

The danger of vaccines, Fraud and misrepresentation in the medical field

The Covid-19 farce - DSalud

There is not and never has been a pandemic disease caused by a coronavirus called **SARS-CoV-2**; moreover, its existence and, therefore, its supposed "variants" have never been proven. And the worst thing is that even if such a coronavirus did exist, all the political and health measures taken over the last two years - masks, confinements, social distance, "Covid passport", drugs and vaccines - have been - and remain - totally meaningless. It is simply a gigantic set-up that has been years in the making, has been believed by the vast majority of society and is part of the attempt to impose a *New World Order*. *Covid-19* was just the "key" to set in motion the *Great Reboot* or *Great Reset* that wants to do away with democratic systems and force people to accept what they call the "new normal". We explain it in an article dedicated to it in this same issue of the magazine, which was, by the way, the first publication in the world to denounce the farce in a global way, documenting it rigorously and extensively. So let's see a brief schematic summary of what we have published, remembering that anyone wishing to read all the information - a hundred or so reports and numerous news items - should subscribe to our website - www.dsalud.com - as from 1 January 2022 all its content will be accessible only to subscribers. It remains to add that this brief summary basically corresponds to the news and reports written -among others- by our colleagues Antonio Muro, Jesús García Blanca and the undersigned, so some of the paragraphs are quoted verbatim.



Let us be clear and concise: Covid-19, the alleged pandemic disease blamed on an alleged coronavirus called SARS-CoV-2, is a complete farce and here are the reasons why:

1) There is not and never has been a pandemic!

The United Nations Population Fund stated on 8 December 2021 that **266,504,411 "cases"** of *Covid-19* had been recorded in the world and that **5,268,849** people had died from it (<https://www.unfpa.org/es/data/world-population-dashboard>). Well, since there are 7.875 billion inhabitants on Earth, according to the same organisation, **3.38% would have been infected and 0.066% would have died**. In short, after almost two years of the supposed pandemic, 96.62% of the population has not been "infected" and 99.93% has survived such a "dangerous virus."

That is accepting that the official figures are real when this is not even true because when they talk about "confirmed cases" of infection what they are reflecting is how many people have tested "positive" for the tests and the reliability of these tests is **ZERO** as we have explained extensively on several occasions and we will comment on later.

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And when they talk about deaths "by" *Covid-19* they are reflecting how many people tested positive after death and what this would indicate - assuming they were credible, which they are not - is that they died "with" Covid and not "by" Covid. In fact, the vast majority of the little more than five million deaths blamed on *SARS-CoV-2* were people over 70-80 years of age, suffering simultaneously from several "diseases", multi-medicated and with a very deteriorated immune system. Every medical professional knows that there is only one acceptable way to know what someone has died of and that is by performing an autopsy. To claim that someone has died "from" Covid-19 just because they tested positive to an antigen test or a PCR is a real mockery, a joke that was only possible because autopsies were expressly **discouraged/prohibited** from the beginning by the *World Health Organisation (WHO)*, claiming -demagogically and falsely- the "dangerousness" of this act to the astonishment -publicly expressed- of a multitude of pathologists. Everything indicates that the *WHO* banned autopsies in the world precisely so that it could claim that all those who tested positive for *Covid-19* also died from Covid-19 and no one could question this through forensic analysis. Moreover, there is no record that the virus has ever been found in a corpse and cultured to test its pathogenicity.

In short, and even accepting the official figures of those supposedly "infected" and "killed by" Covid, it cannot be said that there is a dangerous coronavirus in the world that has caused a pandemic, because officially - and we stress - **the survival rate is 99.93%**!

2) Under the old definition, *Covid-19* could not have been considered a pandemic disease.

Covid-19 was declared a pandemic disease by the *WHO* on 11 March 2020 - on 30 January it had already been considered "*a public health emergency of international concern*" - and this was possible because eleven years earlier - in May 2009 - the *WHO* decided **to change the criteria for declaring a pandemic** and thus more easily impose its proposals and measures on governments, suggesting that this "pandemic" has been planned for many years.

In fact, the *WHO* had already warned of the danger of many different viruses in just a few decades: *HIV* blamed for AIDS, the *Aphthovirus* blamed for foot-and-mouth disease, *SARS-CoV* blamed for *Severe Acute Respiratory Syndrome*, *H5N1* supposed to have caused "bird flu", the *Pandemic H1N1/09* virus said to have caused the alleged influenza A pandemic in humans, *MERS-CoV* blamed for *Middle East Respiratory Syndrome*, *Ebola* virus and *Zika* virus. Not to mention the "re-super-super-dangerous" prions that "forced" the execution of tens of millions of cows.

Such "health warnings" were also a farce - as time has shown - and if society accepted them it is because it naively believed - and still believes - that the *WHO* is a scientific, rigorous, serious and reliable body, ignoring the fact that today it is controlled by a small group of people, entities and companies that call themselves altruistic and philanthropic and provide 82% of its budget (the states only contribute 18% to the *WHO*). These philanthro-capitalist entities include the *Bill and Melinda Gates Foundation*, the *GAVI Alliance* - also controlled by the Gates family and in which the current *WHO* Director-General **Tedros Adhanom Ghebreyesus** worked -, *TEPHINET* - a network for intervention in Epidemiology and Public Health training programmes created in 1980 by the *WHO* itself but controlled by **Bill Gates** as the main "donor" -, the *United States Agency for International Development (USAID)* and the *Epidemics Intelligence Service (EIS)*, a special division of the *US Centers for Disease Control (CDC)* with some 2,000 agents in key positions in health services and other state departments, international agencies, schools, universities and private institutions in the US, as well as in many other countries, including Spain, which it influences primarily through the *Carlos III Health Institute* in Madrid, created in 1986.

For three decades, Bill Gates has been creating a tight network of health organisations that he controls both through investments and "donations", and his intention - publicly confessed - is to inoculate the entire population of the planet with vaccines "for their own good", hence his promotion of the *WHO's Immunisation 2030 Agenda* (https://www.who.int/immunization/IA2030_draft_4_WHA_SP.pdf).

Obviously, the Covid-19 farce would not have been possible without the studied staging that took place all over the world with the clear involvement of international organisations, governments, parliaments, political parties, trade unions, medical, nursing, pharmaceutical and biologist associations, "scientific" societies, journalists, state security forces and other groups whose leaders are either ignorant or direct accomplices who know and support the true objective of this gigantic scheme. The most important media in the world stand out because they control 95% of the information on the planet and belong to the same power groups. Anyone who thinks that the world's major television, radio and press networks are independent, objective and impartial lives in complete ignorance!

3) The existence of the alleged SARS-CoV-2 is not even proven.

We have been denouncing it since the farce began and the reasons are these:

1) There is not a single published work that proves that the alleged SARS-CoV-2 has been isolated, purified and sequenced so its existence remains unproven. At the time we directly asked several WHO officials and other institutions for proof of this and they always referred us to the work of the Chinese team itself who claimed to have isolated and sequenced it when in fact they have never released the details of their research.

2) Micrographs have been published that claim to be of the virus but do not prove anything on their own, since to validate these they must be accompanied by details of the experiments and manipulations that made it possible to obtain them, indicating in them which work they belong to. Micrographs, by the way, whose similarity with those of other alleged viruses is very evident.

3) In the following months, tens of thousands of groups claimed to have obtained SARS-CoV-2 RNA. According to a WHO technical document published in November 2020, **180,000 purported SARS-CoV-2 genomes** had already been made publicly available. However, what they actually did was to detect certain RNA using genetic techniques such as PCR. They simply assumed that the Chinese team's RNA sequence was correct and checked to see if the tests "detected" that RNA in the samples.

4) Recall that China reported to WHO on 31 December 2019 that it had detected "*pneumonia cases of unknown aetiology in Wuhan*" between 12 and 29 of that month. They had all tested "positive" for different viruses associated with respiratory illnesses but just a week later - on 7 January - they blamed all the cases on "a new coronavirus" which they had also managed to isolate! An unusual speed that is hardly credible because most of the known allegedly pathogenic viruses that are said to exist have not even been isolated and sequenced to date!

5) It is self-servingly forgotten that viruses are almost indistinguishable from cellular waste particles and exosomes - the cellular microvesicles produced by our cells when they are stressed by toxic substances, electromagnetic radiation, infections and defensive reactions of the immune system.

6) How can doctors, microbiologists and virologists honestly believe that so many "new strains" of the alleged SARS-CoV-2 have been isolated and sequenced in the last few weeks of 2021? Has this really been achieved in such a short period of time when viruses that have officially been infecting for decades have still not been isolated and sequenced? They even have the audacity to claim that they already have tests to detect every single variant. It is so ridiculous that it is laughable.

7) It is equally laughable to suggest that the supposed SARS-CoV-2 exists and that two years later the controversy over whether it is of natural origin - and what the intermediate host was - or artificial, created and modified in the laboratory, remains unresolved. The latter was postulated by the Nobel Prize winner **Luc Montagnier**, the *University of Illinois* professor Francis Boyle and the Spanish biologist **Máximo Sandín**, among others. Of course, none of them have worked with the virus! What Montagnier did, for example, is to compare the sequence published by the Chinese of the alleged SARS-CoV-2 RNA with other genomic sequences, including the one attributed to the alleged HIV that is said to cause AIDS. In short, none of them have isolated the virus or worked with it themselves.

We have explained it in detail in the magazine: the alleged SARS-CoV-2 is in fact a construct incapable of infecting and not a coronavirus. This was reported in June 2020 by some 30 virologists from the US *Centers for Disease Control and Prevention (CDC)*, the *University of Texas Global Virus Reference Center* and other US institutions in an article published in *Emerging Infectious Diseases* (the official journal of the CDC); moreover, they found that the alleged "American strain" of SARS-CoV-2 was constructed by joining together fragments of some 400 genetic letters using an assembly programme called ABySS. It is therefore a speculative artificial construction, not a real one. And that explains why the images presented of the coronavirus are always recreations made by cartoonists and computer programmes or photographs in which it is impossible to identify what is depicted.

Read in this same issue the article we published on the recent work of German virologist **Stefan Lanka** in which it is clear that SARS-CoV-2 is not a real virus but a computer construct, that its RNA has not been sequenced but invented by sophisticated computer programmes, that it is therefore impossible that there are new strains produced by mutations that have themselves been sequenced, that the famous spike protein cannot be its own characteristic, that what the tests detect are RNA fragments that are in many healthy cells - including human ones - and hence so

many "false positives", that the famous spike protein cannot be its own characteristic, that what the tests detect are RNA fragments that are in many healthy cells - including human cells - and hence so many "false positives" and "false negatives", that the non-existent SARS-CoV-2 cannot therefore be the cause of any infectious disease, that prevention measures are meaningless because there is no epidemic and that "vaccines" are therefore a complete swindle.

4) On tests

For months it was claimed that it is possible to detect a suspected SARS-CoV-2 infection by antigen or antibody tests but it was later acknowledged that these were unreliable and required "confirmation" by RT-PCR (reverse transcriptase polymerase chain reaction), a technique now officially considered "the most reliable" even though it can give "false positives" and "false negatives" even when properly designed. The US *Centers for Disease Control and Prevention* (CDC) itself acknowledged early on about this test, and made it known on its website, that "positive results are **indicative** of active infection with 2019-nCoV **but do not rule out bacterial infection or co-infection with other viruses**". They added: "The agent detected may not be the definitive cause of the disease".

In fact, when someone takes a *Covid-19 serology* test in Spain, the laboratory adds this warning after the diagnosis of *Negative* for IgG and IgM antibodies: "A **NEGATIVE** result does not exclude the possibility of Covid-19 infection. In case of a **NEGATIVE** result and persistence of clinical symptoms, additional tests are recommended". And if the *negative* result is for RT/PCR of ORF1ab and N viral gene sequences, it is stated: "If, despite a negative RT-PCR test result, you have clinical symptoms compatible with Covid-19 infection, further testing is recommended, especially with other types of samples, such as lower respiratory tract samples".

What the public is unaware of is that RT-PCR only uses about 200 genetic letters out of the nearly 30,000 in a virus. A tiny fragment representing less than 0.7% of the RNA is used, without proving that the letters used are exclusive to the virus itself, so the test can be positive and the sequence detected may belong to other viruses, bacteria or even to the human genome itself! How can it be a reliable test? However, if someone tests "positive" for SARS-CoV-2 today, they are included among those "infected" and, if they die, on the list of those who have died "from" SARS-CoV-2, even if in reality they have died of old age, stroke, heart attack, terminal cancer or any other pathology.

It has also been overlooked that the inventor of PCR himself - Nobel laureate **Kary Mullis** - has stated many times that PCR is not a diagnostic technique and therefore all the figures of those allegedly "infected" and "killed by" are **false**.

It is now known that the vast majority of the supposed deaths blamed on *Covid-19* actually died of other causes and that the figures of those supposedly "infected" are a fraud even for those who accept the usefulness of PCR because almost all of them have been carried out with more than 35 amplification cycles and this results in an infinite number of "false positives" (it has been reported that up to 97% of them are false positives).

In short, in the case of *Covid-19*, **the figures on alleged infections and deaths lack the slightest credibility**. They are based on unreliable tests which, in the case of PCR, are manipulated at will. When the *WHO* - in complicity with governments and health authorities - wants the figures of supposedly infected and dead people to increase in order to justify some of its absurd measures, it orders laboratories to test at 30-odd cycles, and if it wants them to decrease, to test at 25 to 28 cycles.

Moreover, we have explained that rapid antigen tests have been positive for papaya, red wine, colas and simple apple soft drinks and PCR for tissues from goats, sheep, mink, ferrets, rabbits, tigers, cats and birds. It even tested positive to sewage collected long before the alleged pandemic. It was announced by a team from the *University of Barcelona* led by Professor of Biology and president of the *Spanish Society of Virology* **Albert Bosch** explaining that the samples were collected on 12 March 2019. The discovery turned the official version "upside down" and was immediately criticised with the stupid and childish argument that "it is not a peer-reviewed study" while others chose to gratuitously question the method and even the professionalism of these researchers. The same people were silenced when a team from the *Italian Higher Institute of Health* led by **Lucia Bonadonna** claimed to have detected with PCR the alleged *SARS-CoV-2* in wastewater from Milan and Turin obtained in December 2019, something that was later confirmed by two different laboratories using different methods. And lies have very short legs...

5) On the numbers of infected and dead.

1) In short, the fact that for more than a year and a half the authorities, health workers and the media have been talking about "infected" or "contagious" to refer to those who have tested "positive" with a test of little or no reliability is a nonsense and an unacceptable lack of ethics. It is equally unethical to speak of

deaths "**by**" instead of deaths "**with**". Not all deaths of those who tested positive to a test can be attributed to *SARS-CoV-2*, even if they were reliable, because it would have to be confirmed by biopsies or autopsies, and **that is never done!**

2) If the tests are not reliable, neither are the figures of suspected *SARS-CoV-2* infections and deaths because these are based on the tests.

3) The global alarm is based on the conviction that the numbers of infected and dead are true, credible and significant when we reiterate that they are based on the reliability of the tests... **and on the assumption that they have not been manipulated.** This is what determines whether we are dealing with a real pandemic or a complete farce. It is indeed striking that the official figures of infected and dead people attributed to *SARS-CoV-2* decreased precisely when governments changed the criteria for counting cases in the middle of the pandemic! And it is equally telling that the number of "infected" people increased when more tests were carried out, even though the number of sick and dead people remained constant or even decreased.

6) Then why have there been "so many" deaths in these two years?

This is the usual question when someone is told the truth, but the truth is that there **have not been so many deaths, but people have swallowed this hoax**. This is the most blatant lie in this whole farce. We have already explained that according to the official figures, in these two years **5,268,849** people have died from *Covid-19* - as of 8 December this year - and as there are 7.875 million people on the planet, **the percentage of deaths would be 0.066%, so 99.93% would have survived**. There was an increase in deaths during March and April 2020 and there are explanations for this. It was due to...

...to having allowed many people to die without treatment - in hospitals, nursing homes and private homes - for lack of resources, doctors and treatment. In fact, hundreds of thousands of surgeries were postponed or suspended - all over the world - for many different reasons. Today we also know that many of the elderly people who died in nursing homes were sedated "so that they would die without suffering" in an action that many experts consider to be a real covert mass euthanasia. On top of that, they died alone and without even being allowed to say goodbye to their families and loved ones.

...to the large number of people infected - by all kinds of agents and no longer by SARS-CoV-2 - in the hospitals themselves. Let us not forget that the panic generated by the WHO, the authorities and the media resulted in emergency departments, waiting rooms, corridors and even ICUs being overcrowded with exposed people who turned all health centres into huge sources of infection. Especially during the first few weeks.

...that many people died as a result of the medical treatments they received. The lack of effective protocols - according to the WHO - meant that health professionals were unsure of how to proceed and in many cases used procedures that were later found not only to be ineffective - which was also the case - but which aggravated the problem, leading many patients to die. This was when immediate orders were given to incinerate corpses on a massive scale without allowing autopsies, with the lame and untenable excuse of possible contagion among pathologists.

...that many elderly people living alone died at home without care because when they called for someone to come to their aid, no one came. And the few who were able to get to a hospital were prevented from entering with all sorts of excuses, sending them back home because that was "recommended" by the authorities in order to "save medical resources", in an action that was not only negligent but criminal. The official figures themselves corroborate that most of the deaths occurred at the start of the farce among the elderly, mainly among those living in residential homes but many others in their own homes.

...that the fear, anxiety and depression caused by the state of alert and the measures taken caused the immune system of many people - including some young and healthy people, but especially those affected by previous serious pathologies - to become depressed, leading to immunodeficiencies that accelerated or caused their death.

7) On confinement.

The strategy of slowing the advance of the alleged pandemic by confining the population to their homes was criticised from the outset by experts around the world whose voices were quickly silenced. Many professionals warned that from a purely health point of view the "cure" could be worse than the "disease". For **Wolfgang Wodarg**, for example, the

previous chairman of the *Health Subcommittee of the Parliamentary Assembly of the Council of Europe*, "**the alarm surrounding the coronavirus was not based on any extraordinary medical danger**". Dr **John Ioannidis**, for his part, denounced the biased presentation of data that prevented a true assessment of the situation, pointing out, for example, that other coronaviruses considered "mild" also lead to the death of 8% of elderly people. And Dr. **Peter Goetsche** - co-founder of the *Cochrane Collaboration* and author of several books on corruption in medicine, no less - went so far as to denounce the declaration of a pandemic when it was not even known whether the risk of dying from the newly discovered coronavirus was greater than that of influenza and many other viral infections!

Finally, social, economic and psychological reasons aside, the main criticism of containment is that if only "older" and sick people had been isolated - and even then it is debatable - the result would have been the same, as shown by the fact that 90% of those affected and dead are or were over 70 years old. Others also believe that confinement has prevented the majority of the population from being naturally immunised, greatly increasing the risk of further mass outbreaks.

The instigator of the confinements was **Neil Ferguson**, who is associated with *Imperial College London* and funded by the *Bill and Melinda Gates Foundation*. Ferguson already made catastrophic predictions about foot and mouth disease in 2001, claiming that hundreds of thousands of people would die if 6 million animals were not slaughtered, and in the end only 177 deaths were recorded. And he did the same again in 2009, estimating 65,000 deaths from influenza, when in fact fewer than 500 were recorded.

8) "Covid vaccines" are not effective and can even lead to death.

No vaccine has ever demonstrated its safety or efficacy, **despite being the most widely believed fallacy in the world of biology and medicine**. At *Discovery DSALUD* we have been denouncing this for 22 years. You can check it by reading the hundred or so reports we have dedicated to it - in addition to numerous news items - as they are grouped under the heading *The grave danger of vaccines* in the *Reports section* of our website: www.dsalud.com.

And that includes the so-called "Covid vaccines". Not only do they not immunise - as everyone has now proven and officially admitted after months of blatant lying - but they are also very dangerous because they can cause hypersensitivity, pain, bruising, swelling, redness, erythema and itching at the injection site, as well as fatigue, malaise, feverish chills, fever, chills, inflammation, thrombosis, myocarditis, pericarditis and other infections as well as inflammation, thrombi (clots), Guillain Barré syndrome, erythema, glomerulonephritis (kidney inflammation) and nephrotic syndrome.

And these are just some of the possible adverse effects because we have already explained that the technical data sheets of the vaccines themselves recognise that they can cause immune system disorders, blood and lymphatic system disorders, vascular disorders, respiratory disorders, both thoracic and mediastinal, psychiatric disorders, nervous system disorders, gastrointestinal disorders and musculoskeletal and connective tissue disorders. The specific ailments - which are numerous - depend on the individual vaccines and are described in the report entitled "*Are there undeclared toxic components in "Covid vaccines?"*" in this issue. In short, those who are vaccinated run the risk of suffering from all these problems in the very short term, but also in the coming months or years!

Of course, those who have orchestrated all this don't give a damn about the truth. The people are so misinformed and uninformed that they do not even react when it is explained to them - with their own official data - that vaccines do not immunise, that those vaccinated - even with three doses - can become infected and spread the disease, that their inoculation can cause very serious damage and even lead to death, that it is false that the adverse effects are less among those vaccinated and that even if they are vaccinated they must continue to wear masks (muzzles). It has reached the point of absurdity where the masses are led to believe that it is the unvaccinated who are to blame for the fact that the vaccinated fall ill and that they must therefore be isolated and forced to be vaccinated. And yet, in December 2021, there are - on average - **more infected and dead people in hospitals among the vaccinated than among the unvaccinated!**

We have explained in detail that there are three major reporting systems in the world: the US VAERS (*Vaccine Adverse Event Reporting System*), the European Union's

EudraVigilance (European Union Drug Regulating Authorities Pharmacovigilance) and the UK's Yellow Card Scheme. These figures are the latest at the time of going to press:

1) *VAERS* acknowledges that between 14 December 2020 and 10 December 2021, vaccines caused **20,244 deaths and 965,841 adverse events** in the United States alone.

2) *EUDRAVigilance* recognises that by 16 December 2021, vaccines had caused **32,649 deaths and 3,003,296 adverse events**, including **1,409,643 serious ones**, in the 27 countries of the European Union. This does not include deaths and cases in the other 23 countries of the old continent. Y,

3) The *Yellow Card* admits that by 16 December 2021 in the UK, vaccines had caused **1,852 deaths and 404,783 adverse events**.

In short, in these 29 countries alone - there are 194 countries in the world - **54,745 deaths and 4,373,920 adverse effects (half of them serious) are officially recognised AS A RESULT OF VACCINATIONS!**

Well, even so, in Spain it was decided at the beginning of December of this year -2021- to vaccinate children from 5 to 11 years old. They don't care that according to *CDC* and *VAERS* data, **CHILDREN UNDER 12 YEARS OF AGE ARE 188 TIMES MORE LIKELY TO DIE FROM COVID VACCINATIONS THAN FROM THE DISEASE**. Just as they don't care that *VAERS* has acknowledged that in the first six months alone the "Covid vaccines" **produced twice as many deaths** in the United States **as all conventional vaccines administered in that country in the previous thirty years**.

Of course, last April the Spanish Ministry of Health itself had the cheek to launch a media campaign with the propagandistic slogan of *#YomeVacunoSeguro* (*#Iwillforsuregetvaccinated*) to convince people that the vaccines are safe and that they should confidently go and get inoculated. In other words, blatantly lying to citizens to whom it has not even been officially explained that these are experimental vaccines and that they are going to act as human guinea pigs. And they have been encouraged to do so in violation of the law since the inoculation of a vaccine must be prescribed by a doctor and the recipient - or their legal representative if they are children or disabled

people - must sign the corresponding informed consent form. In short, the authorities have encouraged society to be massively vaccinated without providing the adequate and rigorous information required by law, without explaining the possible adverse effects through information campaigns and without telling them that there are both preventive and curative alternatives in the event of falling ill. It is also outrageous that the public is being told that vaccines immunise when this is radically false. No one has proven this, no matter how much statistical fanfare is being shown. Being vaccinated is not synonymous with being immunised. In fact, not even the vaccine manufacturers themselves dare to assert such a fallacy in their data sheets.

9) Adverse reactions to Covid-19 vaccines

So-called "mRNA vaccines" use a synthetic genetic sequence created in the laboratory to carry the order to produce spike proteins (or "S-proteins") inside cells - something that is done by ribosomes - as this is officially postulated to be the gateway used by the putative *SARS-CoV-2* virus. The theory is that when these proteins are released, immune system cells discover them, consider them foreign, and develop specific antibodies against them, destroying them. The body is then supposed to develop defences against any virus containing the spike protein and become "immunised".

In short, the vaccine is presented to us as if it were a USB device that is inserted into the computer (our body) with a specific application (the mRNA) that will not affect the hard disk (genome) when a specific programme (antibodies) is executed. Obviously, this is assuming that the USB is not going to give us problems because of a "computer virus", although this cannot always be guaranteed. The simile seems convincing and is simple but it is also absolutely false because it ignores the fact that in our cells there are enzymes, retrotranscriptases, which are capable of converting RNA into DNA. The RT-PCR technique used to diagnose *Covid-19* sufferers (despite the fact that its own creator - Nobel Prize winner **Kary Mulis** - and the leaflets themselves warn that it **cannot be used for this purpose**) is based precisely on the reverse transcription of a strand or chain of RNA into DNA using reverse transcriptase. Our body has mechanisms to transform RNA into DNA using these reverse transcriptases, so claiming that RNA vaccines cannot alter DNA is **a lie**, and in fact there is a published scientific study that proves it.

In short, vaccines are not harmless, no matter how much the mass media repeat it over and over again. Their adverse effects are recognised in the **technical data sheets themselves** and we have reported on them in several issues. They can cause - and we reiterate this again because of their importance - **immune system disorders, blood and lymphatic system disorders, vascular disorders, respiratory, thoracic and median system disorders, psychiatric disorders, nervous system disorders, gastrointestinal disorders and musculoskeletal and connective tissue disorders**. It is therefore a shameful manipulation that vaccinologists and their front men in governments, health systems and the mainstream media claim that they can only cause hypersensitivity, pain, bruising, swelling, redness, erythema and itching at the injection site as well as fatigue, malaise, fever, fever and chills. The one to be administered in Spain to children aged 5 to 11 years is *Comirnaty*, i.e. the one from *Pfizer/BioNTech*, which officially "only" admits that it can cause pain in the extremity, nausea, hypersensitivity, insomnia, headaches, acute peripheral facial paralysis, arthralgia, myalgia, lymphadenopathy and anaphylaxis.

The truth, however, is that according to the official claims both the *Pfizer/Biontech* and *Moderna* vaccines will introduce transgenic messenger RNAs using liposomes - submicroscopic droplets of fats (phospholipids and the like) - which, once inside cells, will force them to make "spike" proteins so that when they are detected, the immune system will produce antibodies against them and the body will be protected. This is the theory, but the facts have already shown that vaccines do not immunise.

Stephanie Seneff and **Greg Nigh** - from the US *Massachusetts Institute of Technology (MIT)* - published a paper in May this year (2021) in the *International Journal of Vaccine Theory, Practice and Research* that found that the spike proteins produced by cells when inoculated with an mRNA vaccine bind to ACE2 receptors permanently and can cause heart failure, lung damage, pulmonary hypertension and strokes, as well as rendering immune system cells unable to distinguish between healthy and infected cells, triggering cytokine storms affecting numerous organs and tissues and strokes as well as rendering immune system cells unable to distinguish between healthy and infected cells and triggering cytokine storms affecting numerous organs and tissues. In short, they claim that the spike protein that the body's cells make when they receive RNA from the *Pfizer* and *Moderna* vaccines has more damaging effects than the virus's own spike protein. And yet universal vaccination is still being advocated.

10) On the issue of group immunity or "herd immunity".

Political and health authorities around the world - led by the *WHO* - assured from the beginning of this farce - supported by the mainstream media - that "the only solution" to *Covid-19* was vaccines and urged doctors and nurses **to inoculate healthy people with experimental vaccines whose safety and efficacy were unknown**. And healthcare workers accepted such nonsense even though they knew that the laboratories themselves ensured that they could not be sued or held liable for adverse effects of the vaccines, thus revealing the real confidence they had in their safety: **none**. That health care providers around the world accepted this is nauseating. And many may end up paying dearly for it because the Spanish health insurance companies have already warned the representatives of their associations that they will not be responsible for their defence, nor for the possible compensation of those who are sued for inoculating the vaccines for *Covid-19*.

Remember that in order to convince people to be vaccinated, they were assured that only 30% of the population would need to be inoculated because that would be enough to achieve so-called "herd immunity". This was not the case and so they argued that the percentage needed was 50%, then 70%, then 90%. The result? There is no herd immunity even with more than 90%. As the farce fell apart, they then claimed that they do not immunise but make those who are infected suffer a "milder" disease, when there is not a single clinical or epidemiological study to support such nonsense. It was a new hoax that even many doctors, nurses and biologists believed. The same applies to when they were told that if vaccines do not work, it is because the virus mutates so much that they are not effective against the new "variants".

We have said it countless times: official figures do not have the slightest credibility. Firstly, not all countries have reliable reporting systems for adverse drug and vaccine reactions. Secondly, there are several published and well-known official studies that show that where such a system does exist, no more than 1% of cases are recorded because health professionals - like citizens - have been led to believe that vaccines are generally harmless and when they see adverse effects they choose not to relate them to vaccines and do not report them at all. Thirdly, not all reports are accepted; many are rejected on a wide variety of grounds. And fourthly, there is no way to check the veracity of the data because no one outside the agency that records and processes them has access to the

data. To make matters worse, a possible relationship between vaccination and adverse effects (including deaths) is only accepted if they appear in the first 21-28 days (depending on the country) when it has been proven that they can appear months or even years later. The standard is therefore shameless.

In short, the individuals who have promoted this whole farce assured the population that if society accepted to be inoculated with dangerous, unapproved experimental vaccines - some of them have a temporary authorisation - "herd immunity" would be achieved, and time has shown again - for the umpteenth time - that they were lying!

11) On the ineffectiveness and dangerousness of facemasks.

The masks marketed for the alleged *SARS-CoV-2* do not protect against any virus. Neither the "surgical" ones nor any of the others that have been made available to society. They serve only to prevent most of the particles from the nostrils and mouth of someone who has a fever, talks very close to someone (within a metre), coughs or sneezes from reaching other people. Wearing it to prevent self-infection is therefore **useless**. The same applies if you are healthy and do not cough or sneeze. Forcing hundreds of millions of people to wear them is an arbitrary, stupid, senseless and medically unjustifiable imposition. Moreover, they can be detrimental to health, sometimes severely so.

It is shocking that it has not been explained to people that the mask with the smallest microfilters is the FFP2 (N95 in America), the diameter of which is 0.2 micrometres or microns (i.e. 200 nanometres) and that the standard size of a coronavirus is 100 nanometres. Therefore, **even the best face masks do not protect against coronaviruses, because even if they did exist, they would be a fraction of the size of a coronavirus.**

Moreover, **the alleged *SARS-CoV-2* is not airborne**. This has been officially recognised by the *WHO* since the beginning of the hoax and is stated on its website. Therefore, the possibility of someone catching this coronavirus - assuming it exists, which no one has proved - by walking through the bush, the countryside, the beach, the street, a restaurant, a supermarket or a shop is **ZERO** because the *WHO* itself admits that **it does not remain in the air, it is not in the environment**. No one can be infected by simply crossing paths

with someone. In fact it is officially recognised that to become infected you have to receive particles from someone sneezing or coughing within a metre of you and for at least 15 minutes for there to be sufficient "viral load". That people wear masks in workplaces, bars, restaurants, shops, shopping centres, buses, boats or planes is patently ridiculous. We repeat: it is officially accepted that **you can only become infected if someone who is ill coughs or sneezes next to you for at least 15 minutes**. It would require a sufficient "viral load" (amount of virus per cubic millimetre) for this to happen, and **it only takes a single gust of air for this not to be the case!**

How is it possible, then, that the vast majority of the population has accepted without protest to spend so many months wearing muzzles that are as absurd as they are ineffective? How do we accept the stupidity that you can infect someone if you walk through a bar, a café or a restaurant but not if you sit down when you get to where you are going? How do we accept the stupidity that if four people sit at a table to eat you don't get infected but if there are five or more you do?

It is now also well established that the vast majority of those who have been infected have been wearing masks; even the US *Centers for Disease Control and Prevention (CDC)* has acknowledged this.

And if it is grotesque to know that muzzles are useless, it is even more grotesque to know **that the continued use of masks is dangerous**. In addition to bacterial infections of the mouth and lips, it has been shown to cause a loss of cellular energy and oxygen in the blood, which can lead to a continued weakening and attenuation of the senses as well as a marked impairment of the immune response. Hypoxia causes the intracellular pH to drop, causing membrane transporters to expel lactate and hydrogen ions to the outside of the cells, leading to the formation of lactic acid. Furthermore, it leads to excessive inhalation of carbon dioxide (CO₂) which can cause dizziness, loss of consciousness and even death.

Russell Blaylock, a renowned neurosurgeon at the *Medical University of South Carolina* (USA), has found that the FFP2 mask can reduce blood oxygenation by up to 20 percent and cause unconsciousness, which is already known to cause car accidents. It adds that the risk increases exponentially in people with chronic obstructive pulmonary disease, emphysema, pulmonary fibrosis and lung cancer or who have undergone lung surgery. It

also damages the immune system by inhibiting the production of T-lymphocytes, which - at least according to some biologists - combat mainly viruses.

In addition, seven Spanish doctors, a pharmacist and an analyst published a study entitled *Estudio observacional descriptivo. Physiological adaptations derived from the use of face masks and their possible repercussions on the user*, in which the levels of oxygen and carbon dioxide were measured inside the different types of masks on the market - textile, surgical, FFP2 and FFP3- as well as in the blood of those who have worn them for a long time, and their conclusion is conclusive: all masks **cause hypoxia (oxygen deficit) and hypercapnia (excess of CO₂ in the blood)**.

And a group of eight German researchers from the Department of Psychology at the *FOM University of Applied Sciences in Siegen* (Germany) led by **Oliver Hirsch** - their work has been published in the *International Journal of Environmental Research and Public Health* - analysed data from 44 papers and evaluations of 65 others and their conclusions are devastating. They say that both healthy and sick people who wear masks for long periods of time can experience increased carbon dioxide levels in their blood and decreased oxygen saturation, increased heart rate and blood pressure, decreased cardiopulmonary capacity, breathlessness, headache, dizziness, loss of concentration, drowsiness, decreased empathy, itching, acne, skin lesions and irritation, fatigue and exhaustion. Moreover, they say that in the long term it can lead to increased blood pressure, arteriosclerosis, coronary and neurological diseases, immunosuppression and metabolic syndrome. At the cellular level, they add, it can lead to induction of the transcription factor HIF (hypoxia-induced factor), increasing inflammatory and cancer-promoting effects as well as aggravating pre-existing clinical conditions.

12) The real reason for masks.

Masks, mouth masks or muzzles, in short, do not protect against coronaviruses. We have already explained in the past that they are intended to:

-Generate fear. An instant message is conveyed to anyone who sees an unrecognisable human figure, a hidden face that approaches and looks at you while you are in hospital and makes you wonder whether it is someone who is afraid of you and is protecting himself or someone who wants to protect you because he is afraid of transmitting

something malignant to you. Fear is irrational and masks perpetuate and multiply it in an emotional and uncontrolled way.

-Achieving submission. Masks make it clear who is in charge and who obeys. It materialises obedience even for those who have sought a medical certificate that exempts them because they have also submitted to the authority that has the power to free a person from the mask.

-Reinforce the dogma that we are facing a pandemic. The mere fact of wearing a mask and seeing others wearing them helps to internalise the idea of fear of infection, of contagion, of contact, of the possibility of the disease spreading. It reinforces the belief that there is a dangerous virus that is the cause of everything and that no one can assume that there could be another cause.

-Securing a gigantic business. The conviction that the only way out of this "situation" is a vaccine was repeatedly drummed into the minds of the population, which ended up uncritically accepting it. Thus, the business of tests, masks, thermometers, gloves, gels and many other products was accompanied by that of vaccines and pharmaceuticals. As useless and ineffective as they are, hundreds of millions of people agreed to them in an attempt to overcome the fear that has been instilled in them.

-It causes isolation, segregation and dehumanisation. It is clear that masks contribute to severing communication or making communication extremely difficult, as well as segregating, isolating and discriminating against those who do not wear them, thus further contributing to the dehumanisation of society.

13) The public is misinformed and lied to.

The *WHO*, regulatory agencies, governments, health authorities, medical, biological and pharmaceutical associations and the mainstream media - especially television networks - have been misinforming, lying and manipulating the public for two years. They falsely lead people to believe that vaccines are safe and effective and hide the fact that the laws themselves demand that each vaccination must be approved in writing by a doctor in a personalised manner, that all those who are going to be inoculated must first be fully informed of the potential risks and, of course, that they must first sign the mandatory

informed consent form. And this legal requirement is not being fulfilled with anyone, which is why we can speak directly of criminal negligence. They have been convinced by simply telling them that they must do it "for their own good" and that otherwise they will not be able to travel, enrol in foreign schools or go to a bar or a discotheque. In other words, they are being **blackmailed**.

And all this is being done openly, which is why the complicit silence of the authorities, health professionals, journalists, state security forces, prosecutors, judges and magistrates is incomprehensible. It is equally incomprehensible that the Constitutional Court has taken so long to rule that the measures adopted by the Spanish governments - both national and regional - were illegal, since the state of alarm under which they were adopted was also illegal. The attempt to massively vaccinate children and adolescents - with no real need or justification - and to continue subjecting them to the torture of muzzles and social distancing is nauseating and shows that our society has gone completely insane.

14) Does Virology make sense?

Everything mentioned in this summary is based on the fundamentals of virology and many of the explanations are framed in a specific context: viruses exist and are pathogenic agents that can make us sick. Well, we cannot - nor should we - end this text without recalling that according to the well-known German virologist **Stefan Lanka**, viruses are neither microbes - they are not living beings - nor do they have infectious capacity, so Covid-19 could not have been caused by a coronavirus such as the alleged SARS-CoV-2. He fundamentally supports his claims by asserting that virology is a discipline that is unfounded for the following reasons:

1) Virologists assume that when cells die in vitro it is due to viruses obviating the possibility that it is due to starvation and/or toxicity, an erroneous interpretation based on a single paper published in June 1954 by **John Franklin Enders** and **T. C. Peebles**.

2) All viruses have been constructed by computer programmes in a theoretical - artificial - way using the fragments of genetic material resulting from the death of cells. What is done is to align at will the sequences entered into the program until

a genome is constructed, which is then presented as that of the virus. And lest it be doubted, no attempt is made to recreate that same long genetic chain (the supposed viral genome) with the same procedure except using genetic information obtained from a non-infected source.

3) The alignment that gives rise to the supposed viral genome is performed by taking the genome of another virus as a reference, but it turns out that ALL the published genomes are artificial, there is none obtained by isolation, purification and sequencing. And, obviously, with these fragments, one or several different genomes can be constructed.

4) No virus has ever been isolated from plants, animals or humans; neither in their parts nor in their fluids. It is therefore impossible to test whether someone is actually infected by it.

5) Virologists have never isolated the supposed "viral particles" they present in electron microscopic images. Nor have they characterised them biochemically or obtained the alleged viral genetic material from them. They have never performed - at least they have not published - control experiments showing that after isolating these particles that they contain the "viral" proteins attributed to the virus in question (e.g. those that make up the virus capsid).

6) Virologists interpret as "viruses" or "viral components" what are in fact typical components of dying cells and tissues or typical structures formed when cellular components such as proteins, fats and solvents are swirled together. No control experiments are carried out by performing the same procedure with "non-infected" cells or tissues to check whether these small bubbles, which are interpreted as viruses, also appear.

7) The so-called contagion experiments that virologists carry out to demonstrate the transmissibility and pathogenicity of the supposed viruses refute the whole of virology. It is evident that in the animal experiments they carry out, it is the experiments themselves that provoke the symptoms that are interpreted as proof of the existence and effect of the supposed viruses. Of course, control

experiments consisting of doing exactly the same thing but with sterilised materials that are presumed to be uninfected are not carried out either.

In science, there is, after all, one indisputable basic rule: whoever asserts something must prove it in a clear, comprehensible and verifiable way; the rest falls into the realm of faith. However, many virologists have been violating this law with their claims and actions for decades, and Stefan Lanka says that he is prepared to bring such fraudsters to justice in view of the crisis in which the world is living because of their lack of ethics and principles. This is what he says in his book *Corona: Weiter ins Chaos oder Chance für ALLE?* (*Corona: Weiter ins Chaos oder Chance für ALLE?*).

15) Is the disease caused by a virus or by electromagnetic radiation from 5G technology?

The Spanish biologist specialising in microbiology **Bartomeu Payeras i Cifre** - professor of mathematics, physics and chemistry - published on 14 April this year an elaborate report according to which there is "*a clear and close relationship between the rate of cases of coronavirus and the location of 5G antennas*". Two and a half months later - on 30 June - he published a new documented, serious and rigorous work (139 pages) which was nevertheless ignored by our authorities and the mainstream media which, after initially reporting on it, did not mention it again. It was simply hushed up. According to what he would tell us at the time, in his opinion, the cases of people affected and deaths attributed to Covid-19 are undoubtedly related to electromagnetic radiation from 5G technology. Well, in December 2019, his suspicion was corroborated by Dr. **José Luis Sevillano**, a Spanish doctor working in the French town of Tanus near Toulouse, after discovering that many residents suffering from the symptoms now considered characteristic of *Covid-19* were suffering from it before the supposed pandemic was declared and noting that where there were more sufferers was where there were more telephone masts!

In January 2021, Dr **Beverly Rubik** and Dr **Robert R. Brown** published a paper that found that radio frequencies from wireless communications - including microwaves and millimetre waves - especially those emitted by 5G technology, are undoubtedly related to *Covid-19*. The paper, titled *Evidence for a Connection between COVID-19 and Exposure to Radiofrequency Radiation from Wireless Telecommunications Including Microwaves*

and Millimeter Waves, was published in *OSFPreprints* and concludes that radio frequencies - particularly those from 5G technology - weaken the immune system by increasing the virulence of the disease. Moreover, they claim that they contribute to hypercoagulation, alter microcirculation, reduce haemoglobin and erythrocyte levels exacerbating hypoxia, cause immunosuppression and hyperinflammation, increase oxidative stress and free radical production, worsen arrhythmias and cardiac disorders, exacerbate vascular injury and organ damage, and increase intracellular calcium cations (Ca²⁺).

It should be added that the Spanish chemist and biologist **Pablo Campra Madrid** subsequently found 110 micrometric objects in several vaccine vials, 8 of which appear to be graphene - and another 20 could also be - and some have inferred that microparticles of graphene oxide - and even other ferromagnetic nanomaterials - are being deliberately introduced into people through vaccines, which, after interacting with our DNA, would allow us to emit and receive signals. Some even claim that these signals can be picked up through the Bluetooth of a mobile phone. At the time of going to press, we are not yet in a position to make a serious assessment of whether or not this is a real possibility, the purpose of which would be to control people using computerised methods, so we are not going to make any pronouncements.

José Antonio Campoy