COVID-19 Cover-Up Plus New Delta Virus Fear Factor

"It is easier to fool someone than convince them they were fooled."

Mark Twain

You will Learn:

- How the Deep State convinced the masses to believe that there was a "Plandemic."
- How the statistics for the COVID-19 deaths were cooked.
- Why the Prestigeous British Medical Journal, The Lancet, publiushed an article stating that Hydroxychlorquine could kill you.
- Why Iver-Mectin was also trashed.
- The 22 adverse side-effects of the "vaccines" that the FDA did not want you to know.
- Why the inventor of the mRNA vaccine technology was erased from the Internet.
- Why the media is spinning the narrative of the new Delta Variant virus.

When: Thursday, July 8, 2021

Where: Zoom: click the Link: Zoom Meeting (https://us06web.zoom.us/j/88078238346?

pwd=ZENQVDNjY0RQMWxNVXRjd2w3WDFVZz09)

Time: 8:00 - 9:00pm

It's time to get enlightened and start to push back. The Powers to Be are attempting to run "Plandemic" 2.0 again. We cannot let it happen.

- 1. The fear mongering for the COVID-19 "Plandemic" was started by the Imperial College epidemiologist, Neil Ferguson. Professor Ferguson was paid the equivilent of 10 million dollars by the Gates Foundation to put out false predictions. Ferguson already had a failed history of predictions:
 - a. Ferguson was behind the disputed research that sparked the mass culling of eleven million sheep and cattle during the 2001 outbreak of foot-and-mouth disease. He also predicted that up to 150,000 people could die. There were fewer than 200 deaths. . . .
 - b. In 2002, Ferguson predicted that up to 50,000 people would likely die from exposure to BSE (mad cow disease) in beef. In the U.K., there were only 177 deaths from BSE.
 - c. In 2005, Ferguson predicted that up to 150 million people could be killed from bird flu. In the end, only 282 people died worldwide from the disease between 2003 and 2009.
 - d. In 2009, a government estimate, based on Ferguson's advice, said a "reasonable worst-case scenario" was that the swine flu would lead to 65,000 British deaths. In the end, swine flu killed 457 people in the U.K.

e. Last March, Ferguson admitted that his Imperial College model of the COVID-19 disease was based on undocumented, 13-year-old computer code that was intended to be used for a feared influenza pandemic, rather than a coronavirus. Ferguson declined to release his original code so other scientists could check his results. He only released a heavily revised set of code last week, after a six-week delay.

So the real scandal is: Why did anyone ever listen to this guy? Because the mainstream media did not do their do dilligence because they were compliciet in the "Plandemic."

COVID-19 Statistics were Exaggerated:

- Persons admited to the hospital provided a guaranteed bill of \$13,000 for just being diagnosed with COVID. If the patient underwent ventilator treatment they generated a \$39,000 bill. What an incentive for the hospitals to label patients with a diagnosis of COVID.
- A patient of mine whose father died of a heart attack had the cause of death on his certificate listed as COVID. When my patient confronted the hospital staff, they would nopt change the diagnosis.
- A good friend of mine whose sister worked directly under the mayor of a small town in NJ, told her brother that all dealth in their twon were listed as COVID regardless of the real cause.
- The PCR test was a hoax: Depending on how the test was run would determine a positive COVID diagnosis or a negatove diagnosis.
 - a. There are two main tests: antibody and PCR. In a nutshell, neither test is adequate to say HERE IS A NEW CASE. Both tests are unreliable and worthless. It's more of the con. Both tests will claim to show "new cases" when they DON'T. They might show some antibodies or a few

tiny fragments of what might possibly be a virus, but they show NOTHING that directly points to human illness. Relying on those tests would be on the order of laying down a bet on a game that isn't even scheduled. It's a farce.

b. Antibody tests, which purport to prove illness coming from a virus, are actually showing, at best, that the patient came in contact with a virus. Actually, before 1984, this was generally taken to mean the patient was in good shape. His immune system had defeated the germ. But then, for several no good reasons, the science was turned on its head. All of a sudden, a positive antibody test was taken to mean the patient was ill or would soon become ill. Nonsense, Farce.

c. The PCR test takes a tiny, tiny sample from a patient that might contain a virus, but the virus particle is far too small to comprehend. The PCR blows up that particle many times, so it can be analyzed. BUT the test says nothing about HOW MUCH virus, if any, is replicating in the patient's body. And you need millions and millions of a virus replicating in the body to even begin talking about a cause of actual illness.

AND both tests rely on the unwarranted assumption that a virus actually causing illness—VX-20—was truly discovered in the first place.

Armed with these pathetic tests, public officials begin reporting a new epidemic case here and a new one there, and pretty soon 40 countries have new cases, and the public falls for it, hook, line, and sinker.

And THAT'S HOW you stage a fake epidemic. The rest is pure publicity and lockdown and theater.

Why Hydroxychlorquine had to be trashed:

- a. The "Plandemic" was well orchestrated and in order to get "Emergency" approval for a "vaccine" there had to be no cures available.
- b. The Lancet, later retracted their article stating the Hydroxychloroquine would kill you.

The Lancet changes editorial policy after hydroxychloroquine Covid study retraction: https://www.theguardian.com/world/2020/sep/22/the-lancet-reforms-editorial-policy-after-hydroxychloroquine-covid-study-retraction

One of the world's leading medical journals, the Lancet, has reformed its editorial policies following a shocking case of apparent research misconduct involving the study of hydroxychloroquine as a treatment for Covid-19.

The establishment had to trash both Hydroxychloroquine and Iver-Mectin and any other remedy in order to get "Emergency approval" for the innoculations. Big Pharma had to show the government, FDA, that there were no cures available.

FDA knew the facts as far back as Oct 22, 2020. FDA Safety Surveillance of COVID-19 Vaccines: DRAFT Working list of possible adverse event outcomes ***Subject to change***

https://www.fda.gov/media/143557/download? fbclid=lwAR1oyVDDaW9sr4ImaIm_M5ztleZW35MWLYigvcWR7F4wfAQXvt M6wjEyB4Y

- § Guillain-Barré syndrome: Weakness and tingling in your extremities
- § Acute disseminated encephalomyelitis
- § Transverse myelitis: condition where the spinal cord is inflamed

- § Encephalitis/myelitis/encephalomyelitis/ meningoencephalitis/meningitis/ encepholapathy
- § Convulsions/seizures
- § Stroke
- § Narcolepsy: is a chronic neurological disorder that affects the brain's ability to control sleep-wake cycles.
- § Anaphylaxis: severe allergic reaction; throat swells
- § Acute myocardial infarction: heart attack
- § Myocarditis/pericarditis: inflammation of the heart
- § Autoimmune disease
- § Deaths
- § Pregnancy and birth outcomes: miscarriages and deformities
- § Other acute demyelinating diseases
- § Non-anaphylactic allergic reactions
- § Thrombocytopenia: abnormally low levels of platelets
- § Disseminated intravascular coagulation
- § Venous thromboembolism: blood clots
- § Arthritis and arthralgia/joint pain
- § Kawasaki disease: Kawasaki disease causes swelling (inflammation) in the walls of medium-sized arteries throughout the body. It primarily affects children. The inflammation tends to affect the coronary arteries, which supply blood to the heart muscle.
- § Multisystem Inflammatory Syndrome in Children
- § Vaccine enhanced disease: systemic inflammation making the person more susceptable to other diseases.

Why the inventor of the mRNA vaccine technology was erased from the Internet.

June 11, 2021, the inventor of the mRNA vaccine technology,1 Dr. Robert Malone, spoke out on the DarkHorse podcast about the potential dangers of COVID-19 gene therapy injections, hosted by Bret Weinstein, Ph.D. The podcast was quickly erased from YouTube and Weinstein was issued a warning.

To censor a scientific discussion with the actual inventor of the technology used to manufacture these COVID-19 shots is beyond shocking. But the censorship of Malone goes even further than that. Malone's scientific accomplishments are also being scrubbed.

- Malone is concerned about government not being transparent about risks, and that people are being coerced into taking these experimental injections, which violates bioethics laws
- He believes the risks outweigh the benefits in children, teens and young adults, and that those who have recovered from natural SARS-CoV-2 infection should not get the injection
- Five days after his DarkHorse podcast appearance, Malone's scientific accomplishments and contributions were scrubbed from Wikipedia
- As recently as June 14, 2021, Malone's contributions were extensively included in the historical section on RNA vaccines' Wikipedia page. June 16, his name was removed and his accomplishments attributed to nameless researchers at the Salk Institute, the University of California, and the University of Wisconsin

Why the media is spinning the narrative of the new Delta Variant virus.

A new, more transmissible form of SARS-CoV-2 is rapidly spreading in the country and poses a threat to unvaccinated and partially vaccinated people.

- The Deep State needs another reason to spread fear amongst the population, force people to lockdown, wear masks again, and take the innoucations.
- Of 33,206 Delta variant cases admitted to the hospital, 19,573 were not vaccinated. Of those, 23 (or 0.1175%) died. But, of the 13,633 patients who were vaccinated with either one or two doses, 19 (or 0.1393%) died, which is an 18.6% higher death rate than for the unvaccinated patients. Seven of the 5,393 patients who were partially vaccine with one dose died, or 0.1297%.
- Of the 1,785 patients who had both vaccine doses 14 days or more before admission, 12 (or 0.6722%) died. This death rate is 5.72 times higher than that for unvaccinated patients. Put another way, if all 33,206 patients had been fully vaccinated, there would have been 223 deaths.
- Variants are unlikely to pose significantly differing risk to people with natural immunity compared to the original, as resistance is primarily based on your T cells, which have been shown to recognize and attack variants that are up to 80% dissimilar. SARS-CoV-2 variants are at most 0.3% dissimilar from the original, which means T cell immunity will easily recognize and protect against them.

Why Was a Disgraced Disease Modeler Relied on Yet Again?

In the U.S., Delta accounts for about 10% of cases and is doubling every two weeks, according to the former Food and Drug Administration commissioner Dr. Scott Gottlieb, who spoke about the variant on a "Face the Nation" broadcast June 13, 2021.

According to Gottlieb, Delta is likely to "spike a new epidemic heading into the fall." Showing just how crazy a repeat this is, Gottlieb is again citing data from Neil Ferguson. Yahoo! News calls Ferguson a "prominent British epidemiologist" but in fact, the man is beyond untrustworthy and has been thoroughly — and publicly — disgraced.

His only prominence is that of a failed statistician whose models have been repeatedly proven faulty to a ridiculous degree. The fact that Gottlieb is again using Ferguson's models ought to set off warning bells that this is fear propaganda to justify even further COVID jabs and nothing else.

The take-away from the new fear mongering is to boost your immune system with:

- 1. Glutathione
- 2. Curcumin
- 3. Zinc
- 4. Vitamin C
- 5. Vitamin D₃
- 6. Organic, cold pressed oils
- 7. Reduce your intake of processed foods, sugar, caffeine, and adulterated oils found in snake foods.