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Editorials

Covid-19: politicisation, “corruption,” and suppression of science

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Rapid Response:

Covid-19: Science, Conflicts and the Elephant in the Room

Dear Editor

Congratulations on your editorial highlighting the depressing levels of “corruption” taking place in the name of “beating the pandemic”. Scrutiny certainly deserves to be directed towards conflicts of interest within members of SAGE and scientific/medical advisors as examined by Dr Zoe Harcombe PhD, a Cambridge mathematics/economics graduate[1,2]. Aided by mainstream media and censorship by tech giants, this group controls the scientific narrative on which Government action has been based, even when the “science” relied upon is at complete odds with the views of many other world-class scientists.

Suppression of science and lack of open debate has impinged enormously on three issues of fundamental significance. Firstly, public fear of Covid has been elevated to levels that are completely out of proportion to the actual danger. A recent peer-reviewed paper by one of the world’s most cited and respected scientist, Professor John Ioannidis of Stanford University, quotes an infection fatality rate (IFR) for Covid of 0.00-0.57% (0.05% for under 70s), far lower than originally feared and no different to severe flu [3]. This paper is published on WHO’s own Bulletin but ignored by UK mainstream media.

Secondly, although deaths are currently running at normal levels, fear is being driven by inflation of Covid “cases” caused by inappropriate use of the Polymerase Chain Reaction (PCR) test [4-7]. This test is hypersensitive and highly susceptible to contamination, particularly when not processed with utmost rigour by properly trained staff. Case inflation also occurs from use of excessive number of rounds of amplification cycles (termed CT) which amplifies non-infectious viral fragments and cross-reacting nucleotides from non-Covid

coronaviruses/other respiratory viruses. These become mis-labelled as Covid. Even Dr Fauci confirms that a positive result using CT above 34 is invalid (Twitter thread, Jeff Nelson @vegsource 30 October 2020) but in the UK CTs may go up to 45, as confirmed by Professor Carl Heneghan of Oxford University's Center for Evidence-Based Medicine: (House of Commons Science & Tech Committee, 17 Sep, 2020 YouTube.) An obvious improvement is to immediately halt any use of CTs above 34 and ensure that for CTs between 25 and 34, two consecutive positive results are required before confirming a case as Covid positive.

According to Professor Brookes, a Health Data Scientist from the University of Leicester, the UK's official data shows no excess deaths due to respiratory infections this season (talkRadio, 'The number of people dying today is the same as it would be any other year', 17 November 2020 YouTube). Instead, excess total deaths have been driven by lack of treatment due to hospital closure/lockdowns and have occurred mostly at home. Whilst there is no question that the first wave of Covid, a then novel virus, was lethal to many, there is no sound evidence of any second wave.

The third and possibly the most consequential suppression of science relates to the narrative that people do not develop immunity following a Covid infection. We know that immunity to SARS-CoV-1 is very durable, persisting for at least 12-17 years [8-10]. Immunologists know that immunity to SARS-Cov-2 is no different. This is confirmed by many eminent scientists including Beda M Stadler, the former Director of the Institute for Immunology at the University of Bern and Professor Emeritus (Ivor Cummins, Ep91 Emeritus Professor of Immunology...Reveals Crucial Viral Immunity Reality, 28 July 2020,

YouTube), and Sucharit Bhakdi, former Chair of Medical Microbiology at the University of Mainz [11]. The human population has encountered and co-existed with myriad coronaviruses throughout evolution. Most of us therefore have cross-reacting T-cells, B cells and antibodies derived from encounters with cold coronaviruses that can recognise SARS-CoV-2 [12-14], in the same way that people “immunised” with cowpox became less susceptible to serious illness from smallpox - as Edward Jenner discovered in 1796. This is why we do not generally die from cold coronaviruses and precisely why so many of us were not susceptible to falling severely ill from Covid earlier this year. Even the chance of passing Covid to your spouse at the height of the pandemic was as low as 17%! [15].

In line with expectations, mediators of robust long-term immune memory, memory B and T-cells have both been firmly established to be produced following even a mild a Covid infection [17,18]. Pouncing on a handful of examples of apparent second Covid infections is irresponsible of the media but suits the false [18] narrative that falling antibody levels lead to loss of immunity. The evidence that immunity lasts is all around us - if this were not so we would see as many people dying of and falling seriously ill with Covid now as we did in March/April, including doctors and nurses.

Pfizer’s vaccination trial data provides further confirmation of the now low rates of prevalence. 94 participants were apparently infected based on PCR positive results (of unknown CT so we cannot be sure they are all genuinely Covid). The placebo group must comprise around 22,000, half the total trial number. This yields an infection rate of, at the very most, 0.4% and makes the chances of escaping infection greater than 99.6% during the trial period. The vaccine might well be 90% “effective”

- although we are yet to learn exactly how this is measured - but the risk of contracting Covid in the first place is self-evidently low. The risk of both contracting and dying from Covid using an IFR of 0.57 (the worst case) was a mere 0.002% based on pessimistic assumptions. Of course, the elderly and other high-risk categories face greater risk, but it is still far less than it was early this year and it will continue to reduce as population immunity builds further.

Hijacking of science by vested interests has resulted in immeasurable harms to society. Lockdowns, meant to save lives but being pushed by narratives that have little basis in science, have themselves caused loss of life, livelihoods, dignity, and humanity. We need to ask how we have got to this sorry state. It seems that only the extrication of science from industry by introduction of independent sources of funding for scientific research institutions, perhaps by levying a brand-new tax on industry, will allow the nation's best scientists an independent voice and put an end to the suppression of good science, together with the mistrust and conflict it generates.

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