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The “Killer Vaccine” Worldwide. 7.9 Billion People

The Covid-19 Vaccine should be Halted and Discontinued Immediately Worldwide

By [Prof Michel Chossudovsky](#)

Global Research, August 14, 2021

Theme: Crimes against Humanity, Media Disinformation, Science and Medicine



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Introduction

Let us be under no illusions, it's not only “experimental”, it's a Big Pharma “killer vaccine” which modifies the human genome. The evidence of mortality and morbidity resulting from vaccine inoculation both present (official data) and future (e.g. undetected microscopic blood clots) is overwhelming.

Numerous scientific studies published independently confirm the nature of the Covid-19 mRNA vaccine which is being imposed on all humanity.

The stated objective is to enforce the Worldwide vaccination of 7.9 billion people in more than 190 countries, to be followed by the imposition of a digitized “vaccine passport”. Needless to say this is a multi-billion dollar operation for Big Pharma.

Bill Gates and WHO's Director General Dr. Tedros



The global vaccine project entitled COVAX is coordinated Worldwide by the WHO, GAVI, CEPI, the Bill and Melinda Gates Foundation in liaison with the World Economic Forum (WEF), the Wellcome Trust, DARPA and Big Pharma which is increasingly dominated by the Pfizer-GSK partnership established barely four months before the onset of the Covid-19 crisis in early January 2020.

The Covid-19 Timeline

Fake figures of covid-19 positive cases and covid-19 related deaths. Lies upon lies.

There is a [complex timeline](#). The covid crisis is marked by several stages leading up to the implementation of mass vaccination Worldwide in December 2020.

A fake Worldwide Public Health Emergency (PHEIC) was announced by the WHO on January 30, 2020 (based on 83 positive cases Worldwide outside China), followed by the onset of the crisis in air travel and international commodity trade (Trump on January 31, 2020), the February 20, 2020 financial crash, the March 11, 2020 lockdown, followed by the second, third waves and fourth waves. When will it end?

For further details on the Timeline see Chapter II of

[The 2020-21 Worldwide Corona Crisis: Destroying Civil Society, Engineered Economic Depression, Global Coup d'État and the “Great Reset”](#)

The March 11, 2020 Lockdown and Its Devastating Social and Economic Consequences

Starting on March 11, 2020, 44,279 so-called confirmed RT-PCR “positive cases” (Worldwide out of China) and 1440 Covid deaths were used to justify:

- social confinement,
- the lockdown and closure of 190 national economies, crisis of the global economy,
- extensive corporate bankruptcies in key sectors of economic activity,
- the outright elimination of small and medium sized enterprises,
- the triggering of poverty and mass unemployment,
- social distancing, the face mask, no social and family gatherings,
- devastating impacts on mental health,
- an engineered crisis of the national health system,
- the closure of schools, colleges and universities,
- the closure of museums, concert halls, cultural and sport events,

- institutional collapse and the disruption of civil society.

The stated objective has always been to save lives.

The outcome of these policies have literally destroyed people's lives. Millions of people Worldwide have been driven into extreme poverty.

And then ten months later the Covid-19 vaccine has come to our rescue.

It was announced in early November 2020 and launched Worldwide in late December.

The fear campaign has spearheaded compliance and acceptance to higher authority.

Video

Click the lower right corner to access full-screen

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The 2021 Worldwide Corona Crisis - Prof. Michel Chossudovsky

from Global Research

29:30 |



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The mRNA Vaccine

The mRNA vaccine was presented as an everlasting solution, as a means to curbing the epidemic, saving lives, reopening our shattered national economies and restoring a sense of normality in our daily lives.



A massive propaganda campaign was initiated in support of the vaccine.

A fake promise of a new life. A return to reason and normalcy.

All of this turned out to be an illusion, spearheaded by lies and fabrications.

The ideology of the financial elites and the billionaire foundations was imposed: The vaccine was upheld as a means to carrying out the World Economic Forum's "Great Reset":

"You'll Own Nothing and Be Happy": a stylized future predicated on debt and extreme poverty coupled with a 'killer vaccine'.

What is envisaged under "The Great Reset" (Klaus Schwab, image left) is a scenario whereby the global creditors will have appropriated by 2030 the World's wealth, while impoverishing large sectors of the World

Population.

The billionaire elites do not hide their intent. In 2030 **"You'll own nothing, And you'll be happy."**

(see video below)

World Economic Forum: "You'll own nothing, and you'll be happy" (While Oli...



Lies through omission: the dramatic trend in mortality and morbidity related to the vaccine (confirmed by official sources) since early January 2021 had been carefully obfuscated.

“Killer Virus” or “Killer Vaccine”?

The first question which stands out is: ***Do We Need a Vaccine?***

The answer is NO! There is no scientific basis whatsoever which justifies the gene-edited vaccine as a means to saving lives and protecting people's health Worldwide.

The alleged “scientific justification” for the vaccination program relies on the three simple and misleading “phrases” or “labels” which are totally invalid:

- SARS-COV-2 is a “killer virus”
- There is a rising Worldwide trend of covid-19 infection,
- People are dying as a result of the covid-19 infection.

Refutation of Above Statements

1. SARS-CoV-2 is “a killer virus”.

That's the cornerstone of the 24/7 fear and media disinformation campaign upheld by persistent statements by politicians and national health authorities.

Both the peer-reviewed as well the WHO, CDC “official” definitions of SARS-CoV-2 say exactly the opposite. Their definitions of SARS-2 repeal their own lies. (For details see Appendix)

2. There is a Rising Worldwide Trend of Covid-19 infection.

This alleged trend is said to be corroborated by a rapidly increasing number of **covid positive cases**.

The methodology used to generate these figures is dependent upon the WHO sponsored **Real Time Reverse Transcription Polymerase Chain Reaction (rRT-PCR)** test, the estimates of which are tabulated Worldwide by the national health authorities.

While the estimates of the rRT-PCR have been questioned from the very outset, it is now confirmed by the WHO in a January 20, 2021 advisory that the rRT-PCR test adopted as a means to detecting SARS-COV-2 positive cases is **TOTALLY invalid**. (This pertains to Covid positive data tabulated since late January 2020). (See Appendix)

3. People are Dying as a Result of the Covid-19 Infection.

We are told that there is a rising trend of Covid-19 mortality. Namely deaths which are allegedly the result of the SARS-2 viral infection.

There is ample evidence that these Covid-19 related probable causes of death and the underlying data on Covid-19 mortality are manipulated by the national health authorities. Tests, autopsies and postmortems are not conducted. The mortality statistics pertaining to Covid-19 are **TOTALLY invalid**. (see Appendix which focusses on the US covid related mortality data)

In summary,

- 1. **there is no killer virus,**
- 2. **the measurement of covid positive cases is invalid,**
- 3. **the Covid-19 mortality data are manipulated.**

All of these statements are amply documented. For details see Appendix to this article below.

I should mention that the so-called “**emergency use**” clause to justify an experimental and unapproved vaccine is also invalid. Why? Because the emergency use criterion relies on erroneous estimates of the rRT-PCR covid positive cases (fake) and Covid-19 related mortality data, both of which are invalid. (See Appendix)

The Vaccine. Hidden Agenda?

The vaccine does not save lives nor does it contain the pandemic, because there is no pandemic. It's a money-making operation for Big Pharma in the hundreds of billions of dollars (see data below).

Moreover, it's not a one time vaccine jab. Several doses are contemplated. It is slated to extend over a period of at least two years.

It is applied Worldwide without exceptions. Not a single country with the exception of Burundi, Tanzania and Haiti had the courage to refuse the "killer vaccine".

While there is no reliable evidence, it is worth noting that the presidents of Tanzania and Burundi died under mysterious circumstances.

Haiti was until recently the only country in the Western Hemisphere which refused categorically to implementing the mRNA vaccine. In a bitter irony, immediately following president **Jovenel Moise's** assassination (July 7, 2021), president Joe Biden promptly sent half a million vaccine doses (and more to come) (courtesy of Uncle Sam) which were delivered by COVAX to Port au Prince six days later on July 14.



A half-million doses of vaccines donated by the U.S. government through COVAX landed in Port-au-Prince, the capital of Haiti, July 14, 2021.

This first shipment to Haiti was part of a US Aid program consisting of 500 million doses of the "killer vaccine" which is slated to be sent to a large number of developing countries (For further details see below).

Mortality and Morbidity: While there is "No Killer Virus", there is a "Killer Vaccine".

The evidence is overwhelming. At the time of writing, almost **20,000 Covid vaccine deaths** have been recorded in the [European Union](#) (July 17, 2021). In the US the number of registered vaccine related deaths is of the order of 12,000 (July 9, 2021).

According to the [EudraVigilance database](#) (July 17, 2021) there were **18,928 deaths and 1,823,219 injuries** reported following injections of four experimental COVID-19 shots.

- COVID-19 MRNA VACCINE MODERNA (CX-024414)
- COVID-19 MRNA VACCINE PFIZER-BIONTECH
- COVID-19 VACCINE ASTRAZENECA (CHADOX1 NCOV-19)
- COVID-19 VACCINE JANSSEN (AD26.COV2.S)

From the total of injuries recorded in the EU, "half of them (904,609) are **serious injuries**". According to EuroVigilance (quoted by by Brian Shilhavy):

*"**Seriousness** ... can be classified as 'serious' if it corresponds to a medical occurrence that results in **death**, is life-threatening, requires inpatient hospitalisation, results in another medically important condition, or prolongation of existing hospitalisation, results in persistent or significant disability or incapacity, or is a congenital anomaly/birth defect."*

These are official statistics based on a formal process of registration of deaths and "adverse effects". The actual number of deaths and injuries triggered by the mRNA vaccine are much higher. Less than ten percent of the victims or families of the deceased will go through the tedious process of reporting vaccine related deaths and injuries to the national health authorities.

According to the latest "official" figures for the EU, Britain and the US (combined), **there are 31,389 Covid-19 vaccine related deaths and almost 5 million injuries**.

EU/EEA/Switzerland to 17 July 2021 – 18,928 Covid-19 injection related deaths and over 1.8 million injuries, per EudraVigilance Database.

UK to 7 July 2021 -1,470 Covid-19 injection related deaths and over 1 million injuries, per MHRA Yellow Card Scheme.

USA to 9 July 2021 – 10,991 Covid-19 injection related deaths and over 2 million injuries, per VAERS database.

TOTAL for EU/UK/USA – 31,389 Covid-19 injection related deaths and almost 5 million injuries reported so far in July 2021.

Video: Impact of Covid Vaccinations on Mortality (December 2020- April 2021). Selected Countries

Impact of COVID Vaccinations on Mortality



Source: [HeathData.org](#)

Hidden Injuries: The Microscopic Blood Clots

The persons vaccinated will not be immediately aware of the injuries incurred. The latter in most cases are not discernible, nor are they recorded. While “Big Blood Clots” resulting from the vaccine are revealed and reported by those vaccinated, an important study by Canada’s [Dr. Charles Hoffe](#), suggests (yet to be fully confirmed) that the mRNA vaccine generates “microscopic blood clots”.

“The blood clots we hear about which the media claim are very rare are the big blood clots which are the ones that cause strokes and show up on CT scans, MRI, etc.

*The clots I’m talking about are microscopic and too small to find on any scan. They can thus only be detected using the **D-dimer test**.”*

“These people have no idea they are even having these microscopic blood clots. The most alarming part of this is that there are some parts of the body like the brain, spinal cord, heart and lungs which cannot re-generate. When those tissues are damaged by blood clots they are permanently damaged.

“These shots are causing huge damage and the worst is yet to come.”

Below is his [interview](#), with **Laura Lynn Tylor Thompson** (also available on [Rumble channel](#)).



Big Pharma. Pfizer’s Near Global Monopoly

Hundreds of billions of dollars are at stake. **This is the largest and most expensive vaccine project in World history which is slated to be financed by tax dollars Worldwide**, putting an obvious strain on the public debt of numerous countries.

The vaccine program is accompanied by a “timeline” consisting of recurrent mRNA inoculations over “the next two years and beyond”. As documented above, it will have devastating impacts on mortality and morbidity Worldwide.

What is at stake is a multi-billion dollar Big Money operation for Big Pharma with Pfizer in the lead.

Pfizer-BioNTech (allied with Moderna Inc) is in the process of consolidating its Worldwide (near monopoly) position by pushing out its major competitors including AstraZenaka and Johnson and Johnson (J & J).

Pfizer has been pressuring politicians to endorse their mRNA vaccine. It’s political lobbying is also directed against its Big Pharma competitors. According to [Bureau Investigates report](#):

One official who was present in the unnamed country's negotiations described Pfizer's demands as "high-level bullying" and said the government felt like it was being "held to ransom" in order to access life-saving vaccines.

Ironically, in the EU, the reported deaths and injuries were used by the European Commission to cancel the renewal of the contract with AstraZeneca, despite the fact that there were substantially more deaths and injuries associated with the Pfizer-BioNTech vaccine.

In April 2021, the EU Commission confirmed that it would "end AstraZeneca and J&J vaccine contracts at expiry". "The Pfizer shot will take precedence". Never mind your followup dose with AstraZeneca, the health authorities have instructed people to get their second or third jab with Pfizer or Moderna (thereby visibly violating medical norms).

Having sidelined its competitors, Pfizer-BioNTech has jacked up the price of the vaccine vial. Pfizer has literally cornered both the EU and US markets. **A near global vaccine monopoly is in the making.**

The European Union

In mid-April 2021 the President of the European Commission confirmed that Brussels is in process of negotiating a contract with Pfizer for the production of **1.8 billion mRNA vaccine doses, which represents 23 percent of the World's population.**

That's **exactly four times the population of the 27 member states of the European Union** (448 Million, 2021 data), which confirms that several followup doses of the "killer vaccine" are envisaged, despite the trend in mortality and morbidity which the governments and the media are attempting to suppress as part of a hideous disinformation campaign.

Pfizer and the US Market

A similar pattern is occurring in the US and Canada. In July 2020, Pfizer signed a \$1.95 billion contract with the U.S. government for **100 million doses**. And then in December 2020 another 100 million doses were delivered.

In Canada, another 35 million doses of Pfizer and Moderna vaccine vials are slated to be delivered.

And now July 2021 the Biden administration has ordered **200 million more doses of the Pfizer vaccine**. "for children's shots and possible boosters"

But that's not all: in early June 2021, Biden ordered **500 million Pfizer-BionTech doses of the "killer virus" to be sent as "US Aid" to developing countries** (courtesy of Uncle Sam). What is the underlying intent?



In most Western countries including the US and Canada, the retail price of the vaccine is "Free".

In the US, the purchase of 900 million doses of Pfizer-BionTech vaccine vials is Big Money for Big Pharma: Massive profits for Pfizer, all of which are slated to be financed by tax revenues coupled with a dramatic expansion of the US public debt.

In the first quarter of 2021 (January through March 2021), the gross revenues accruing to [Pfizer and Moderna were as follows](#):

#1. Pfizer-BioNTech COVID-19 vaccine. U.S. sales were **\$2.038 billion**; global sales were **\$5.833 billion**.

#2. Moderna COVID-19 vaccine. U.S. sales, **\$1.358 billion**; global sales, **\$1.733 billion**.

Recently announced (23 July 2021), Pfizer has jacked up the price of its vaccine vial from \$19.50 to \$28.00.

Multiply \$28.00 by three vaccine doses per person for a World population of 7.9 billion, What do you get?

This is not an estimate, it's an "order of magnitude": 663.6 billion dollars (\$28.00 x 3 x 7.9 billion = \$663.6 billion).

It is all for a good cause: save lives?

We are talking about a multi-billion dollar operation at tax payers expense, which has resulted in a **pattern of vaccine related deaths and injuries**. And the governments are fully aware of what is happening.

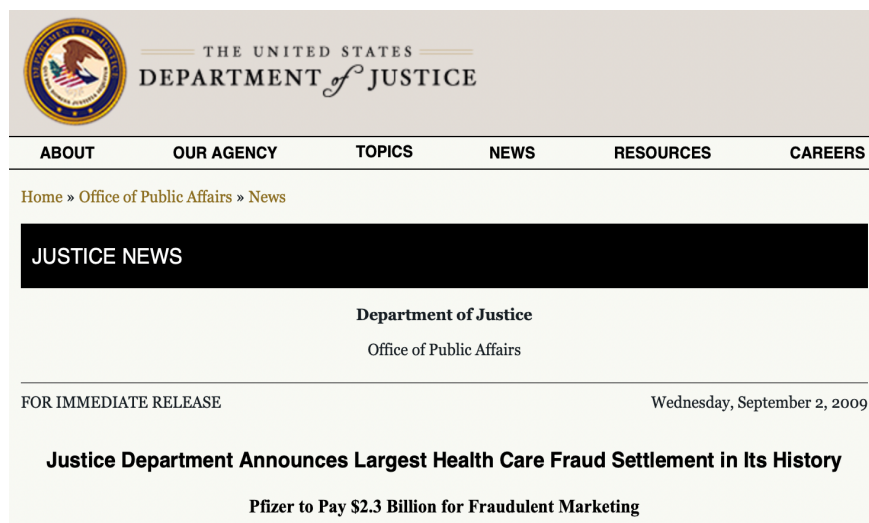
Pfizer's Criminal Record

Is Pfizer "a reliable partner" as claimed by the EU Commission **President van der Leyen**?

A global vaccine monopoly is unfolding controlled by a company which has a criminal record (2009) with the US Department of Justice.

It was not the routine civil class action law suit waged against the pharmaceutical industry. It was a criminal indictment for "fraudulent marketing". While there were no arrests, Pfizer was so to speak "Put on Parole" under a US DOJ indictment.

In a historic [US Department of Justice decision in September 2009](#), Pfizer Inc. pleaded guilty to criminal charges. It was **"The Largest Health Care Fraud Settlement"** in the History of the U.S. Department of Justice.



To view the [C-Span Video Click Screen below](#)



Pfizer to Acquire A Near Monopoly of the Global Covid Vaccine Market

And now among all major Big Pharma actors, it's a company with a criminal record which has established a de facto near monopoly at a World Level.

Can we trust a Big Pharma vaccine conglomerate which pleaded guilty to criminal charges by the US Department of Justice (DoJ) including "fraudulent marketing" and "felony violation of the Food, Drug and Cosmetic Act"?

'Fraudulent marketing' in the case of the Pfizer-BioNTech's "killer vaccine" is a gross understatement. **What is the Value of Human Life? There is no monetary value to human life**

Can we trust the politicians in high office who granted these multibillion Euro/dollar contracts to Pfizer, which are funded by tax revenues?

Is this a "mistake" on the part of the national health authorities? The experimental mRNA "vaccine" has resulted in an upward trend in mortality and morbidity Worldwide. Meanwhile, Big Pharma profits are in the hundreds of billions.

And governments, acting on behalf of Big Pharma are pressuring people to get vaccinated to no avail imposing penalties to those who refuse.

National health authorities claim that the Covid-19 "vaccine" will save lives. That's a lie.

Do we Know What's inside the Pfizer Vaccine Vial?

The causes of vaccine related deaths and injuries have not been addressed by the health authorities.

What is inside the vaccine vial? National health authorities have not made public the results of their lab exams. It is unclear as to whether those lab exams of the vaccine vials have been conducted.

Below is a review of the analysis and laboratory research conducted by the independent Quinta Columna Spanish team.

Graphene Oxide Nano-particles

According to lab exams conducted by the [Spanish Quinta Columna research team](#), **graphene oxide nano-particles** have been detected in the vial of the Pfizer mRNA vaccine.

The preliminary results of their research (analysis by electron microscopy and spectroscopy) are far-reaching. Graphene oxide is a toxin which triggers thrombi and blood coagulation. It also has an impact on the immune system. Graphene oxide accumulated in the lungs can have devastating impacts.

Video: Interview with Ricardo Delgado Martin



The results of the Spanish study, **yet to be fully confirmed and ascertained**, suggest that the recorded vaccine related deaths and “adverse events” (quoted above for the EU, UK and US) could be the result of graphene oxide nano-particles contained in the Covid vaccine vial.

This is a controversial study. There are scientists and medical doctors who disagree with the results of the Spanish study.

The evidence has to be either ascertained or refuted. What is required is that independent scientists and health professionals conduct their own lab analysis of the contents of the vaccine vial.

Similarly, we call upon the national health authorities of the 193 member states of the UN which are currently vaccinating their people, to conduct their own study and analysis of the vaccine vial. And if graphene-oxide is detected, the vaccination program should immediately be discontinued.

See [summary of their report](#) entitled **Graphene Oxide Detection in Aqueous Suspension, Observational study in Optical and Electron Microscopy. Full Study (English)**

Also of significance, (acknowledged by national health authorities) graphene oxide nano-particles are also contained in [the face mask](#).

The Electromagnetic Properties of the mRNA Vaccine

What is triggering the electromagnetic effects which have been detected in people who have been vaccinated?

These effects have been amply documented and confirmed by independent sources including those vaccinated. The national health authorities have failed to provide an explanation.

See the study conducted by the [European Forum for Vaccine Vigilance](#).

Below are two videos produced by the Spanish Research team at La Quinta Columna.

Video

MagnetGate: Dr. Pedro Chávez documents case of patient who took the flu shot a...



To watch the video below click [HERE](#). (or [screen below](#))

Video



Concluding Remarks. The Vaccine Passport

The data from official sources quoted above confirm unequivocally that the Covid-19 “vaccine” has resulted in an upward trend in vaccine related mortality and morbidity.

In turn, the studies of Dr. Charles Hoffe and the Spanish Research Team (Quinta Columna) which remain to be fully ascertained, point to possible “future impacts” of the vaccine on human health.

According to official data based on reported / registered deaths and injuries, there is no doubt: **this is a “killer vaccine”**.

So why are governments pressuring people to get vaccinated?

Heads of State and heads of government Worldwide are being pressured, bribed, coopted and/or threatened by powerful financial interests into accepting the Covid vaccine consensus.

The vaccine passport is the endgame, which constitutes a transition towards **digital tyranny**.

At the time of writing, the vaccine passport has already been imposed in several countries including France and Italy.



In France, this was not an initiative of president **Emmanuel Macron** (it was imposed upon him). Macron is a political proxy acting on behalf of the financial and billionaire foundations. Macron is a former bank staff of the Rothschilds.

In turn, the Italian Prime Minister **Mario Draghi** (former president of the European Central Bank) is an instrument of Goldman Sachs.

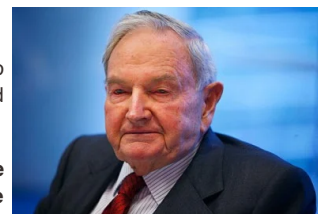
Bill Gates has played a key role. His foundation finances the WHO.

He has developed ties at a personal level with numerous heads of state and heads of government in all major regions of the World with a view to effectively carrying out this vaccine project.

The global capitalist elites control the so-called “classe politique”. The governments are liars.

From the very outset, the unspoken objective of the corona crisis (based on lies and deception) was to ultimately impose the contours of a Worldwide totalitarian regime, entitled “**Global Governance**” (by unelected officials). In the words of **the late David Rockefeller**:

“...The world is now more sophisticated and prepared to march towards **a world government. The supranational sovereignty of an intellectual elite and world bankers** is surely preferable to the **national auto-determination practiced in past centuries.**” (quoted by *Aspen Times*, August 15, 2011, emphasis added)



The Global Governance scenario imposes an agenda of social engineering and economic compliance.

The “intellectual elite” referred to by David Rockefeller is made up of numerous generously funded “scientists”, technocrats and “scholars” (e.g. Drosten, Neil Ferguson, et al) whose models and research findings have been used to justify the lockdown policies and the “killer vaccine”.

The mRNA vaccine should be halted and discontinued immediately Worldwide

The Protest Movement. Bastille 2.0

Acts of protest and resistance must question the legitimacy of both the financial architects of this crisis as well as the governments involved in imposing the vaccine:

The legitimacy of politicians and their powerful corporate sponsors must be questioned, including the police state measures adopted to enforce the closure of economic activity, the imposition of a digital vaccine passport as well as the wearing of the face mask, social distancing, etc.

This network must be established (nationally and internationally) at all levels of society, in towns and villages, work places, parishes. Trade unions, farmers organizations, professional associations, business associations, student unions, veterans associations, church groups would be called upon to integrate this movement.

The first task would be to disable the fear campaign and media disinformation as well put an end to Big Pharma's Covid vaccination programme.

The corporate media should be directly challenged, without specifically targeting mainstream journalists, many of whom have been instructed to abide by the official narrative. This endeavour would require a parallel process at the grassroots level, of sensitizing and educating fellow citizens on the nature of virus, the impacts of the vaccine and the lockdown.

"Spreading the word" through social media and independent online media outlets will be undertaken bearing in mind that Google as well as Facebook are instruments of censorship.

The creation of such a movement, which forcefully challenges the legitimacy of the financial elites as well as the structures of political authority at the national level, is no easy task. **It will require a degree of solidarity, unity and commitment unparalleled in World history.**

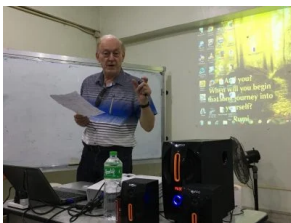
It will also require breaking down political and ideological barriers within society (i.e. between political parties) and **acting with a single voice.**

We must also understand that the "corona project" is an integral part of the U.S. imperial agenda. It has geopolitical and strategic implications. It will also require eventually unseating the architects of this diabolical "pandemic" and indicting them for crimes against humanity. ([Michel Chossudovsky](#), December 2020. With some minor changes)

In the words of Doctors for Covid Ethics:

"The Gene-based "Vaccines" are Killing People. Governments Worldwide Are Lying to You the People, to the Populations They Purportedly Serve"

About the Author



Michel Chossudovsky is an award-winning author, Professor of Economics (emeritus) at the University of Ottawa, Founder and Director of the Centre for Research on Globalization (CRG), Montreal, Editor of Global Research.

He has undertaken field research in Latin America, Asia, the Middle East, sub-Saharan Africa and the Pacific and has written extensively on the economies of developing countries with a focus on poverty and social inequality. He has also undertaken research in Health Economics (UN Economic Commission for Latin America and the Caribbean (ECLAC), UNFPA, CIDA, WHO, Government of Venezuela, John Hopkins *International Journal of Health Services* (1979, 1983)

He is the author of twelve books including *The Globalization of Poverty and The New World Order* (2003), *America's "War on Terrorism"* (2005), *The Globalization of War, America's Long War against Humanity* (2015).

He is a contributor to the *Encyclopaedia Britannica*. His writings have been published in more than twenty languages. In 2014, he was awarded the Gold Medal for Merit of the Republic of Serbia for his writings on NATO's war of aggression against Yugoslavia. He can be reached at crgeditor@yahoo.com

See Michel Chossudovsky, Biographical Note

[Michel Chossudovsky's Articles on Global Research](#)

APPENDIX

Below are details on the three main criteria outlined at the outset of this article which are used to uphold the official narrative as well as justify the implementation of a Worldwide vaccination program with a view to saving lives.

1. there is no killer virus
2. the measurement of covid positive cases is invalid
3. the Covid-19 mortality data is manipulated.

Much of the analysis and statements below are contained in Chapter III of Michel Chossudovsky's E-Book entitled

[The 2020-21 Worldwide Corona Crisis: Destroying Civil Society, Engineered Economic Depression, Global Coup d'État and the "Great Reset"](#)

as well in an article entitled

[The WHO Confirms that the Covid-19 PCR Test is Flawed: Estimates of "Positive Cases" are Meaningless. The Lockdown Has No Scientific Basis](#)

1. There is No Killer Virus

SARS-CoV-2 is presented and upheld as "a killer virus". That's the cornerstone of the 24/7 fear and media disinformation campaign upheld by persistent statements by politicians and national health authorities.

It is a killer virus? Both the peer-reviewed as well the WHO, CDC "official" definitions of SARS-CoV-2 say exactly the opposite. Their definitions of SARS-2 repeal their own lies.

The World Health Organization says those who become infected generally experience mild illness and recover in about two weeks.

Screenshot The Hill, March 19, 2020

Lies through omission: the media has failed to reassure the broader public.

Below is the official [WHO definition of Covid-19](#):

Coronaviruses are a large family of viruses which may cause illness in animals or humans. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The most recently discovered coronavirus causes coronavirus disease COVID-19.

"The most common symptoms of **COVID-19** are fever, dry cough, and tiredness. ... These symptoms are usually mild and begin gradually. Some people become infected but only **have very mild symptoms**. Most people (about 80%) recover from the disease without needing hospital treatment. Around 1 out of every 5 people who gets COVID-19 becomes seriously ill and develops difficulty breathing."

According to **Anthony Fauci** (Head of NIAID), **H. Clifford Lane** and **Robert R. Redfield** (Head of CDC) in the [New England Journal of Medicine](#)

"...the overall clinical consequences of Covid-19 may ultimately be **more akin to those of a severe seasonal influenza** (which has a **case fatality rate of approximately 0.1%**) or a pandemic influenza (similar to those in 1957 and 1968) rather than a disease similar to SARS or MERS, which have had case fatality rates of 9 to 10% and 36%, respectively."

Dr. Anthony Fauci is lying to himself. In his public statements he says that Covid is "[Ten Times Worse than Seasonal Flu](#)".

He refutes his peer reviewed report quoted above. From the outset, Fauci has been instrumental in waging the fear and panic campaign across America:

CORONAVIRUS

COVID-19 Mortality Rate 'Ten Times Worse' Than Seasonal Flu, Says Dr. Anthony Fauci

Initial hopes that the public health consequences of the new coronavirus would be mild are fading.

RONALD BAILEY | 3.11.2020 6:00 PM



The World Health Organization says those who become infected generally experience mild illness and recover in about two weeks.

Screenshot The Hill, March 19, 2020

Covid-19 versus Influenza (Flu) Virus A and Virus B (and subtypes) (Bear in mind seasonal influenza is not a coronavirus)

Rarely mentioned by the media or by politicians: [The CDC](#) (which is an agency of the US government) confirms that Covid-19 is similar to Influenza

"Influenza (Flu) and COVID-19 are both contagious respiratory illnesses, but they are **caused by different viruses**. COVID-19 is caused by infection with a new coronavirus (called SARS-CoV-2) and flu is caused by infection with [influenza viruses](#). Because some of the symptoms of flu and COVID-19 are similar, it may be hard to tell the difference between them based on symptoms alone, and testing may be needed to help confirm a diagnosis. Flu and COVID-19 share many characteristics, but there are some key differences between the two."

If the public had been informed and reassured that Covid is "similar to Influenza", the fear campaign would have fallen flat.

The 2020-21 Worldwide Corona Crisis: Destroying Civil Society, Engineered Economic Depression, Global Coup d'État and the "Great Reset"

By [Prof Michel Chossudovsky](#),

2. The Measurement of Covid Positive Cases is Invalid

We are told that there is a pandemic characterized by a rising Worldwide trend of Covid-19 infection. This alleged trend is said to be corroborated by a rapidly increasing number of **covid positive cases**.

The methodology used to generate these figures is dependent upon the WHO sponsored **Real Time Reverse Transcription Polymerase Chain Reaction (rRT-PCR)** test, the estimates of which are tabulated Worldwide by the national health authorities.

While the estimates of the rRT-PCR have been questioned from the very outset, it is now confirmed beyond doubt that the rRT-PCR test adopted as a means to detecting the SARS-CoV-2 virus cases is **TOTALLY invalid**.

(This pertains to Covid positive data tabulated since late January 2020).

The Real Time Reverse Transcription Polymerase Chain Reaction (rRT-PCR) test was adopted by the WHO on January 23, 2020 as a means to detecting the SARS-CoV-2 virus, following the recommendations of a Virology research group (based at Charité University Hospital, Berlin), supported by the Bill and Melinda Gates Foundation. (For Further details see the [Drosten Study](#))

Exactly one year later on January 20th, 2021, the WHO retracts. They don't say "We Made a Mistake". The retraction is carefully formulated. (See [original WHO document here](#))

While the WHO does not deny the validity of their misleading January 2020 guidelines, they nonetheless recommend "Re-testing" (which everybody knows is an impossibility).

The contentious issue pertains to the number of amplification threshold cycles (Ct). According to Pieter Borger, et al

The number of amplification cycles [should be] less than 35; preferably 25-30 cycles. In case of **virus detection, >35 cycles** only detects signals which do not correlate with infectious virus as determined by isolation in cell culture...(Critique of Drosten Study)

The World Health Organization (WHO) tacitly admits one year later that ALL PCR tests conducted at a 35 cycle amplification threshold (Ct) or higher are INVALID. But that is what they recommended in January 2020, in consultation with the virology team at Charité Hospital in Berlin.

If the test is conducted at a 35 Ct threshold or above (which was recommended by the WHO), segments of the SARS-CoV-2 virus cannot be detected, which means that **ALL the so-called confirmed "positive cases" tabulated in the course of the last 14 months are invalid**.

According to [Pieter Borger](#), [Bobby Rajesh Malhotra](#), [Michael Yeadon](#), et al, the Ct > 35 has been the norm "in most laboratories in Europe & the US".

The WHO's Mea Culpa

Below is the WHO's carefully formulated "Retraction". The full text with link to the original document is in annex:

WHO guidance [Diagnostic testing for SARS-CoV-2](#) states that **careful interpretation of weak positive** results is needed (1). **The cycle threshold (Ct)** needed to detect virus is inversely proportional to the patient's viral load. Where test results do not correspond with the clinical presentation, **a new specimen should be taken and retested** using the same or different NAT technology. (emphasis added)

WHO reminds IVD users that disease prevalence alters the predictive value of test results; as disease prevalence decreases, **the risk of false positive increases** (2). This means that the probability that a person who has a positive result (SARS-CoV-2 detected) is truly infected with SARS-CoV-2 decreases as prevalence decreases, irrespective of the claimed specificity.

"Invalid Positives" is the Underlying Concept

This is not an issue of **"Weak Positives"** and **"Risk of False Positive Increases"**. What is at stake is a "Flawed Methodology" which leads to **invalid estimates**.

What this admission of the WHO confirms is that **the estimate of covid positive from a PCR test** (with an amplification threshold of 35 cycles or higher) is **invalid**. In which case, the WHO recommends retesting: **"a new specimen should be taken and retested..."**.

The WHO calls for **"Retesting"**, which is tantamount to **"We Screwed Up"**.

That recommendation is pro-forma. It won't happen. Millions of people Worldwide have already been tested, starting in early February 2020. Nonetheless, we must conclude that unless retested, **those estimates (according to the WHO) are invalid**.

The WHO Confirms that the Covid-19 PCR Test is Flawed: Estimates of "Positive Cases" are Meaningless. The Lockdown Has No Scientific Basis By Prof Michel Chossudovsky,

Another issue which has bearing on the Validity of the rT-PCR test is that **the SARS-1, (2003) was used in the PCR-test as a proxy for SARS-CoV-2, because no information was** available pertaining to the "isolation" and "identity" of SAR-CoV-2. This was recommended to the WHO on the grounds that the genetic fragments of SARS-1 are similar to those of SARS-CoV-2.

What it also implies is that statement regarding "variants" and mutations pertaining to SARS-CoV-2 are totally meaningless inasmuch as the PCR test from the outset included a similar 2003 virus as a proxy for SARS-CoV-2. i.e. mutations in relation to what? SARS-2 or SARS-Co-2 (the identity of which has not been made public).

The RT-PCR data cannot under any circumstances be used to justify the imposition of a vaccine, which is presented to public opinion as a means to saving lives, when in fact it is leading to an upward trend in vaccine related mortality and morbidity.

3. The Covid-19 Mortality Data is Manipulated

We are told that there is a rising trend of Covid-19 mortality, namely deaths which are allegedly the result of SARS-2 viral infection.

There is ample evidence that these Covid-19 related "probable" causes of death and the underlying data on Covid-19 mortality are manipulated by the national health authorities.

In the US, the mortality statistics pertaining to Covid-19 are **TOTALLY invalid**.

The "More Often than Not" Clause

On March 21, 2020 the following specific guidelines were introduced by the CDC regarding Death Certificates (and their tabulation in the National Vital Statistics System (NVSS). The instructions to the certifiers are to identify COVID-19 as the **"Underlying Cause of Death" "More Often Than Not"**.

Will **COVID-19 be the underlying cause of death?** This concept is fundamental. **The underlying cause of death** is defined by the WHO as "the disease or injury that initiated the train of events leading directly to death".

What the CDC is recommending with regards to statistical coding and categorization is that COVID-19 is expected to be the underlying cause of death **"more often than not."**

The CDC combines these two criteria. **"underlying cause of death", more often than not.**

The above directive is categorical. **Below are CDC concepts and justifications**

"The underlying cause depends upon what and where conditions are reported on the death certificate. However, the rules for coding and selection of **the underlying cause of death are expected to result in COVID-19 being the underlying cause more often than not.**"

Will COVID-19 be the underlying cause?

The underlying cause depends upon what and where conditions are reported on the death certificate.

However, the rules for coding and selection of the underlying cause of death are expected to result in COVID-19 being the underlying cause more often than not.

What happens if certifiers report terms other than the suggested terms?

If a death certificate reports coronavirus without identifying a specific strain or explicitly specifying that it is not COVID-19, NCHS will ask the states to follow up to verify whether or not the coronavirus was COVID-19.

As long as the phrase used indicates the 2019 coronavirus strain, NCHS expects to assign the new code.

However, it is preferable and more straightforward for certifiers to use the standard terminology (COVID-19).

(Screenshot of CDC report)

The certifier cannot depart from the CDC criteria. Covid-19 is imposed. [Read carefully the CDC criteria above:](#)

"What happens if certifiers report terms other than the suggested terms?"

There are no loopholes. These CDC directives have contributed to categorizing Covid-19 as the recorded "cause of death". Two fundamental concepts prevail throughout:

The "underlying cause of death"

The "More Often than Not" Clause which falsifies the Cause of Death

And these criteria are imposed despite the fact that the **RT-PCR test** used to corroborate the "cause of death" provides misleading results.

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