a third of our population *and only 8,000 dead people.* Japan is far more-dense population-wise than us yet did a hell of a lot better despite having a *materially* older population. What Japan *didn't* do, in short, is spread the disease via their health care workers. In short if you went to the hospital you were likely to die; this has proved out in my own county in Tennessee with a >60% death rate. *Up until we started with the panic porn -- the entire first three months of this outbreak in the US until March of 2020 -- we did*

*fine too despite the virus being literally everywhere for months. We in fact knew of several early treatment candidate drugs, all cheap and available, in March of 2020 and exactly zero of them were investigated by the NIH, CDC or any of the so-called "public health" institutions such as Vanderbilt, IHME, Johns Hopkins and others. Those physicians and even hospital systems who *did* investigate them on their own were derogated, attacked and in some cases even threatened with license suspensions and other sanctions which continue to this day.*

- **Age is the primary determinant of risk. FALSE; [obesity and the panoply of health conditions caused and exacerbated by being a fat-ass is the primary determinant of risk.](#)** Nations with lower obesity prevalence have a *ten times lower or better* risk of death from Covid-19 on a per-100,000 population basis. Obesity is in each and every instance a *lifestyle choice*. This was known very early on [in the NY Coroner data which is updated frequently](#); only six persons 75 and older have died of Covid without one of a relatively short list of underlying conditions -- and over 10,500 died *with one or more*. Simply put *most of those who died deliberately put themselves in a medically compromised condition* through their own lifestyle choices just a person who drinks too much and ruins their liver *decided to drink*. Absent those *personal lifestyle decisions* the death rate from this disease, while certainly not zero, is approximately *half* as likely as death due to an automobile accident over a year's time. [Read here -- this is exactly what I pointed out one year ago.](#) Who's been right on this -- and who's been wrong?
- **Existing drugs will not work and we have no existing treatments until you're hospitalized; we must develop new treatments and vaccines. FALSE.** The data is that ivermectin works, among others. A trial out of Australia conducted in Britain (they locked everything in and did not have enough people in Australia who were sick) showed Budesonide (a cheap inhaled steroid used for asthma) works *if given immediately when someone becomes symptomatic*. The latter trial was stopped *because it was ruled unethical to not give the controls the medicine since it prevented ninety percent of hospitalizations*. Ivermectin has worked in every trial run thus far [except one recently reported study the authors themselves state cannot prove effectiveness](#) as the necessary deterioration in cases to do so was violated to the downside immediately, possibly due to widespread community use of the drug. The data on HCQ says it works *if used early* but appears to be worthless if not used until you're in the hospital. [Remdesivir, which has an EUA, was disproved -- that is, shown worthless in a very large trial called "Solidarity" \(along with several other drugs\) and yet is still being used as it is on-patent and expensive.](#) No drug works 100% of the time nor should it be expected to, but we should damn well *not* continue to use drugs that are proved worthless *just because they cost \$3,000 and the FDA issued an EUA for them*. Deliberately not treating people until they're choking to death *is monstrous* and has resulted in hundreds of thousands of deaths, many *if not most* of them avoidable at a cost of a few dollars.
- **Masks are the best tool we have to stop the spread and, if you just wear them for a few -- 4, 6, 8 weeks -- we will have Covid under control.** Stated under oath before Congress by the CDC's director in September [following multiple previous statements over a two month period in the summer by the CDC and NIH which urged \(and got\) the issuance of mandates.](#) **FALSE** and known false as Hawaii took a ten times case rate spike *a month after their mandate*. This was known before Redfield perjured himself before Congress. There are ZERO states which did not take a *monstrous* spike in the winter *despite mandates including California with the most-strict lockdowns and mask mandates in the nation*. Compliance via multiple surveys has been around 90% *with no evidence of effectiveness anywhere against non-mandate states and counties next door*. Those states including South Dakota and Florida *who repudiated* the mandates or refused to issue them in the first place had identical or better outcomes than the states and locales that imposed them. The CDC has now *itself* published a MMWR (weekly report) in which they "claim" masks work -- their definition of "work" is a *shockingly tiny 1-*

2% decrease in deaths and this assumes you ignore the confounding elements in their study that could invalidate even that tiny impact. In other words despite the nearly year-long and continual screaming about masks even the CDC itself now states that out of the 500,000 dead only 5,000-10,000 lives were saved at best and statistically-speaking it is entirely possible zero lives were saved. REMEMBER, WE WERE TOLD IN THE SUMMER AND EARLY FALL THAT MASKS WOULD ABSOLUTELY CONTROL THE VIRUS AND IN FACT THE CDC STATED UNDER OATH THAT MASKS WERE BETTER PROTECTION THAN A VACCINE. THIS LIE WAS REPEATED FOR MONTHS AND IS STILL BEING REPEATED TODAY. This wasn't a random statement made "off the cuff" *it was made under oath to Congress five months ago* and has, [over time and by the data](#), been conclusively proved to be **a lie**.

- **The new strains will cause another spike even worse than the last one.** **FALSE;** this was stated originally in the fall and repeated in December through February and yet since then cases have dropped like a stone despite these "new strains" becoming more and more prevalent. Florida in particular has documented widespread prevalence of one of the "demon strains" that were trumpeted in Fauci's fear porn. There has been no spike. Incidentally viruses mutate all the time; within the first few months there were hundreds of distinct viral RNA strains of Covid-19 known and that was only of the infections sequenced -- a tiny minority. If our actions do lead to new strains (specifically our ridiculously-unsound mass-vaccination campaign) and viral evasion occurs you may well be more screwed if you took the vaccine due to ADE than if you did not!
- **The Super Bowl will cause a huge case, hospitalization and death spike in Florida due to the ridiculously crowded parties and no masks in bars and similar all over the Tampa area. In fact the mayor threatened to arrest people for exactly this reason (an empty threat as the Governor had banned enforceability of said mandates.)** **FALSE;** there has been no spike. [Look for yourself; it's been over a month](#) and cases, hospitalizations and deaths are all falling. Where's the spike?
- **Texas dropping its mask order will lead to mass-disease and death.** **FALSE;** there has been no spike at all. Biden called the move "Neanderthal thinking" and predicted disaster, as did California's Newsom among myriad others, both among political leaders and so-called "medical experts" such as Fauci. Multiple lefties claimed that "*there is no limit to how far Republicans will go to kill people.*" The truth is that Covid-19 cases **fell** by 28% in the next two weeks. The histrionics were, once again, **wrong**.
- **If we social distance and wear masks we will buy enough time for the vaccines to be developed and approved.** **FALSE.** The case and hospitalization rate on a national basis *peaked and was falling* before the first jab went in the first arm. That which you do *after* something happens *cannot be the cause*. Simply put the vaccines *did not stop any of the death*; despite the lack of testing and rushed approvals they came too late.
- **The only people who count for "herd immunity" are those vaccinated.** **FALSE;** never in history has such a lie been propagated for *any disease, ever, anywhere*. The CDC *by its own estimates* puts the lower boundary of persons *infected and recovered* at over 1/3rd of the nation *and that's their lowest* estimate. By more-reasonable belief the number is over *half*. Those people have immunity **and absolutely count**. Further, we knew in the first months that a material percentage of the population has *pre-existing* resistance to some degree, likely due to previous infection with other coronaviruses. This is why the case rate peaked *before* fully-vaccinated persons existed in the US; *there is no other possible explanation*.
- **Even if you've had the disease and recovered you should get vaccinated.** There is **zero** science behind this claim. If you've had the measles or Chicken Pox would you take a vaccine against either? I certainly would not and have not; that would be pointless *and stupid*. The claim that there is no durable protection once infected *is nothing more*

*than conjecture; note that coronaviruses circulate among us all the time and while immunity may not be perfect (e.g. eventually you may well get it again) the odds are extremely high that if you do it will be a mild case and of no clinical or personal significance. Suggesting that you take the **risk** of an experimental vaccine if you were previously infected is **wildly** inappropriate; there is no such thing as a drug without risk and there is zero scientific evidence that your acquired immunity will not protect you against serious disease.*

- **Even if you've been vaccinated or had the disease and recovered you should wear a mask and distance from others. FALSE, unless you believe the vaccines are worthless.** If you *believe* the vaccine protects the person who takes it *then you no longer need a mask or to distance* and since others can choose to take a vaccine or not you have no reason to wear a mask or distance for allegedly protecting others either. If you *do not* believe the vaccines are effective protection *then why did you take it?* In short you either believe that you gain immunity by vaccination or infection or you do not; if you do then there's no reason for you to take any measures beyond either recovery or completion of the vaccination. Further, if you don't believe infection and recovery provides meaningful and durable protection *then neither will the vaccine* so the same scenario applies to both cases and if you do not then believe the shots are protective then you are **stupid** for accepting them.

These are the very same people folks -- the NIH, the CDC, State Departments of Health, Fauci, Harvard, Johns Hopkins, IHME, Vanderbilt and *many more* who now tell you **after a solid year of unbroken lies and falsehoods** that ***the vaccines are both safe and effective*** while at the same time our government has provided a **100% waiver of all liability** to the *pharmaceutical companies* that developed and manufactured them.

I note that *unlike the other common vaccines that are safe and effective, and which took 10+ years to so-prove*, the mechanism of action of these shots are wildly different; they use only part of the virus ***and rather than introduce it into your body they hijack your cellular metabolism to produce the spike protein exactly as would a replicating infection with the virus, but since only the "spike" is there rather than the entire virus the hypothesis is that hijacking your cellular metabolism in this fashion will not hurt you.*** While for other vaccines the immunity produced ***is metabolically identical to infection*** because a killed whole virus that cannot replicate is used in **this** case the shots *deliberately* cause replication in your body of only one part of the virus, the spike protein. ***This is not identical to the broad immunity provided by natural infection because it can't be with this approach; if the entire virus was used you'd get the disease and it would be systemic in every case instead of localized to your upper respiratory tract. Further, unlike a killed virus vaccine that cannot replicate in your body at all these shots all cause production of the spike protein by your cells exactly as would an infection and that production is systemic since it is given by injection and thus circulates through the body.***

The safety of this approach is *unproved* and in fact the rate of deaths closely associated with these vaccines is *wildly* higher than that associated with **any of the other routinely given vaccinations including flu and chicken pox.** The intermediate and longer-term effects of this approach including the possibility of long-term ***or even permanent*** damage as a result of systemically hijacking your cellular metabolism to produce that foreign protein **are unknown.**

Unlike a mask you can remove you cannot un-take a shot and the litany of those *previous* lies killed over 400,000 Americans *who otherwise would not have died.*

What if their statements are false **this** time, specifically on safety? What if viral evasion shows up **as did during early trials for a SARS vaccine in animals,** trials that were abandoned **and not performed for these preparations?** It typically takes **ten years** to know if a candidate vaccine produces unacceptable side effects including **lifetime disability due to immune dysfunction,** never mind exactly how effective it is and for how

long. Further, the media and these people continually claim that **nobody** has been killed by these vaccines [yet VARES, the CDC's own reporting data which is public](#), shows **roughly two thousand** associated deaths. The number of associated deaths with the annual flu shot from last year's flu vaccination which shipped roughly 170 million doses, was **twenty-six**.

That means the Covid-19 shots are associated *thus far* with roughly seventy five times (7,500%) as many deaths as last year's entire set of flu vaccines! Remember that we give flu vaccines to old and morbid people just like the first priority for Covid-19 vaccines, so these should produce similar "associated" rates of bad events **if they are similarly safe**.

VARES reporting is voluntary and thus always **under-reports** vaccine-associated events. Association does not establish causation but a pattern of 75 times as many deaths as are associated with another commonly-given vaccine in the same population group damn well ought to raise anyone's eyebrows; to claim that such does not represent a "safety signal" is a flat-out lie.

I remind you that the false statements of alleged facts outnumber, by a wild margin, the true ones particularly when it comes to things you were told to do that "would work" to stem the spread of this virus. Every single one of those claims has been proved **false** over time.

In short you're now being exhorted to believe a cadre of people and government agencies **who are proved repeated liars** and to trust them with your life **after their previous lies killed your mother**.

The facts are that Covid-19 basically burned itself out *before the first shot went in the first arm* and that **none** of the mitigating factors prevented *net deaths* from occurring; in fact all these mitigations, from mask orders to lockdowns to closing businesses and others ***caused more deaths due to ODs, suicides, avoidable heart attacks and strokes not screened for and other maladies*** by a wide factor than the mitigations, even using *fatally flawed claims taken on faith by these very same agencies*, could have possibly saved. The actions we *could have taken* to actually reduce death, specifically as regards care home and other medical facilities **we deliberately refused to do** and we ***knew*** those actions would save lives. Instead of protecting the most-vulnerable while those least-likely to be seriously harmed were naturally infected and built a wall of population immunity we *deliberately refused to protect those older and sicker people from infection via the health care system and they died*.

Given ***this*** record of falsehoods, actions and ***intentional*** refusals to act you're willing to *bet your life* they're telling the truth **this** time?

Even without full testing there *may* be reason for certain people to accept the vaccine, particularly those at specifically-high risk who have not had the virus. However, *on the data* if you are not specifically morbid in known ways the risk of death from Covid-19, by the CDC's own data along with that of the NY coroner, is approximately 3/100,000. From the associated deaths in the CDC's own VARES system ***it appears the vaccines are approximately as dangerous to materially more dangerous than the disease*** in non-morbid individuals and *that* is without having any data on intermediate and longer-term effects ***which can only add to those risks***. Further, if you've already been infected with Covid-19 *you already have broad immunity* and there is **zero** scientific evidence that vaccination can be of *any* value to you whatsoever.

When do we stop allowing people like Fauci, the CDC, Joe Biden, Donald Trump and Governors along with various health departments ***to lie through their teeth*** about virtually **everything** related to this virus?

Is not your dead Grandmother enough reason to put a stop to this horse\*\*\*\*\* -- and all who support it?

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