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RESEARCH ARTICLE

‘CORONA’-A SCANDAL, A MEDIA PANDEMIC &?

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Abstract

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Introduction:-

According to data from the best-studied countries such as South Korea, Iceland and Germany as well as the cruise ship Diamond Princess, the overall lethality of Covid19 is in the per mille range and thus about ten times lower than initially assumed by the WHO.

A study in Nature Medicine comes to a similar conclusion even for the Chinese city of Wuhan. The initially significantly higher values for Wuhan were obtained because a great many people with mild or no symptoms were not recorded.

50% to 80% of test-positive individuals remain symptom-free. Even among the 70 to 79 year old persons about 60% remain symptom-free, many more show only mild symptoms.

The median age of the deceased in most countries (including Italy) is over 80 years and only about 1% of the deceased had no serious previous illnesses. The age and risk profile of deaths thus essentially corresponds to normal mortality.

Many media reports of young and healthy people dying from Covid19 have proven to be false upon closer inspection. Many of these people either did not die from Covid19 or they in fact had serious preconditions (such as undiagnosed leukaemia).

In the US and most European countries, overall mortality remains within the range of a severe flu season. Normal overall mortality in the US is about 8000 people per day, in Germany it is about 2600 people per day, and in Italy it is about 1800 people per day.

Strongly increased death rates, as in northern Italy, can be influenced by additional risk factors such as very high air pollution and legionella contamination, as well as a collapse in the care of the elderly and sick due to mass panic and lockdown.

In countries such as Italy and Spain, and to some extent Great Britain and the US, an overload of the health care system, notably by the flu, is not unusual. In addition, up to 15% of doctors and nurses are currently in quarantine, even if they develop no symptoms.

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An important distinction concerns the question of whether people die *with* or indeed *from* coronaviruses. Autopsies show that in many cases the previous illnesses were an important or decisive factor, but the official figures usually do not reflect this.

Thus in order to assess the danger of the disease, the key indicator is not the often mentioned number of test-positive persons and deceased, but the number of persons who actually and unexpectedly fell ill with or died of pneumonia.

The often shown exponential curves of corona cases are misleading, since the number of tests also increases exponentially. In most countries, the ratio of positive tests to total tests either remains constant between 5% to 15% or increases only very slowly.

Countries **without** lockdowns and contact bans such as Japan, South Korea and Sweden have not experienced a more negative course of events than other countries. This might call into question the effectiveness of such far-reaching measures.

According to leading lung specialists, invasive ventilation of Covid19 patients is often counterproductive and causes additional damage to the lungs. The invasive ventilation of Covid19 patients is partly done out of fear of spreading the virus through aerosols.

Contrary to original assumptions, however, the WHO determined at the end of March that there is no evidence of aerosol dispersal of the virus. A leading German virologist also found no aerosol and no smear infections in a pilot study.

Many clinics in Europe and the US have been lacking patients and some have had to introduce short-time work. Numerous operations and therapies were cancelled by clinics; even emergency patients sometimes stay at home out of fear of the virus.

Several media have been caught trying to dramatize the situation in clinics, sometimes even with manipulative pictures and videos. In general, many media outlets do not question even doubtful official statements and figures.

The virus test kits used internationally are prone to errors. Several studies have shown that even normal corona viruses can give a false positive result. Moreover, the virus test currently in use has not been clinically validated due to time pressure.

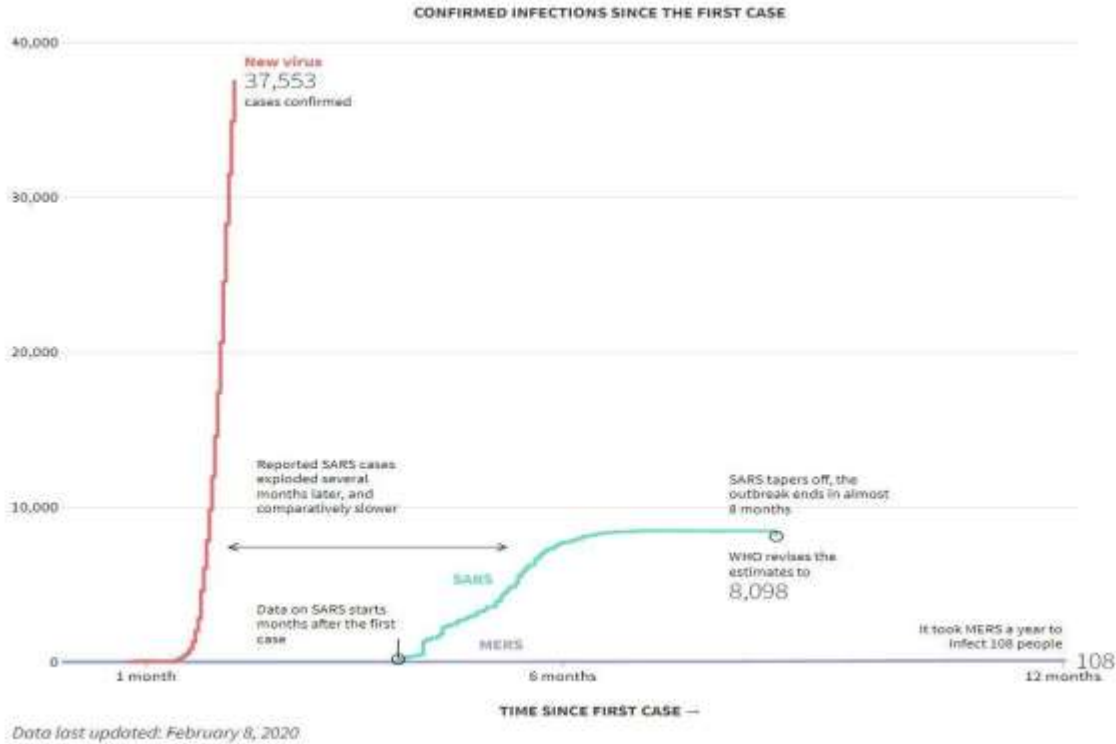
Numerous internationally renowned experts from the fields of virology, immunology and epidemiology consider the measures taken to be counterproductive and recommend a rapid natural immunisation of the general population while protecting risk groups.

The number of people suffering from unemployment, psychological problems and domestic violence as a result of the measures taken has exploded worldwide. Several experts believe that the measures may claim more lives than the virus itself.

NSA whistleblower Edward Snowden warned that the corona crisis is used for the massive and permanent expansion of global surveillance. The renowned virologist Pablo Goldschmidt spoke of a 'global media terror and totalitarian measures'. Leading British virologist Professor John Oxford spoke of a 'media epidemic'.

3 charts that compare coronavirus to previous outbreaks:

The chart below shows the cumulative number of cases starting from the day that symptoms were documented for the first case. When compared to the new virus, the spread of SARS took much longer to gain momentum. Middle East Respiratory Syndrome (MERS) that first emerged in Saudi Arabia in 2012, took eight years to infect almost 2,500 people.



The latest statistics indicate a fatality rate of about 2.2%, but disease experts say the actual rate may be higher or lower as there are likely more unconfirmed cases.

The SARS virus killed about 10% of all infected individuals, while the MERS outbreak identified in 2012 had a fatality rate of around 35%.

FATALITY RATE

For every 50 people that were infected,

MERS killed **17 people**



SARS killed **five people**



and the new coronavirus killed **one**



Experts question whether the new virus shares similarities with seasonal flu, which has a low mortality rate but infects so many people that more than half a million may die from it each year, according to global health estimates.



So here we can get a chance to prove why certain drugs work and antiviral drugs are nearly ineffective over Corona virus.

Medical experts question the current covid19 panic:

It is obvious that experts who had dedicated their whole life in research work are kept out of public discussions and are unheard. The voice is kept away from the public and this is really alarming.

“The important thing is to not stop questioning” – Albert Einstein

All renowned experts raised questions about the current scenarios like Dr. SucharitBhakdi, Dr. Shiva Ayyadurai , John Pilger , Dr. Joel Kettner, Dr. Rashid Buttar to name a few.

April 7, 2020

The latest figures from a special report by the German Robert Koch Institute show that the so-called positive rate (i.e. the number of test positives per number of tests) is increasing much more slowly than the exponential curves shown by the media and was only around 10% at the end of March, a value that is rather typical for corona viruses. According to the magazine Multipolar, there can therefore be no question of a dangerously rapid spread of the virus.

Professor Klaus Püschel, Head of forensic medicine in Hamburg, explains about Covid19: ‘This virus influences our lives in a completely excessive way. This is disproportionate to the danger posed by the virus. And the astronomical economic damage now being caused is not commensurate with the danger posed by the virus. I am convinced that the Corona mortality rate will not even show up as a peak in annual mortality. In Hamburg, for example, not a single person who was not previously ill had died of the virus. All those we have examined so far had cancer, a chronic lung disease, were heavy smokers or severely obese, suffered from diabetes or had a cardiovascular disease. The virus was the last straw that broke the camel’s back, so to speak. Covid-19 is a fatal disease only in exceptional cases, but in most cases it is a predominantly harmless viral infection’.

In addition, Dr. Püschel, a forensic scientist explains: ‘In quite a few cases, we have also found that the current corona infection has nothing whatsoever to do with the fatal outcome because other causes of death are present, for example a brain haemorrhage or a heart attack. Corona in itself is a not particularly dangerous viral disease, says the forensic scientist. He pleads for statistics based on concrete examination results. All speculations about individual deaths that have not been expertly examined only fuel anxiety. Contrary to the guidelines of the Robert Koch

Institute, Hamburg had recently started to differentiate between deaths *with the* and *by the* coronavirus, which led to a decrease in Covid19 deaths.

The German virologist Hendrik Streeck is currently conducting a pilot study to determine the distribution and transmission routes of the Covid19 pathogen. In an interview he explains: 'I took a closer look at the cases of 31 of the 40 people who died in the Heinsberg district and was not very surprised that these people died. One of the deceased was older than 100 years, so even a common cold could have led to death. Contrary to original assumptions, Streeck has not been able to prove transmission via door handles and the like (i.e. so-called smear infections).'

In Switzerland, there was a pronounced wave of influenza at the beginning of 2017. At that time, there were almost 1500 additional deaths in the over 65-year-old population in the first six weeks of the year. Normally, around 1300 people die in Switzerland every year as a result of pneumonia, 95% of whom are over 65 years old. By comparison, a total of 762 deaths with (not caused by) Covid19 are currently reported in Switzerland.

The managing director of a German environmental laboratory suspects that the inhabitants of the northern Italian region of Lombardy are particularly susceptible to viral infections such as Covid19 due to a notoriously high legionella contamination. If the lungs are weakened by a viral infection, as in the current situation, bacteria have an easy job, can negatively influence the course of the disease and cause complications. In Lombardy, regional pneumonia outbreaks had already occurred in the past due to evaporation cooling systems contaminated with legionella.

On the basis of information from China, medical protocols have been defined worldwide that rapidly provide **invasive artificial respiration by intubation** for test-positive intensive care patients. On the one hand, the protocols assume that more gentle non-invasive ventilation through a mask is too weak. On the other hand, there is the fear that the 'dangerous virus' could otherwise spread through aerosols. As early as March, however, German physicians pointed out that intubation can lead to additional lung damage and has an overall poor chance of success.

In the meantime, US physicians have also come forward who describe intubation as 'more harm than good' for patients. Patients often do not suffer from acute lung failure, but rather from a kind of altitude sickness, which is made worse by artificial respiration with increased pressure.

In February 2020, South Korean physicians reported that critical Covid19 patients respond well to oxygen therapy without a ventilator. The US physician mentioned above warns that the use of ventilators must be urgently reconsidered in order not to cause additional damage.

The official US Covid19 projections so far have overestimated hospitalisations by a factor of 8, ICU beds needed by a factor of 6.4, and ventilators needed by a factor of 40.5. Renowned US statistician Nate Silver explains why 'coronavirus case counts are meaningless', unless you know more about the number and way of testing.

The website of Dr. Wolfgang Wodarg, one of the earliest and internationally best known critics of the Covid19 panic, was deleted for a few hours by the German provider Jimdo and only went online again after strong protests. It is not known whether the temporary deletion was due to general complaints or a political instruction. Same is with number of doctors who intend to expose the scam like Dr. Rashid Buttar, Dr. Kauffman etc. whose videos are continuously been deleted by youtube and getting threats from unknown. If everything is okay as per the media and organizations what they are claiming, then *why this act?*

Similar case happened in India with Dr. Biswaroop Chaudhary, who is trying to disclose the scandal through youtube and other social media platform. He met Union Health Minister to address this issue but Health Minister was helpless by saying that they are bound to follow certain International protocol, which is issued by WHO in this case.

The university email address of emeritus professor Dr. Sucharit Bhakdi, who wrote an Open Letter to Chancellor Angela Merkel, was deactivated earlier, but was also reactivated after protests.

On April 2, the Danish Parliament adopted a new law that allows the authorities to block fraudulent websites on Covid19 without an initial court order and to impose a higher penalty on the operators. It is still unclear what this means for generally critical websites about Covid19 and government policy in this regard.

The German author and journalist Harald Wiesendanger writes in an article that his profession is completely failing in the current crisis. How a profession that is supposed to control the powerful as an independent, critical, impartial Fourth Estate can succumb as quickly as lightning to the same collective hysteria as its audience, almost unanimously, and give itself over to court reporting, government propaganda and expert deification: *'It's incomprehensible to me, it disgusts me, I've had enough of it, I dissociate myself from this unworthy performance with complete shame.'*

Currently, more than one third of humanity is in a lockdown, which are more people than lived during the Second World War.

In the US, applications for unemployment benefits have skyrocketed to over six million, a figure unparalleled since the Great Depression of 1929.

April 5, 2020

In a 40-minute interview, the internationally renowned epidemiology professor Knut Wittkowski from New York explains that the measures taken on Covid19 are all counterproductive. Instead of social distancing, school closures, lock down, mouth masks, mass tests and vaccinations, life must continue as undisturbed as possible and immunity must be built up in the population as quickly as possible. According to all findings to date, Covid-19 is no more dangerous than previous influenza epidemics.

The British Medical Journal (BMJ) reports that, according to the latest data from China, 78% of new test-positive individuals show no symptoms. An Oxford epidemiologist said that these findings are very important. He added that if the results are representative, then we have to ask, **'What the hell are we locking down for?'**

Dr. Andreas Sönnichsen, head of the Department of General and Family Medicine at the Medical University of Vienna and chairman of the Network for Evidence-Based Medicine, considers the measures imposed so far to be 'insane'. The whole state is being paralysed just to 'protect the few it could affect'.

In a world first, the Swedish government has announced that it is going to officially distinguish between deaths **'by'** and deaths **'with'** the coronavirus, which should lead to a reduction in reported deaths. Meanwhile, for some reason, international pressure on Sweden to abandon its liberal strategy is steadily increasing.

The Hamburg health authority now has test-positive deaths examined by forensic medicine in order to count only 'real' corona deaths. As a result, the number of deaths has already been reduced by up to 50% compared to the official figures of the Robert Koch Institute.

As early as 2018, the German Doctors Journal reported a 'multitude of pneumonia cases' in northern Italy, which worried the authorities. At the time, contaminated drinking water was suspected to be one of the causes.

According to the latest figures from Switzerland, the most common symptoms of test-positive patients in hospitals are fever, cough and breathing difficulties, while 43% or about 900 people have pneumonia. Even in these cases, however, it is not clear whether it was caused by the coronavirus or by other pathogens. The median age of the test positive deceased is 83 years, the range reaches up to 101 years.

The British project 'In Proportion' tracks mortality **'with'** Covid19 in comparison to influenza mortality and all-cause mortality, which in Great Britain is still in the normal range or below and is currently decreasing.

The medical specialist portal Rxisk points out that various drugs can increase the risk of infection with corona viruses by up to 200% in some cases.

In an interview, NSA whistleblower Edward Snowden warns that Covid19 is **dangerous but temporary**, while the destruction of fundamental rights is **deadly and permanent**.

April 3, 2020

There is very interesting facts to know how the cases are being counted.

In Austria: ‘Do you also count as a corona death if you are infected with the virus but die of something else? Yes, say Rudi Anschober and Bernhard Benka, members of the Corona Task Force in the Ministry of Health.’

There is a clear rule at present: **Died with the corona virus or died from the corona virus both count for the statistics.** No difference is made as to what the patient actually died of. In other words, a 90-year-old man who dies with a fracture of the femoral neck and becomes infected with corona in the hours prior to his death is also counted as corona death; to name but one example.

Germany: The German Robert Koch Institute now advises against autopsies of test-positive deceased persons because the risk of droplet infection by aerosols is allegedly too high. **In many cases, this means that the real cause of death can no longer be determined.**

A specialist in pathology comments on this as follows: ‘Who might think evil of it! Up to now, it has been a matter of course for pathologists to carry out autopsies with appropriate safety precautions even in the case of infectious diseases such as HIV/AIDS, hepatitis, tuberculosis, PRION diseases, etc. It is quite remarkable that in a disease that is killing thousands of patients all over the world and bringing the economy of entire countries to a virtual standstill, only very few autopsy findings are available (six patients from China). From the point of view of both the epidemic police and the scientific community, there should be a particularly high level of public interest in autopsy findings. However, the opposite is the case. Are you afraid of finding out the true causes of death of the positively tested deceased? Could it be that the numbers of corona deaths would then melt away like snow in the spring sun?’

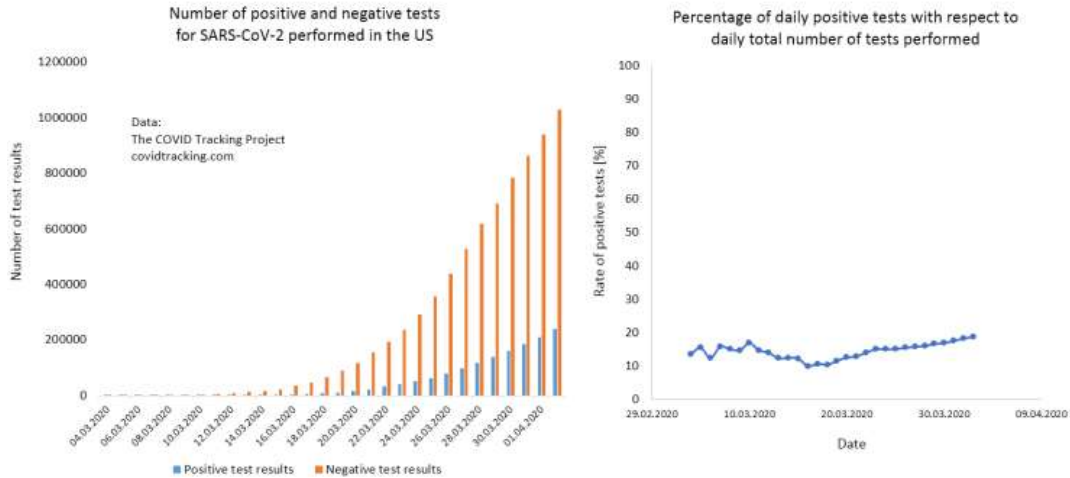
Italy: Russian experts have noticed ‘strange deaths’ in nursing homes in Lombardy. According to newspaper reports, several cases have been registered in the town of Gromo in which alleged corona virus-infected persons simply fell asleep and never woke up again. **No real symptoms of the disease had been observed in the deceased until then.** As the director of the nursing home later clarified in an interview with RIA Novosti, it is unclear whether the deceased were actually infected with the coronavirus, because nobody in the home had been tested for it. In the homes, where medical and nursing teams from Russia are working, corridors, bed rooms and dining rooms are disinfected.

Similar cases have already been reported from Germany: Nursing patients without symptoms of illness die suddenly in the current exceptional situation and are then considered ‘corona deaths’. Here again the serious question arises: Who dies from the virus and who dies from the sometimes extreme measures?

Stanford professor of medicine Dr. Jay Bhattacharya questions the ‘conventional wisdom’ regarding Covid19. The existing measures had been decided on the basis of very uncertain and partly questionable data.

April 2, 2020**USA:**

A Swiss biophysicist has visualized the fact that in the US (as in the rest of the world), it is not the number of ‘infected’ people that is increasing exponentially, but the number of tests. The number of test-positive people in relation to the number of tests remains constant or increases slowly, which appears to speak against an exponential viral epidemic.



Number of positive and negative tests (left) and percentage of positive tests (right) (Scholkmann, US data)

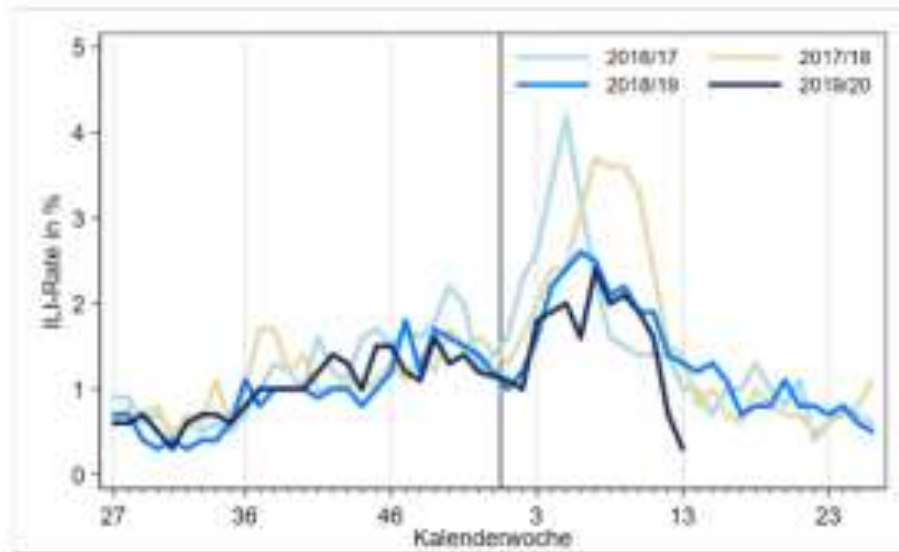
Germany:

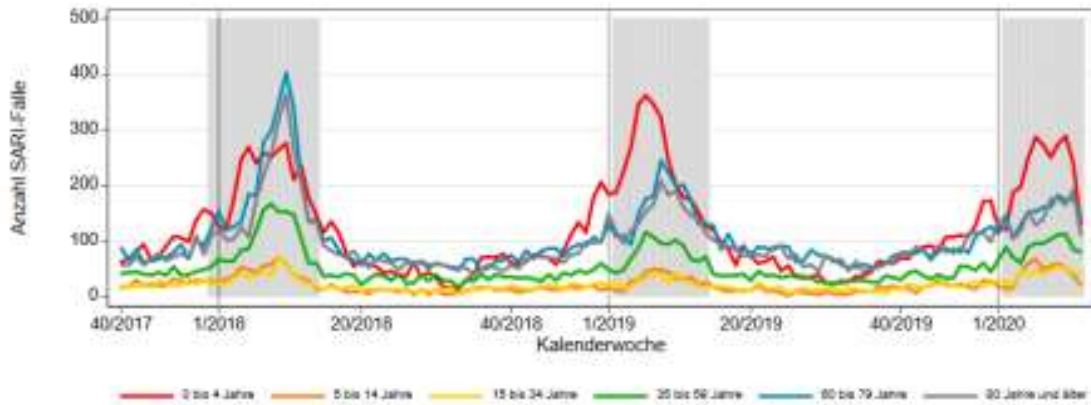
According to the latest influenza report of the German Robert Koch Institute, the number of acute respiratory diseases has ‘fallen sharply nationwide’. The values have ‘dropped in all age groups’.

By March 20, the total number of inpatient cases with acute respiratory diseases had also fallen significantly. In the age group from 80 years and older, the number of cases had almost halved compared to the previous week.

In the 73 hospitals examined, 7% of all cases with respiratory diseases were diagnosed with COVID-19. In the age groups 35-59 years it was 16% and in the age group 60-79 years it was 13% who received a COVID-19 diagnosis.

These figures correspond to those from other countries as well as to the typical prevalence of coronaviruses (5 to 15%).

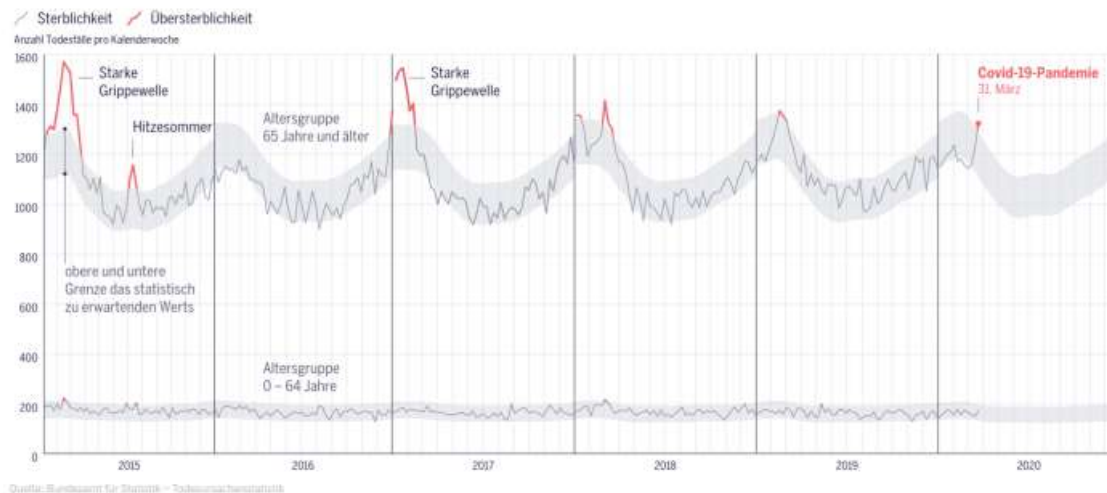




Flu-like diseases in general (left) and acute respiratory diseases in hospitals (right) (Robert-Koch-Institute, weeks 13 and 12)

A Swiss research has presented the current total mortality in comparison with previous years (see graph below). This illustrates that, even if actually increased, the current mortality rate is still below or same as the stronger flu winters of recent years.

Wöchentliche Todesfälle in der Schweiz



Weekly mortality during the year. End date is March 22, not March 31 (TA)

Further information:

The British Imperial College study, which predicted hundreds of thousands of additional deaths but was never published in a journal or reviewed, was based on largely unrealistic assumptions, as has now been shown.

The BBC asks, 'Is coronavirus causing the deaths?' and replies, 'It could be the major cause, a contributory factor or simply present when they are dying of something else'. For example, an 18-year-old man was reported as the 'youngest Corona victim' after a positive test the day before his death. However, the hospital later reported that the young man had died of a serious pre-existing condition.

The European health authority ECDC has published very strict guidelines for handling test-positive or 'presumed test-positive' corpses. In view of the very low mortality rates to date, such guidelines appear questionable from a medical point of view; however, they significantly increase the burden on the health and funeral services, and at the same time have a high media impact.

The ARTE documentary 'Profiteers of Fear' from 2009 shows how the mainly privately financed WHO 'upgraded' a mild wave of influenza (the so-called 'swine flu') to a global pandemic so that vaccines worth several billion dollars could be sold to governments around the world. Some of the protagonists of that time are again prominently represented in the current situation.

April 2, 2020:

Figures from the northern Italian city of Treviso (near Venice) show that, despite 108 test-positive deaths by the end of March, overall mortality in municipal hospitals remained roughly the same as in previous years. This is a further indication that the temporarily increased mortality in some places is more likely to be due to external factors such as panic and collapse than due to the coronavirus alone.

Professor John Oxford of Queen Mary University London, one of the world's leading virologists and influenza specialists, comes to the following conclusion regarding Covid19 'Personally, I would say the best advice is to spend less time watching TV news which is sensational and not very good. Personally, I view this Covid outbreak as akin to a bad winter influenza epidemic. In this case we have had 8000 deaths this last year in the 'at risk' groups viz over 65% people with heart disease etc. I do not feel this current Covid-19 will exceed this number. *We are suffering from a media epidemic!*'

April 1, 2020:

On the situation in Italy:

Italian doctors reported that they had already observed severe cases of pneumonia in northern Italy at the end of last year. However, genetic analyses now show that the Covid19 virus only appeared in Italy in January of this year. 'The severe pneumonia diagnosed in Italy in November and December must therefore be due to a different pathogen,' a virologist noted. This once again raises the question what role the Covid19 virus, or other factors, actually play in the Italian situation.

On March 30, in the list of Italian doctors who died 'during the Corona crisis', many of whom were up to 90 years old and didn't actively participate in the crisis at all. Today, all years of birth on the list have been removed, a strange procedure, is'nt it?

In recent weeks, most of the Eastern European nurses who worked 24 hours a day, 7 days a week supporting people in need of care in Italy have left the country in a hurry. This is not least because of the panic-mongering and the curfews and border closures threatened by the 'emergency governments'. As a result, old people in need of care and disabled people, some without relatives, were left helpless by their caretakers.

Many of these abandoned people then ended up after a few days in the hospitals, which had been permanently overloaded for years, because they were dehydrated, among other things. Unfortunately, the hospitals lacked the personnel who had to look after the children locked up in their apartments because schools and kindergartens had been closed. This then led to the complete collapse of the care for the disabled and the elderly, especially in those areas where even harder measures were ordered, and to chaotic conditions.

The nursing emergency, which was caused by the panic, temporarily led to many deaths among those in need of care and increasingly among younger patients in the hospitals. These fatalities then served to cause even more panic among those in charge and the media, who reported, for example, 'another 475 fatalities'. The dead are being removed from hospitals by the army', accompanied by pictures of coffins and army trucks lined up.

However, this was the result of the funeral directors' fear of the 'killer virus', who therefore refused their services. Moreover, on the one hand there were too many deaths at once and on the other hand the government passed a law that the corpses carrying the coronavirus had to be cremated. In Catholic Italy, few cremations had been carried out in the past. Therefore there were only a few small crematoria, which very quickly reached their limits. Therefore the deceased had to be laid out in different churches.

In principle, this development is the same in all countries. However, the quality of the health system has a considerable influence on the effects. Therefore, there are fewer problems in Germany, Austria or Switzerland than in Italy, Spain or the USA. However, as can be seen in the official figures, there is no significant increase in the mortality rate. Just a small mountain that came from this tragedy.

Hospital situation in the US, Germany and Switzerland:

The US television station CBS was caught using footage from an Italian intensive care unit in a piece on the current situation in New York. In fact, dozens of recordings by citizen journalists show that it is currently very quiet in the hospitals on the US East and West Coast, described as 'war zones' by the media. Even the 'corpse refrigerator trucks' prominently shown in the media are unused and empty.

Contrary to media reports, the register of German intensive care units also shows no increased occupancy. An employee of a Munich clinic explained that they had been 'waiting for weeks for the wave to hit', but that there was 'no increase in patient numbers'. He said that the politicians statements did not correspond with their own experience, and that the 'myth of the killer virus' could 'not be confirmed'.

Other medical notes:

The director of the University Medical Center Hamburg, Dr. Ansgar Lohse, demands a quick end to curfews and contact bans. Kitas and schools should be reopened as soon as possible so that children and their parents can become immune through infection with the corona virus. The continuation of the strict measures would lead to an economic crisis, which would also cost lives, said the physician.

In Spain, 15% of test-positives are doctors and nurses. Although many of them show no symptoms, they have to go into quarantine, causing the Spanish healthcare system to collapse.

The latest data from Norway, evaluated by a PhD in environmental toxicology, again show that the rate of test-positives does not increase – as would be expected in the case of an epidemic – but fluctuates in the normal range for coronaviruses between 2 and 10%. The average age of the test-positive deceased is 84 years, the causes of death are not publicly reported, and there is no excess mortality.

Sweden, which has so far managed without radical measures and has not reported increased mortality (similar to Asian countries such as Japan or South Korea), is remarkably put under pressure from the international media to change its strategy. Similarly, data from New York State show that the hospitalization rate of test-positive individuals could be more than twenty times lower than originally assumed.

An article on the specialist portal DocCheck deals with the problem of ventilating test-positive patients. In test-positive patients, simple ventilation through a mask is officially advised against, among other things to prevent the coronavirus from spreading through aerosols. Therefore, test positive intensive care patients are often intubated directly. However, intubation has poor chances of success and often leads to additional damage to the lungs (so-called ventilator-induced lung damage).

Reports on political developments:

Online petitions have been launched in several countries to end curfews and other encroachments on basic rights. **At the same time, critical video contributions, even by doctors, are increasingly being deleted.** In Berlin, a registered event on fundamental rights, at which the German constitution was distributed, was terminated by the police.

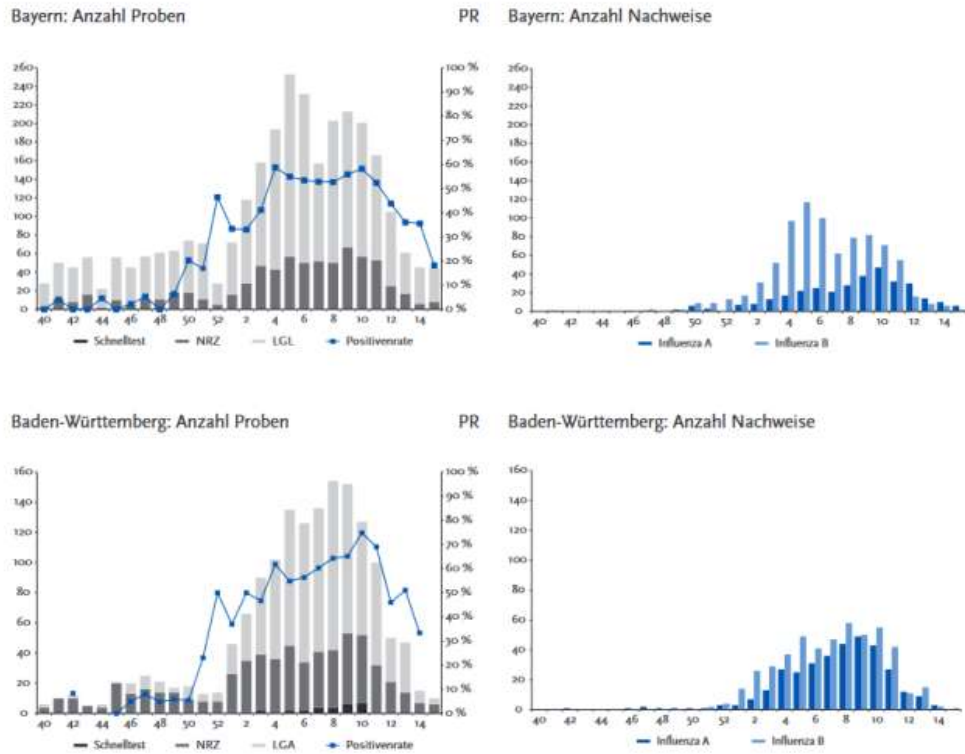
March 31, 2020 (I):

Dr. Richard Capek and other researchers have already shown that the number of test-positive individuals in relation to the number of tests performed **remains constant** in all countries studied so far, which speaks **against** an exponential spread (epidemic) of the virus and merely indicates an exponential increase in the number of tests.

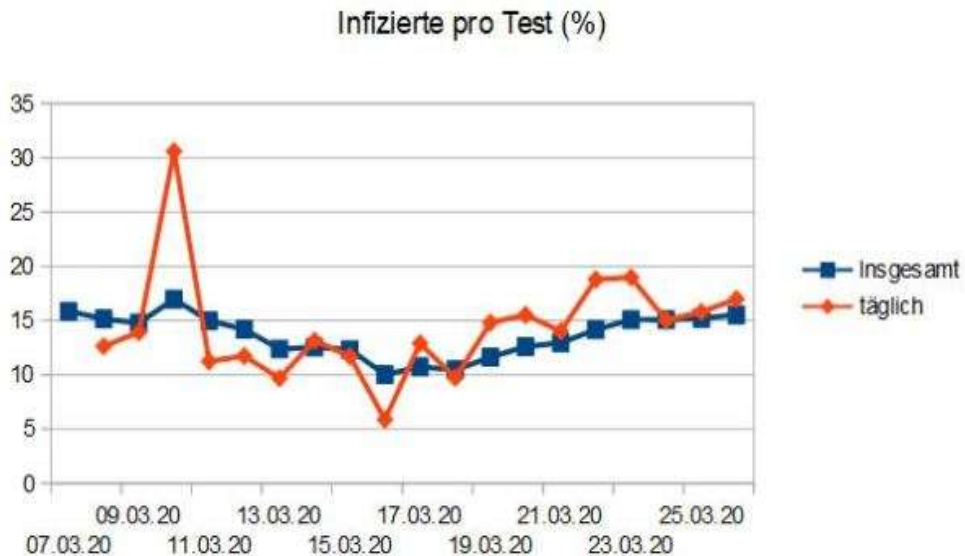
Depending on the country, the proportion of test-positive individuals is between 5 and 15%, which corresponds to the usual spread of corona viruses. **Interestingly, these constant numerical values are not actively communicated (or even removed) by authorities and the media.** Instead, exponential but irrelevant and misleading curves are shown without context.

Such behaviour, of course, does not correspond to professional medical standards, as a look at the traditional influenza report of the German Robert Koch Institute makes clear (see chart below). Here, in addition to the number of detections (right), the number of samples (left, grey bars) and the positive rate (left, blue curve) are shown.

This immediately shows that during a flu season the positive rate rises from 0 to 10% to up to 80% of the samples and drops back to the normal value after a few weeks. In comparison, Covid19 tests show a constant positive rate in the normal range (see below).



Left: Number of samples and positive rate; right: number of detections (RKI, 2017).



Covid19 positive rate (Dr. Richard Capek, US data)

A graphical analysis of the European monitoring data impressively shows that, irrespective of the measures taken, overall mortality throughout Europe remained in the normal range or below by March 25, and often significantly below the levels of previous years. Only in Italy (65+) was the overall mortality rate somewhat increased (probably for several reasons), but it was still below previous flu seasons.

The president of the German Robert Koch Institute confirmed again that pre-existing conditions and actual cause of death **do not play a role** in the definition of so-called ‘corona deaths’. From a medical point of view, such a definition is clearly misleading. It has the obvious and generally known effect of putting politics and society in fear.

In Italy the situation is now beginning to calm down. As far as is known, the temporarily increased mortality rates (65+) were rather local effects, often accompanied by mass panic and a breakdown in health care. A politician from northern Italy asks, for example, how is it possible that Covidpatients from Brescia are transported to Germany, while in the nearby Verona two thirds of intensive care beds are empty?

In an article published in the **European Journal of Clinical Investigation**, Stanford professor of medicine John Ioannidis criticizes the ‘harms of exaggerated information and non-evidence-based measures’.

A Chinese study published in the **Chinese Journal of Epidemiology** in early March, which indicated the unreliability of the Covid19 virus tests (approx. 50% false-positive results in asymptomatic patients), has since been withdrawn. The lead author of the study, the dean of a medical school, did not want to give the reason for the withdrawal and spoke of a „sensitive matter,, which could indicate political pressure, as an NPR journalist noted. Independent of this study, however, the unreliability of so-called PCR virus tests has long been known. In 2003, for example, a mass infection in a Canadian nursing home with SARS corona viruses was found, which later turned out to be common cold corona viruses (which can also be fatal for risk groups).

March 30, 2020 (I)

In Germany, some clinics can no longer accept patients – not because there are too many patients or too few beds, but because the nursing staff have tested positive, although in most cases they hardly show any symptoms. This case illustrates again how and why health care systems are getting paralysed.

In a German retirement and nursing home for people with advanced dementia, 15 test-positive people have died. However, surprisingly many people have died **without showing symptoms of corona**. A German medical specialist informs: ‘From my medical point of view, there is some evidence that some of these people may have died as a result of the measures taken. People with dementia get into high stress when major changes are made to their everyday lives: isolation, no physical contact, possibly hooded staff.’ Nevertheless, the deceased are counted as ‘corona deaths’ in German and international statistics. In connection with the ‘corona crisis’, it is now also possible to die of an illness without even having its symptoms.

Professor Gérard Krause, head of the Department of Epidemiology at the German Helmholtz Centre for Infection Research, warns on German public television ZDF that the anti-corona measures could lead to more deaths than the virus itself.

Various media reported that more than 50 doctors in Italy have already died during the corona crisis, like soldiers in a battle. A glance at the corresponding list, however, shows that most of the deceased are retired doctors of various kinds, including 90-year-old psychiatrists and pediatricians, many of whom may have died of natural causes.

An extensive survey in Iceland found that 50% of all test-positive persons showed ‘no symptoms’ at all, while the other 50% mostly showed ‘very moderate cold-like symptoms’. According to the Icelandic data, the mortality rate of Covid19 is in the **per mille** range, i.e. in the flu range.

The British journalist Peter Hitchens writes, there’s powerful evidence that this great panic is foolish. Yet our freedom is still broken and our economy crippled.

March 30, 2020 (II):

In several countries, there is increasing evidence in relation to Covid19 that the treatment could be worse than the disease.

On the one hand, there is the risk of so-called nosocomial infections, i.e. infections that the patient, who may only be mildly ill, acquires in hospital:

It is estimated that there are approximately 2.5 million nosocomial infections and 50,000 deaths per year in Europe. Even in German intensive care units, about 15% of patients acquire a nosocomial infection, including pneumonia on artificial respiration. There is also the problem of increasingly antibiotic-resistant germs in hospitals.

Another aspect is the certainly well-intentioned but sometimes very aggressive treatment methods that are increasingly used in Covid19 patients. These include, in particular, the administration of steroids, antibiotics and anti-viral drugs (or a combination thereof). Already in the treatment of SARS-1 patients, it has been shown that the outcome with such treatment was often worse and more fatal than without such treatment.

March 29, 2020:

DrSucharitBhakdi, Scientist &Professor Emeritus of Medical Microbiology in Mainz, Germany, wrote an Open Letter to German Chancellor Angela Merkel, calling for an urgent reassessment of the response to Covid19 and asking the Chancellor five crucial questions which is now available in social media(previously it was deleted by the administration from all the platform)

The latest data from the German Robert Koch Institute shows that the increase in test-positive persons is proportional to the increase in the number of tests, **i.e. in percentage terms it remains roughly the same**. This may indicate that the increase in the number of cases is mainly due to an increase in the number of tests, and not due to an ongoing epidemic.

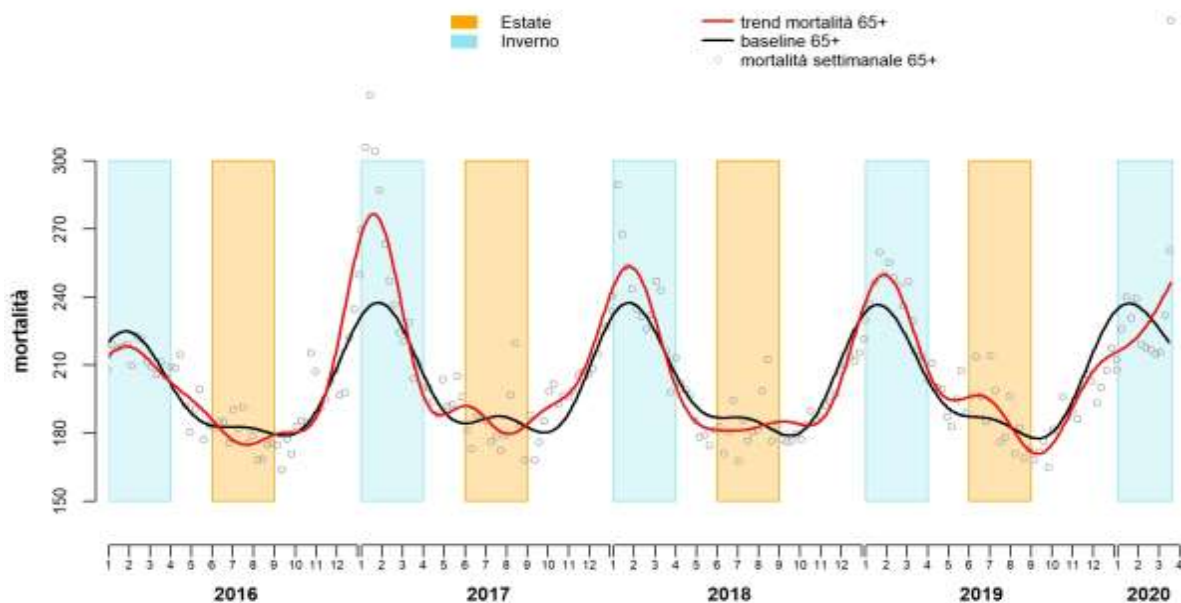
The Milan microbiologist Maria Rita Gismondo calls on the Italian government to stop communicating the daily number of ‘corona positives’ as these figures are ‘fake’ and put the population in unnecessary panic. The number of test-positives depends very much on the type and number of tests and says nothing about the state of health.

March 28, 2020:

A new study by the University of Oxford concludes that Covid19 may already have existed in the UK since January 2020 and that half of the population may already be immunised, with most people experiencing no or only mild symptoms. This would mean that **only one in a thousand people** would need to be hospitalised for Covid19. (Study)

British media reported on a 21 year old woman who died of Covid19 without any previous illnesses. However, it has since become known that the woman did not test positive for Covid19 and died of a heart failure. The Covid19 rumor had arisen because she had a slight cough.

March 27, 2020 (I):

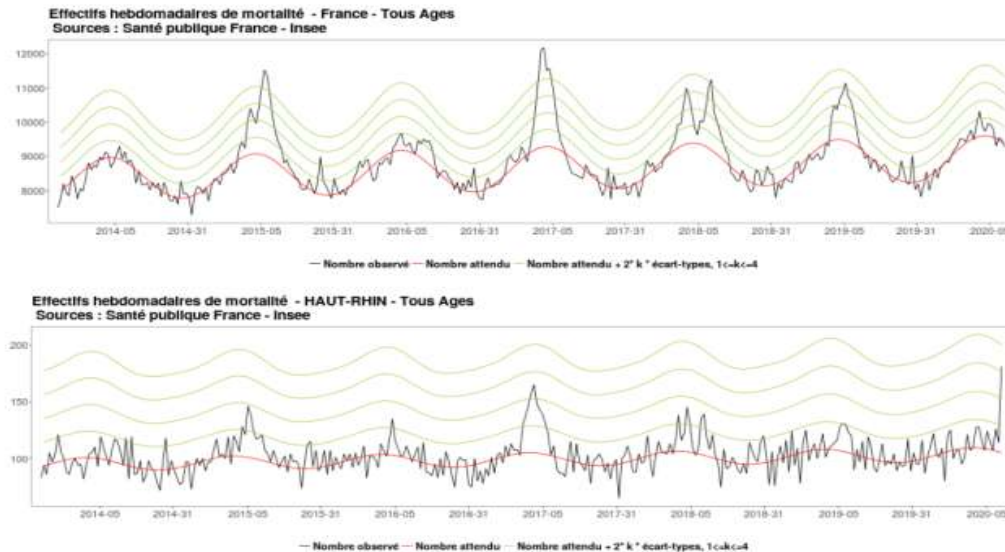


Italy:

Italy: Total mortality 65+ years (red line) (*MdS / 14 March 2020*)

France:

According to the latest data from France, overall mortality at the national level remains within the normal range after a mild influenza season. However, in some regions, particularly in the north-east of France, overall mortality in the over-65 age group has already risen sharply in connection with Covid19 (see figure below).

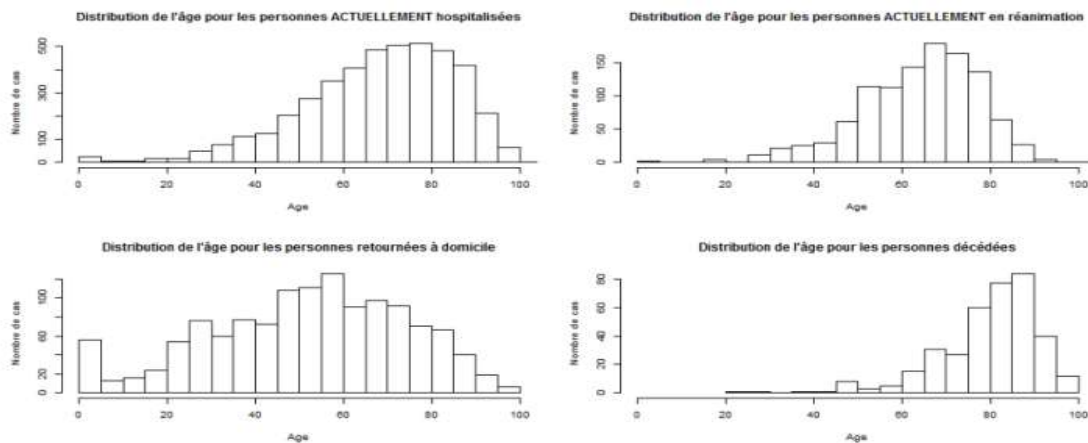


France: Total mortality at national level (above) and in the severely affected Haut-Rhin department (*SPF / 15 March 2020*)

France also provides detailed information on the age distribution and pre-existing conditions of test-positive intensive care patients and deceased patients (see figure below):

1. The average age of the **deceased** is 81.2 years.
2. 78% of the deceased were over 75 years old; 93% were over 65 years old.
3. 2.4% of the deceased were under 65 years of age and had no (known) previous illness
4. The average age of **intensive care patients** is 65 years.
5. 26% of intensive care patients are over 75 years old; 67% have previous illnesses.
6. 17% of intensive care patients are under 65 years of age and have no previous illnesses.

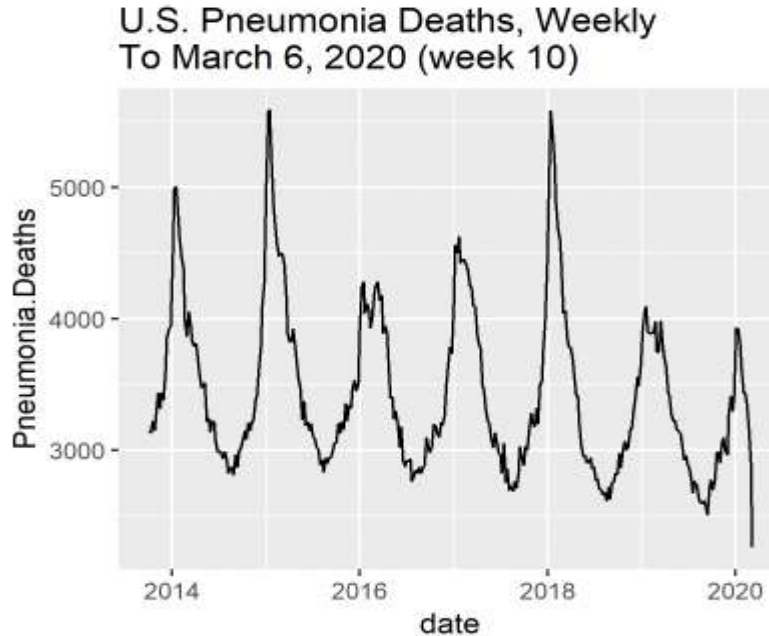
The French authorities add that the share of the (Covid-19) epidemic in overall mortality remains to be determined.



Age distribution of hospitalized patients (top left), intensive care patients (top right), patients at home (bottom left), and the deceased (bottom right). Source: *SPF / 24 March 2020*.

USA:

Researcher Stephen McIntyre has evaluated the official data on deaths from pneumonia in the US. There are usually between 3000 and 5500 deaths **per week** and thus significantly more than the current figures for Covid19. The **total number** of deaths in the US is between 50,000 and 60,000 per week. (Note: In the graph below, the latest figures for March 2020 have not yet been fully updated, so the curve is slumping).



USA:Deaths from pneumonia per week (CDC/McIntyre)

Other topics:

1. A preliminary study by researchers at Stanford University showed that 20 to 25% of Covid19-positive patients tested additionally positive for other influenza or cold viruses.
2. The number of applications for unemployment insurance in the US skyrocketed to a record of over three million. In this context, a sharp increase in suicides is also expected.
3. Spanish media report that the antibody rapid tests for Covid19 only have a sensitivity of 30%, although it should be at least 80%.
4. A study from China in 2003 concluded that the probability of dying from SARS is 84% higher in people exposed to moderate air pollution than in patients from regions with clean air. The risk is even 200% higher among people from areas with heavily polluted air.
5. The German Network for Evidence-Based Medicine (EbM) criticizes the media reporting on Covid19. The media coverage does not in any way take into account the criteria of evidence-based risk communication that we have demanded. The presentation of raw data without reference to other causes of death leads to an overestimation of the risk.

March 27, 2020 (II):

German researcher Dr. Richard Capek argues in a quantitative analysis that the 'Corona epidemic' is in fact an 'epidemic of tests'. Capek shows that while the number of tests has increased exponentially, the proportion of infections has remained stable and mortality has decreased, which speaks **against** an exponential spread of the virus itself.

German Virology professor Dr. Carsten Scheller from the University of Würzburg explains in a podcast that Covid19 is definitely comparable with influenza and has so far even led to fewer deaths. Professor Scheller suspects that the exponential curves often presented in the media have more to do with the **increasing number of tests** than with an unusual spread of the virus itself. For countries like Germany, Italy is less of a role model than Japan and South Korea. Despite millions of Chinese tourists and only minimal social restrictions, these countries have not yet

experienced a Covid19 crisis. One reason for this could be the wearing of mouth masks: This would hardly protect against infection, but would limit the spread of the virus by infected people.

The two Stanford professors of medicine, Dr. Eran Bendavid and Dr. Jay Bhattacharya, explain in an article that **the lethality of Covid19 is overestimated** by several orders of magnitude **and is probably even in Italy only at 0.01% to 0.06%** and thus below that of influenza. The reason for this overestimation is the greatly underestimated number of people already infected (without symptoms). As an example, the fully tested Italian community of Vo is mentioned, which showed 50 to 75% symptom-free test-positive persons.

Dr. Wolfgang Wodarg, one of the early and vocal critics of a „Covid19 panic“, was provisionally excluded by the board of **Transparency International Germany**, where he headed the health working group. Wodarg had already been severely attacked by the media for his criticism.

Questions to be raised:

Ques-1 Why the panic of corona virus? Projection vs Reality?

- U.S Centre for disease Control and Prevention(CDC) predicted in the month of February that 200,000 to 1.7 million deaths due to corona virus this season in US alone. In contrast the total flu (Covid-19 is also Flu) death this season is about 20000 to 50000 which is more or less same than the number of flu death in the previous four seasons (2018, 2017, 2016, 2015)

Flu Hospitalization in U.S.A

2016-2017: 500000

2017-2018: 800000

2018-2019: 500000

2019-2020: 525000

If we extrapolate the US model to India, the total corona deaths should have been between one lakh to seventy lakhs. In contrast the total Covid-19 death so far is around 1000 (till 28th April) and 80% of them were having comorbid conditions and average age more than 60 years. Here we must keep in mind the average life expectancy of India is 68 Yrs (Source: World Bank). Similarly ahead in this article you will see even in Italy there is no excess death this season. Infact every year in winter the ICU patients are 85%-90% approx.

Ques-2 Now the question arises how do we get to know whether a person is a patient of corona virus or covid19?

-There is only one way-rtPCR Test-*Reverse Transcription Polymerase Chain Reaction Test*- a test kit by which you can diagnose whether a patient has contracted coronavirus or not. Whenever a machine or gadget is bought, whether car, camera or laptop, a manufacture's manual is provided. Similarly, when artPCR kit is bought, a manufacturer's manual will be provided. If you look at the manual it clearly says under Regulatory Status – 'For Research Use Only, Not for the Use in Diagnostic Purpose.

It is very clearly mentioned that it is only for research and not to be used for diagnostic purpose. This is the manufacturer's mandate. Not only the manufacturer's mandate, it has also been said by the inventor of this kit, Kary Mullis, who is a Noble Prize winner.

Why this is not for diagnostic purpose?

The answer to this question is that- specificity of this test kit is at the most 99%. Specificity means that you can subject any random 100 healthy persons to undertake this test, and then it will declare any one person as false-positive. This was proved on 18th March 2020 in Iceland. On the 18th, this test was carried out on 1800 healthy people and 19 people were identified as coronavirus patients. This is when the test kit was functional with full efficiency.

If we listen to the advice of White House then the coordinator of corona virus in the White House, Dr. Birx, is of the opinion that the kit has 50% chance of proving false. That means every second test could be proved wrong. For this very reason in Finland on 20th March, the health ministry in Finland rejected this test kit.

To understand the confusion, we have to turn some pages of the medical journal. According to the American Journal of Medical Association of 27th Feb 2020, 4 patients of Wuhan were tested with this kit. They were declared corona

virus negative by this test kit just before being released from the hospital. They were discharged from hospital and allowed to go home. After about 13 days, they were tested with the same kit and were discovered to be corona-positive.

What does this mean? Either they were never negative in the first case and they had coronavirus, secondly, they were cured but again contracted infection on reaching home, thirdly, their body is coronavirus free and the test is wrong, hereby meaning that there is no conclusive answer with anyone.

Now let us move on to 4th March, The Lancet - a very important medical journal. There is a case study of a patient in Singapore in this journal. This patient was taken to the hospital in high fever, where he was tested for dengue and declared dengue-positive, for which treatment began. The doctor decided to test him for corona virus and was found to be coronavirus -positive as well. The question is whether to consider him a dengue patient or a coronavirus patient? Was it false positive in both the cases? Simply put, there can be no conclusive answer.

Let us move onto 5th March, New England Journal of Medicine - the first patient to get Coronavirus in the U.S. A sample was taken from his nose and it was tested corona positive. A sample from his mouth was tested corona-negative. It is up to you to draw your conclusion. One can only say that the reliability of this test is zero. Even the founder of Cochrane Collaboration Peter Gøtzsche had written in a report in the British Medical Journal of the 6th March wherein he stated that the only way to come out of the present environment is by removing the testing-kit. This testing kit is the root cause of all problems.

Actually, Dr. BiswaroopRoyChaudhary has also invented a test kit by which by sitting at home you can determine whether you are a corona patient or not. Are you interested? This test only requires 15 seconds to find out whether you are a corona patient or not. Your 15 seconds starts now. Akkad bakkadbambebo ,Assinabbepooresau, SaumeinnikladhaagaChornikalkebhaaga. The finger is pointing towards you at the end of this counting, that means you are a coronavirus patient. If there are 10 people and you want to find out the patient, then it is very simple. Just memorize this counting style and wherever the finger point, that person is the patient. You will say this is a big joke. This is a fluke.

Then what will you believe in – science or fluke? What is the meaning of science – a manufacturer’s manual, or inventor? All medical journals?

Who is recommending this test kit?

Only organization who is doing it is WHO (World Health Organisation) who was investigated by PACE-Parliamentary Assembly of Council of Europe 10 years ago for the pandemic scandal. Remember about 10 or 11 years ago there was a similar kind of situation and then the villain was H1N1 pandemic. After a few months the Director of WHO let out some secrets to unearth a big medical scam. So to adhere to any advice from such an organization is a sin.

Ques- 4 The question is if this is a scam then why are so many people dying in the world?

- Nearly 11500 (as on 31st March 2020) people have died in Italy in 2 months. Will you follow the **media** or the health ministry of Italy? Besides this, the summary report of the National Health Institute of Italy dated 20th March 2020, states that –

48.6% people had 3 other ailments besides corona,
26.6% people had 2 other ailments besides corona,
23.5% patients had 1 other ailment other than corona.
And only 1.2 % had corona.

There is a difference- dying **with corona** virus or dying **from corona**.

They mean that 10-12% people died from corona virus and the rest died due to some other disease. If not yet convinced then please visit website-euromomo.eu, where you will find data of the mortality rates of the last 5 years within Europe. You can see mortality rate in Italy or any other country during the last 5 years is almost the same. The only difference is that this time each death figure was reported in real time through media and panic was created. The question is what to do in this situation. What is the media saying, what is the public saying? You have a choice.

Actually UK govt in January 19 released a statement that 22 Lakhs death in USA and 5 lakhs deaths in UK will occur due to corona. A special status was given to coronavirus-HCID (High Consequence Infectious Disease). Now two months later, after compiling results from all over the world UK govt has realized that coronavirus is not deadly as previously projected and can be treated in any hospital or clinic. On 19th March they removed coronavirus from HCID20 and put into normal virus. But this fact was made to hide from public.

On 26th March the New England Journal of Medicine and 27th March Research Paper in The Lancet, reported that this Corona virus is not so deadly as was expected.

Ques-9. Not a single extra death due to Covid 19 across the World?

-Looking at the above data from above and directly from respective Government website we can see there is no excess mortality in this season in US or Italy and in fact it is lower the five year average in case of UK. Similar trend can be seen in all European countries through *euromomo.eu*.

In India every year respiratory infarction (Influenza like illness) kills nearly 3,50,000 people i.e regularly 1000 deaths every day due to influenza like illness. Now if you compare the total death of COVID-19 patients till now (not every death is due to corona itself, it could be due to the side effects of medications as explained below), it is coming to be a mere fraction of the total death due to ILI.

Ques-10. It is impossible to stop corona virus with lockdown because...

- 1) 80% of the corona virus carrier are asymptomatic and so cannot be detected through present thermal screening method, employed initially airport and subsequently in colonies etc.
- 2) Among the symptomatic COVID patients 57% do not have fever.
- 3) The present thermal scanner used is the industrial thermal scanner with an acceptable error of -10 F.

If we combine the above three points its conclusive that 95% of the corona carrier will never be detected with the present mass screening strategy employed since last week of January 2020.

So according to the Oxford model, inspite of the lockdown 50% of the UK population is already infected, leading to developing "herd immunity" which will finally lead to protection from Corona Virus deaths. The same scenario can be assumed for India as well.

Ques-11 If not corona, what is the true cause of death among COVID-19 patients?

Three important facts:

1. According to JAMA (27 March 2020), majority of the COVID-19 death is related to myocardial injury.
2. According to ACC (29 March 2020), anti-malaria drug (hydroxychloroquine) and antibiotics (azithromycin) causes QT prolongation leading to dangerous abnormal heart rhythms.
3. On 29th March, Dr. Utpal Barman, a senior anesthetist from Guwahati complained of chest pain after taking anti malaria drug (as a preventive measure from COVID-19) leading to death due to cardiac arrest. From the above three points we can conclude that the death among the COVID-19 patients may be due to the treatment protocol of antimalarial and antibiotic.

It's a massive scandal played by fooling and creating panic. In the coming days, it will be clear who is/are the real culprits behind this script but media is also the major panic creator among the people.

The editorial board of WSJ says-

'The coronavirus pandemic will offer many lessons in what to do better to save more lives and do less economic harm the next time. But there's already one way to ensure future pandemics are less deadly: Reform or defund the World Health Organization (WHO)'.

In a wrap, it's up to you all to think is it really a virus? A trap? Tool for economic crisis? Whatever the conspiracy may be behind. We all are in dark.