

Medical Timeline of Covid P(I)andemic Starting 2009

2009

New system for monitoring global health events

EU Medical Information System (MedISys) is an internet monitoring and analysis system developed and managed by JRC, provides global Public Health focused events surveillance, which upon automated threat analysis will generate alerts.

The information processed by MedISys is derived from the Europe Media Monitor (EMM) also developed by the Europe's Joint Research Center (JRC).

EMM developed around 2009

Automated latest news from or about Australia

February 1, 2009

Lipid Nanoparticle developer Acuitas Therapeutics is founded

Acuitas Therapeutics is a private company incorporated in British Columbia, Canada. They were founded in February 2009 (initially as AICana Technologies). Their "goal is to apply nanotechnology delivery solutions to improve the therapeutic options available to patients." They are the developers of the **lipid nanoparticle (LNP)** used to delivery mRNA code into cells. [1, 2]

By 2013 they used "rational design" to synthesize "over 200 novel cationic lipids and then screened these in an in vivo model system". The process starts with "a key lipid component of stable nucleic acid lipid particles (SNALP)" and has "resulted in the identification of LNP compositions with greatly improved potency and therapeutic index". [5]

They have "partnered with Alnylam Pharmaceuticals [USA], the University of British Columbia [Canada], IRAP and others on several research and development programs relating to systemic delivery of nucleic acid therapeutics. "

Acuitas owns intellectual property (IP) rights to LNP technology for development of protein replacement therapeutics.

In 2013 the company found "proof of concept" using mRNA that coded for luciferase, that the Acuitas LNP traveled to the liver when administered intravenously and the cells manufactured and expressed luciferase. [3]

Acuitas Therapeutics' lipid nanoparticles are labelled ALC-0315 and ALC-0159 [4] and are used by BioNTech-Pfizer in their CV-19 vaccine.

May 6, 2009

WHO changes the definition of a 'pandemic'

By May 2009 the World Health Organization (WHO) had lowered the standards for defining a pandemic, not taking into account the number of infections and death (page 9, point 25), allowing for a 'pandemic' to be declared when a **new** virus is **NOT** causing serious harm to most of the population. [2]

A 'pandemic' post-May 2009 can be declared simply if "a disease epidemic occurs when there are more cases of that [new] disease than normal." Previously an "enormous number of deaths and illness" was included in the criteria.

By changing the definition of "pandemic" in 2009 the WHO can declare a PHEIC for the seasonal flu across the globe, excessive mortality and relative lethality are **no longer a criteria** to be considered. Declaring a PHEIC is grounds for using vaccines under emergency status.

On the same day Jaques Attali, a French political theorist and special advisor to presidents wrote:

History teaches us that humanity only evolves significantly when it is truly **afraid**. The [H1N1 swine flu] pandemic that is beginning could trigger one of these structuring fears.

We will then come to the point, much more quickly than would have been possible on economic grounds alone, of putting in place the **foundations of a true world government**.

February 24, 2020 WHO states: "*A pandemic is the worldwide spread of a new disease.*" [1]

June 11, 2009

WHO declares H1N1 influenza a pandemic

In 2009, a new H1N1 influenza virus emerged, causing the first global flu pandemic in 40 years, called Swine Flu. On **June 11, 2009**, the World Health Organization (WHO) declared it a pandemic and raised the worldwide pandemic alert level to phase 6, which means the virus was spreading to other parts of the world. A month earlier the definition of pandemic was changed! [1, 2]

There was a big push for a fast-tracked vaccine, and 4 months after the declared pandemic, in October 2009 the vaccines rolled out, with manufacturers indemnified! Depending on the countries regulator, clinical trials were either 4 weeks in a few people or not required at all "as many clinical trials were done with similar annual vaccine preparation, and the **assumption** is that the new pandemic vaccine will behave similarly," thus shortening the timeline of for approval. [11]

England had ordered 132 million doses before there was any trial data. Only 6 million people, mainly pregnant women and children took the vaccine. The US CDC in July 2009 stopped testing, and said to diagnose "probable" or "presumed" as H1N1, thus exaggerating cases, but also advised recovered patients to "go ahead and get vaccinated anyway". [5, 6]

In August 2010, a few months into vaccine roll out Finland, Sweden and Iceland identified a problem in children and adolescents who developed narcolepsy. [4, 7] In February 8, 2011 the WHO reported 12 countries with narcolepsy cases, but advised

to vaccinate anyway as it appears to be associated with only GSK Pandemrix vaccine and not a “general worldwide phenomenon”. The vaccine was also attributed to febrile convulsions and miscarriage.

It took until 2013 before public health England acknowledged they had a narcolepsy problem too, and only 11 years later, in 2020 did public health England published more data that says in retrospect it was worse than we thought! [3, 8, 9, 10]
CDC timeline >>>

September 2, 2009

Pfizer agrees to pay \$2.3 billion for fraud settlement

Pharmaceutical giant Pfizer agrees to pay \$2.3 billion for fraudulent marketing with the intent to defraud or mislead. This is the largest health care fraud settlement in the US Justice Department’s history. [1, 2, 3, 4]

In 2009 Pfizer’s total revenue was around \$50 billion, with a declining trend from 2011 to 2020. [5]. Vaccine revenue in 2021 are responsible for 60% of Pfizer’s sales, with an expected \$36 billion from vaccines alone!
Will this Big Pharma company be a repeat offender in 2020?

October 1, 2009

USAID establishes the Emerging Pandemic Threats Program (EPT-1)

October 2009, the U.S. Agency for International Development (USAID) launched the **Emerging Pandemic Threats** program (**EPT-1**), a 5-year program targeting “the early detection of new disease threats; enhanced ‘national-level’ preparedness and response capacities for their effective control; and a reduction in the risk of disease emergence by minimizing those practices and behaviors that trigger the ‘spill-over and spread’ of new pathogens from animal reservoirs to humans.” [1, 2]

This effort “grew out of a recognition that we are now in an era of new, re-emerging and recurring global health threats that argue for a longer-term, more strategic approach to global health security.”

“EPT-1 and Avian Influenza work has been focused on building those capacities and expanding the evidence base that contributes to mitigating the impact of **novel** “high consequence pathogens” arising from animals.”

In 2014 **EPT-2** was born which “will also make major contributions to the Global Health Security Agenda to more effectively address threats posed by the natural emergence of new disease threats, as well as the intentional and/or accidental release of dangerous pathogens.”

November 19, 2009

Climategate email scandal begins

Thousands of emails, from the University of East Anglia's **Climatic Research Unit** (CRU) were released on a server in the city of Tomsk in Siberia, Russia [19, 20, 21] on **November 19, 2009**, just before the Copenhagen Summit on Global Warming [8, 23, 24, 25]; the email scandal was coined **Climategate** first by James Delingpole. [1, 2, 3, 4, 6, 7, 9, 14, 22]

CRU, who's director is Professor Philip Jones, is recognized as one of the world's leading institutions concerned with the study of natural and anthropogenic [man-made] climate change, they keep "the global temperature record used to monitor the state of the climate system, as well as statistical software packages and climate models." They are a "small group of scientists who have for years been more influential in driving the worldwide alarm over global warming than any others, not least through the role they play at the heart of the UN's Intergovernmental Panel on Climate Change (IPCC)." [26]

"hundreds of internal emails written by scientists working at the CRU were obtained by a hacker [or whistleblower] and posted on the internet, some of which appeared to show that researchers had deliberately faked evidence of global warming by manipulating statistics" as climate warming was inconveniently lacking evidence. [8, 18]

"Researchers at CRU, one of the world's leading research bodies on natural and human-induced climate change, played a key role in the Intergovernmental Panel on Climate Change's (IPCC) Fourth Assessment Report, which is considered to be the most authoritative report of its kind" [15, 16]

On November 29, 2009 the CRU scientists were "forced to admit they had thrown away most of the raw data that their global temperature calculations were based upon" which means "other academics are not able to check basic calculations said to show a long-term rise in temperature over the past 150 years." [17] The Climategate scientists who conspired to delete emails, escaped criminal conviction on a "statute of limitations" technicality.

"The documents and emails illustrated how prominent climatologists, affiliated with the UN's International Panel on Climate Change [IPCC], embarked on a venomous and **coordinated campaign** to ostracize climate skeptics and use their influence to keep dissenting reports from appearing in peer-reviewed journals, as well as using cronyism to avoid compliance with Freedom of Information Act requests"

As reported, 2009 is when "Global Warming" become known as "Climate Change"! [5, 10, 11, 12, 13]

By 2010 when no warming has occurred for 15 years, Obama science advisor wanted to dump the term "global warming" for "global climate disruption"!

Why does IPCC always quote a temperature variation around a zero point?

What average global temperature does that zero point represent, 14 or 15 degrees C?

On the back of these "man-made" Climate Change claims, they also claim that human disease incidence is on the rise!

Climategate WATCH, NOTES

CNN version of Climategate: PART 1, PART 2, PART 3

Australian Bolt Report on Climate Science – 2011

2010

January 29, 2010

The “Decade of Vaccines” begins

At the WEF in Davos on January 29, 2010 Bill and Melinda Gates pledged their foundation would commit \$10 billion over the next 10 years to help research, develop and deliver vaccines for **the world’s poorest countries**.

“Increased vaccination could save more than 8 million children by 2020; significant funding gaps remain, others must join the effort.”

*“We must make this **the decade of vaccines**,”*
said Bill Gates.

“The foundation used a **model** developed by a consortium led by the Institute of International Programs at the **Johns Hopkins** Bloomberg School of Public Health to **project the potential impact of vaccines** on childhood deaths over the next 10 years. ...By significantly scaling up the delivery of life-saving vaccines in developing countries to **90 percent coverage**—including **new** vaccines to prevent severe diarrhea and pneumonia—the model suggests that we **could prevent** the deaths of some **7.6 million** children under 5 from 2010-2019...The new funding announced today is in addition to the \$4.5 billion that the Gates Foundation has already committed to vaccine research, development and delivery to date across its entire disease portfolio since its inception.” [3, 4]

*“The Gates Foundation’s commitment to vaccines is unprecedented, but just a small part of what is needed. It’s absolutely crucial that **both governments** and the **private sector step up efforts** to provide life-saving vaccines to children who need them most.”*

said WHO Director-General Margaret Chan

“The Gateses said that increased investment in vaccines by governments and the private sector could help developing countries dramatically reduce child mortality by the end of the decade...”

By December 2, 2010 global health leaders including the World Health Organization (WHO), UNICEF, the National Institute of Allergy and Infectious Diseases (NIAID) together with the Bill & Melinda Gates Foundation (BMGF) announced a collaboration to increase coordination across the international vaccine community and create a **Global Vaccine Action Plan**. “This plan will build on the successes of current work to achieve key milestones in the discovery, development and delivery of lifesaving vaccines to the most vulnerable populations in **the poorest countries** over the next decade.” [1, 2]

2010 marked Bill Gates’ second year of “full-time work was as co-chair of the [BMG] foundation”, along with Melinda and his father.

The WHO Global Vaccine Action Plan (GVAP) was endorsed by the 194 Member States of the World Health Assembly in May 2012 — is a framework to prevent millions of deaths by 2020 through more **equitable access** to existing vaccines for people in all communities.”

February 1, 2010

WBC for Sustainable Development release their “Vision 2050” report

The **World Business Council for Sustainable Development** (WBCSD) an independent organization established in 1995 released their **Vision 2050**: The New Agenda for Business report in February 2010. Providing a vision of “what could be” and “mapping out the **transformative changes** that would be necessary to allow over 9 billion people to be living well, within the boundaries of the planet” by 2050. [1, 2, 3, 4]

They see 2-time timeframes for the pathway forward: “the **Turbulent Teens**, from 2010 to 2020, and **Transformation Time**, from 2020 to 2050.” They believe “traits formed during the first decade mature into more consistent knowledge, behavior, and solutions. It is a period of growing consensus...” So that by 2020 through 2050 actions which “begun in the previous decade will gain momentum” and transformation will happen. [pg 10]

In this 2010 report on page 64, they conclude that “Crisis. Opportunity. It is a business cliché, but there is truth in it. The perfect storm we face, of environment, population, resources, and economy, will bring with it many opportunities” for example “*medicine to discover*”.

The report planned the next 40-year journey, and they invite governments and civil leaders to join them. “*Our leaders’ efforts to build back better are focused upon a recovery which appears to have been planned long before anyone had even heard of SARS-CoV-2.* [5, 6]

Their updated 2020 report, *A Time To Transform*, aims to **transform the global economy** to meet the United Nations Agenda 2030 Sustainable Development Goals (SDGs) and the targets of the Paris Agreement.[8, 9]

The COVID-19 “opportunity” has brought with it a “*Time to Transform*” from the *Turbulent Teens* (2010-2020) to Transformation.

Given this organization is linked to WEF, is their goal also for us (non-corporates) to “*own nothing and be happy.*”? [7]

April 1, 2010

Tripartite Collaboration between FAO-OIE-WHO is formed to address global health risks

On April 2010 three **international organisations FAO, OIE & WHO** released A *Tripartite Concept Note* document which “sets a strategic direction

for **FAO-OIE-WHO** to take together and proposes a long term basis for **international collaboration** aimed at coordinating global activities to address **health risks** at the human-animal- ecosystems interfaces.” [1]

- Food and Agriculture Organization of the United Nations (FAO)
- World Organization for Animal Health (WOAH, founded as OIE)
- World Health Organization (WHO)

“The emergence of new or the re-emergence of existing animal diseases, including zoonoses, the growing threat of transboundary animal diseases, the impact of environmental changes and globalization, as well as new societal demands related to food security, food safety, public health and animal welfare, emphasize the critical need for collaboration between the three organizations.” This builds the foundation for One Health.

- “In February 2021, the three organizations called on the United Nations Environment Program (UNEP) to join the Tripartite, reaffirming the importance of the environmental dimension of the One Health collaboration”
- On October 14, 2022, the United Nations Environment Program (UNEP) joined to become The Quadripartite Organizations

May 1, 2010

Rockefeller Report: Lock Step Scenario

A May 1, 2010 report called “*Scenarios for the future of technology and international development*” and sponsored by the Rockefeller Foundation was released. In it 4 different future scenarios were envisioned to explore how society might develop over the next 15-20 years.

The Lock Step “scenario” (pg. 18) covers **a pandemic** which the world has been anticipating! A deadly flu which spreads globally, leading to panic. China with it’s restrictive approach is seen to effectively manage the crisis, of which mask wearing remains in place even after the pandemic is over! [1]

It noted “citizens willingly gave up some of their sovereignty — and their privacy...in exchange for greater safety and stability,” including “biometric IDs for all citizens.” A scenario where “leaders around the world took a firmer grip on power.” It covers **lockdowns**, temperature checks, **masks** and more.

The studies underlying objective is to “seed a new strategic conversation among the key public, private, and philanthropic stakeholders about technology and development at the policy, program, and human levels.”

Ten years later in 2020 these “scenarios” are reality, and are being brought to the attention of parliament in 2021.

June 22, 2010

China & Australia study SARS-CoV potential to infect bat species, call for more surveillance

On June 22, 2010, Shi Zhengli from the Wuhan Institute of Virology in China along with other authors including two from **Australia's CSIRO** in Geelong, Victoria, published the study "*Angiotensin-converting enzyme 2 (ACE2) proteins of different bat species confer variable susceptibility to SARS-CoV entry*" which called for the "continuation and expansion of field surveillance studies among different bat populations" as "bats could be the natural reservoir of SARS-CoV" with 2 species in particular.

They looked at 7 additional bat species and "tested their interactions with human SARS-CoV spike protein using both **HIV-based** pseudo type and live SARS-CoV infection assays. ...Further, the alteration of several key residues either decreased or enhanced bat ACE2 receptor efficiency."

It was stated "chimeric ACE2 was constructed by combining the N-terminal region of bat ACE2 with the C-terminal portion of human ACE2"... to see if SARS-CoV that infects human cells could infect bat cells via ACE2 receptors.

The 2019 SARS-CoV-2 genome was said to have HIV insertions. Could this have resulted from continuation of this chimeric work? [1, 2]

September 21, 2010

Wildlife Trust rebrands itself as EcoHealth Alliance

In a press release September 21, 2010 the "Wildlife Trust", a non-profit international conservation organization founded in 1971, and stated to be "dedicated to protecting wildlife and safeguarding human and animal health", announced that the organization will be re-branded with a new name and tagline: **EcoHealth Alliance**, "Local Conservation, **Global Health**." [1, 2]

Dr. Peter Daszak, president of EcoHealth Alliance said

"Building on our strong history, we have grown beyond our original conservation focus to become the central organization defining the intersection of local conservation and global health...A leader in the One Health movement which began in 2004, EcoHealth Alliance is on the forefront of informing the public, businesses, and the scientific community about emerging diseases, including potential pandemics." [3]

Through The Intercept FOI requests over \$95 million of EcoHealth Alliance funding comes from USAID and US Department of Defense into potential "bioweapons" research. [4, 5]

November 4, 2010

Dr Ralph Baric co-authors paper on Zinc ionophores – an effective way to treat coronaviruses

Dr Ralph Baric of University of North Carolina Chapel Hill, co-authors a paper that demonstrates that **zinc** inhibits RNA-dependent RNA polymerase (RdRp), which functions as the core enzyme for the replication of positive-stranded RNA (+RNA) viruses such as influenza viruses and coronaviruses. Note COVID-19 vaccine mRNA is positively charged. But zinc cannot enter the cell without an ionophore. [1]

An ionophore is a fat-soluble substance that can transport non-fat soluble elements (such as zinc) across the cell membrane to aid entry into the cell, from there the zinc can inhibit viral replication. [2, 3]

Combining zinc with an ionophore such as hydroxychloroquine could inhibit viral replication, and thus prevent disease progression.

Dr Ralph Baric is intimately involved in coronavirus GOF research with Zhengli Shi from the Wuhan Institute of Virology, as well as he has received funding for work on Remdesivir (GS-5734) by Gilead.

2011

February 28, 2011

DNA: Its “purpose” and susceptibility may be different than what we’ve been taught

A paper published in Int. J. of Radiation Biology called “*DNA is a fractal antenna in electromagnetic fields*”, concludes that “DNA appears to possess the two structural characteristics of fractal antennas, electronic conduction and self-symmetry. These properties contribute to greater reactivity of DNA with **EMF** in the environment, and the **DNA damage** could account for increases” ...in adverse health outcomes such as cancer.

Science is still figuring out the complexities of our genetic material and the role it plays in life and health, and to introduce a brand-new gene-based technology referred to as a “vaccine” on the global population (2021), at the same time as rolling out 5G towers is alarming.

March 7, 2011

UN PrepCom 2 marks beginning of the Sustainable Development Goals

The United Nations Committee on Sustainable Development (UNCSD) hold their second session of the Preparatory Committee (PrepCom 2) at UN HQ in New York on March 7-8, 2011. This meeting marks the beginning of the **Zero Draft** version of “*The Future We Want*” report which forms the basis for the 2015 Sustainable Development Goals, along with “the scope of a green economy” which is adopted in the June 2012 second Earth Summit. [1, 2, 3, 4,]

June 1, 2011

Foundation for Vaccine Research is launched

As a progression from "It's Time Campaign", 14 scientists, led by Peter Hale, together with "advocacy experts" launch the **Foundation for Vaccine Research** incorporated in Washington DC on June 1, 2011. The aim of the foundation is "to create global awareness for the need for increased, flexible, long-term **funding for vaccine research**". [1, 2]

August 1, 2011

NIH funded the Single Cell Analysis Project (SCAP)

NIH launched the **Single Cell Analysis Project (SCAP)**, a 5 year Common Fund program aimed to:

1. Improve our understanding of cell heterogeneity, including defining cell types and dynamic cell states.
2. Accelerate the development of new innovative tools and approaches for cell analysis.
3. Accelerate the validation, translation, and adoption of new technologies.
4. Engage multidisciplinary teams and attract new approaches and researchers to the field.

Laying the foundation for the future global medical progression. [1]

Grant funding was awarded for such projects that encourage the development of "next-generation, innovative technologies to better define cell heterogeneity *in situ*." The techniques were to "provide new analytical measures and manipulations of cellular contents, structure and activity significantly beyond those currently available at the single cell level."

August 25, 2011

IOM: vaccine injury review – "the evidence is inadequate"

On September 25, 2008 a committee of experts met, who were convened by the **Institute of Medicine (IOM)** to review "the epidemiological, clinical, and biological evidence regarding adverse health events associated with specific vaccines covered by the Vaccine Injury Compensation Program."

Three years later, in a press release on **August 25, 2011**, they stated "[a]n analysis of more than 1,000 research articles concluded that few health problems are caused by or **clearly associated** with vaccines." Also they state "that while no vaccine is 100 percent safe, very few adverse events are **shown** to be caused by vaccines".

Their report "Adverse Effects of Vaccines" was published 2012. [Inadequate evidence!]

A key component of the 1986 **National Childhood Vaccine Injury Act** required the U.S. HHS to collaborate with the Institute of Medicine to assess the safety of vaccines and potential adverse events, especially in children.

The **National Academy of Sciences** web page specifically states “the MMR vaccine is not associated with autism or childhood diabetes”, but there are many more vaccines than just MMR.

The IOM review found that “*the evidence is inadequate to accept or reject a causal relationship between [DTaP] vaccine and autism.*” So when the CDC states there is “no evidence” that [all] vaccines cause autism [4] – they are correct, and through FOIA the CDC can produce NO evidence! [1, @27:30 2].

Also the one DTaP study which happened to “suggest an association between serious neurological disorders and whole-cell pertussis immunization” was “rejected” from the review as it “lacked an unvaccinated comparison population.”!

In 2023, Kathleen Stratton, a NASEM official AGAIN leads a panel of experts to assess, this time, the COVID-19 vaccine specific injury. [3]

September 16, 2011

Genome sequencing is now cheap and fast

On September 16, 2011, Richard Resnick in his TED talk revealed that genome sequencing is now so cheap and fast it will open up opportunities for personalized genome sequencing for health care, insurance and politics!

“Now what we do is we take a genome, we make maybe 50 copies of it, we cut all those copies up into little 50-base reads, and then we sequence them, massively parallel. And then we bring that into software, and we reassemble it, and we tell you what the story is.”

The Human Genome Project sequenced 3 gigabases which took 15 years, now one run on a modern machine can process 200 gigabases in a week, and that capacity is increasing and now **the price** of sequencing a base has fallen 100 million times! With a worldwide capacity to sequence human genomes is 50-100 thousand per year, in 2011 and the one **lab** that represents 20% of all the global capacity is the **Beijing Genomics Institute** (BGI) in China.

[BGI provided 10 million COVID-19 PCR test kits to Australia. It is known that the Chinese are building a DNA profiling database for genomic surveillance, which is of great concern for Australians.]

There is still much to learn about the human genome and genetic material. In March 2022 the first complete, gapless sequence of a human genome revealed there are hidden regions! “These unresolved regions include segmental duplications, ribosomal rRNA gene arrays, and satellite arrays that harbor unexplored variation of **unknown consequence**” [1]

October 31, 2011

Global population reaches 7 billion

On October 31, 2011, top United Nations officials marked the global population reaching **7 billion** with a call to action to world leaders to meet the challenges that a growing population poses.

The “implications of the new milestone for sustainability, urbanization and migration in a world where conflicts and weather disasters are driving people from their homes and climate change is exacerbating food and water shortages” provide “opportunities” to take action.

UN Secretary-General Ban Ki-moon “noted that the world’s population reached 6 billion in 1998, only 13 years ago, and it is expected to grow to 9 billion by the middle of this century, or even a few years earlier – by 2043.” According to the latest UN figures... the global population would “surge past 9 billion before 2050” and pass 10 billion by 2100 if current fertility rates continue at expected levels.”

With **climate change** allegedly linked to increased **disease epidemics** and population growth this is a significant milestone.

December 16, 2011

International Consortium for future pandemics is launched

The **International Severe Acute Respiratory Infection Consortium** (ISARIC) was launched on December 16, 2011, and is a group of international organizations taking part in a new global consortium organized to prepare clinical research for future influenza pandemics or other rapidly emerging public health threats.

Infectious outbreaks are not limited only to influenza outbreaks but are global phenomena that are occurring with increasing frequency.

The standardized and open-access protocols developed during this consortium will allow researchers from all participating countries to work with, adapt and evolve common clinical case ascertainment. This will ensure that high-quality and comparable clinical research is practiced on a global scale.

As part of The Global Health Network (TGHN) also funded by the Bill & Melinda Gates Foundation, ISARIC has “an overreaching ambition to change the way in which research is carried out during and between epidemics, ISARIC aims to address the social and ethical issues related to this paradigm change.”

The ISARIC is being launched by the Wellcome Trust, and the UK Medical Research Council, the Bill & Melinda Gates Foundation, Inserm, Li Ka Shing Oxford Global Health Program and the Singapore Ministry of Health.

2012

January 1, 2012

Chinese miners fall ill after shoveling bat faeces

Sometime in 2012 in Yunnan province, China, 6 miners become seriously ill with respiratory symptoms after shoveling bat feces at the bottom of a mine shaft. The

miner's respiratory virus (RaBtCoV/4991) was said to have come from **rufous horseshoe bats**.

The mineshaft floor was covered with a fungus. "Although the fungus turned out to be the pathogen that had sickened the miners" Shi speculated "it would only have been **a matter of time** before they caught the coronaviruses if the mine had not been promptly shut."

"Shi's team had been called in to investigate the virus profile of a mineshaft in Yunnan's mountainous Mojiang County—famous for its fermented Pu'er tea—where six miners suffered from pneumonia-like diseases (two of them died). After sampling the cave for a year the researchers discovered a diverse group of coronaviruses in six bat species. In many cases, multiple viral strains had infected a single animal, turning it into a flying factory of new viruses." [2]

Since 2013 the Wuhan Institute of Virology has been experimenting with these bat coronaviruses, including their use in 2015 controversial gain-of-function study. In February 3, 2020, Shi Zhengli *et al* published paper suggesting SARS-CoV-2 genome was almost 80% identical to that of SARS-CoV, the virus that caused SARS in 2002, but it was 96.2% similar to RaTG13 another genome from Yunnan bat caves. [1]

January 27, 2012

Highly pathogenic Influenza virus research voluntarily paused, Fauci argues for it.

On January 27, 2012 it was published that the influenza virus research community implemented a 60-day voluntary moratorium on "gain-of-function" experiments related to "highly pathogenic avian influenza H5N1 viruses leading to the generation of viruses that are more transmissible in mammals."

On October 9, 2012 Anthony Fauci, director of NIAID, and as a key funder of Influenza research, publishes "The Way Forward" for this kind of gain-of-function research. [1]

Fauci wrote "the benefits of such experiments and the resulting knowledge outweigh the risks. It is more likely that a pandemic would occur in nature, and the need to stay ahead of such a threat is a primary reason for performing an experiment that might appear to be **risky**."

February 19, 2012

The Davos Global Risk Forum sponsors the first One Health Summit

February 19-22, 2012, the first One Health Summit was held in Davos, Switzerland sponsored by the private membership entity called the Global Risk Forum. [1, 2]

The Summit presented the One Health concept as a way to manage health threats, focusing on food safety and security. The conference ended by approving the "**Davos**

One Health Action Plan,” which pinpointed ways to improve public health through multi-sectoral and multi-stakeholder cooperation. [3]

“Many emerging health issues are linked to increasing contact between humans and animals, the industrialization of food production, and environmental pollution. Global change has created new threats to the health of both animals and humans...[associated with the] systemic interconnections of human, animal and environmental health....Being a global movement at the interface of science, society, policy and practice, One Health is, therefore, also deeply interdisciplinary and cross-sectorial.”

February 22, 2012

Global Vaccine Safety: Blueprint, Plan and Initiative

In 2011 the WHO and a group of partners developed a strategic document on vaccine safety called the **Global Vaccine Safety Blueprint** (GVSB) published 22 February 2012. The Blueprint proposes a strategic plan for strengthening vaccine safety activities globally. It focuses on building national capacity for vaccine safety in the world’s poorest countries through the coordinated efforts of major stakeholders. [1, 4]

Three months after the GVS Blueprint was published 94 Member States at the 65th World Health Assembly endorsed the **Global Vaccine Action Plan** (GVAP) serving as a framework to guide immunization efforts through to the end of 2020.

The **Global Vaccine Safety Initiative** (GVSI) was set up to implement the Blueprint strategy and to provide WHO and partners with a framework for enhancing vaccine pharmacovigilance, that is to better detect, report, and analyze adverse events.

The eight strategic objectives (1-4 pharmacovigilance, 5-8 regulatory system)

1. Adverse Event Following Immunization (AEFI) detection
2. Investigation of safety signals
3. Vaccine safety communication
4. Tools and methods
5. Regulatory framework
6. Technical support and trainings
7. Global Analysis and response
8. Public-private information exchange

How it works: A Global Vaccine Safety Initiative meeting is a general meeting which guides the Global Vaccine Safety Initiative (GVSI) who is the implementation mechanism for the Global Vaccine Safety Blueprint. [2, 3]

As of 2021 the GVS Blueprint is under review, which began December 2018 and again June 2019, in line with deploying the new plan, **Immunization Agenda 2030** at the 73rd World Health Assembly in May 2020. No longer will vaccines be focused be on the “ the world’s poorest countries” they intend to “leave no one behind”.

April 2, 2012

UN Happiness Day born

The United Nations held the first ever High-Level Meeting on Happiness and Wellbeing: Defining a New Economic Paradigm.

Attended by Australia's Honorable Tim Fisher – comments in report.

UN International Happiness Day

Oct 2020 World Economic Forum (WEF) promoted "You will own NOTHING, and you WILL BE HAPPY". The Great Reset!

- Who is WEF?
- United Nations World Order

Annual World Happiness Reports started 2012 interlinking with **Sustainable Development** – stating independence from UN – NGO Partners.

April 20, 2012

Paper cautions use of coronavirus vaccine in humans

A paper published on April 20, 2012 testing a coronavirus vaccine in mice, concludes by warning of "proceeding to application of a SARS-CoV vaccine in humans" because of the reaction the mice experience upon challenged with the virus post vaccination. Many mice died because of immune priming or antibody dependent enhancement (ADE), where the vaccine induced an immune response that enhanced the bodies' reaction upon rechallenge, sending the animals into a cytokine storm.

April 26, 2012

Dr Fauci testifies to US Government on H5N1 transmissibility research

Dr Anthony Fauci testifies to the Committee on Homeland Security and Governmental Affairs regarding the "important and intense discourse" to recent manuscripts highlighting the potential risks of conducting "dual use research of concern" (DURC) on the H5N1 avian influenza virus.

These dual use experiments, that genetically manipulate pathogens, could "yield new information" and help "identify molecular targets on pathogenic microbes" that can lead to the development of new vaccines, but also has the potential for bioweapon applications, the latter being DURC.

DURC can yield products that if "misapplied...pose a significant threat with broad potential consequences to public health and safety."

The research is justified because of the worldwide "thread to public health" from seasonal and pandemic influenza, which is said to be "among the leading global cause of death due to infectious diseases" and is estimated by WHO to cause annually between "250,000 to 500,000 influenza-related deaths" globally.

Experimenting to see “which genetic mutations” alter virus transmissibility or pathogenicity using ferrets as models helps with the goal of developing a “universal” influenza vaccine, of which a “prime-boost” gene-based vaccine seems promising.

June 20, 2012

UN Rio+20: the Second Earth Summit: “The Future We Want”

On June 20-22, 2012 the first Earth Summit in 20 years was held again in Rio de Janeiro, Brazil this “marks the 40th anniversary of the first major international political conference that specifically had the word “environment” in its title”.

Officially known as the **United Nations Conference on Sustainable**

Development (Rio+20). The last Earth Summit was held in Rio in 1992. [1, 2, 3] 40th anniversary of the first major international political conference that specifically had the word “environment” in its title

In January 2012 the committee released their “Zero Draft” [6] version of what would be the final document titled “*The Future We Want*” an extension of the Brundtland Commission’s 1987 “*Our Common Future*” report [6]. Members states were asked to sign onto “10 new sustainable development goals for the planet”. The “zero draft” was developed by the Co-Chairs and Bureau of the UNCS D Preparatory Committee from March 2011 meetings in New York. [5]

The document was allegedly “leaked” to ahead of time [marketing?!]. [4]

Member States adopted the outcome document The Future We Want that launched a process to develop a set of Sustainable Development Goals (SDGs) to build upon the Millennium Development Goals. The SDGs were intended [for] all countries, not just developing countries. This paradigm shift moves away from outdated development assumptions of the past and ensures no one is left behind.” [7]

“The Conference also adopted ground-breaking guidelines on green economy policies” in the “context of sustainable development and poverty eradication”.

On March 14, 2013, the first 30-member Open Working Group (OWG) met, to develop a proposal on the SDGs, they held a total of 13 meetings between March 2013 and July 2014, formulating a report containing 17 SDGs and 169 targets. The OWG submitted their proposal to the UNGA for consideration and action at its 68th session in September 2014”. [7] Ahead of the pivotal 2015 GA.

September 20, 2012

MERS: first case reported in Saudi Arabia

On September 20, 2012, a report appeared on ProMed from Saudi Arabia of a case of a novel coronavirus isolated from a male aged 60 years, who died 3 months earlier on June 6, 2012. [1, 2]

The novel betacoronavirus (HCoV-EM) was in time classified as Middle Eastern respiratory syndrome coronavirus (MERS-CoV), the virus does not seem to pass easily from person to person. [6]

Early genetic characterization led to the recognition that MERS-CoV was related to SARS-CoV and was thought to have a bat reservoir, and transferred through a camel. As of October 2021 there have been 2578 MERS cases over 27 countries with 888 deaths reported since April 2012, making a global case fatality rate of 34.4%. [4, 5, 7]

"The emergence of new infectious global threats in the past four decades (e.g. AIDS, H5N1, SARS) has reshaped thinking at the national and international level on the nature and level of public health responses needed for these threats." [3]

November 1, 2012

Scientists warning about Tween 80, a common vaccine ingredient

A paper by Qiu et al, from November 2012 raised "concerns with regard to the indiscriminate use of Tween® 80 in clinical applications" as it is an "extensively used surfactant in parenteral drug formulation". Tween 80 is otherwise known as PolySorbate 80 and is a common surfactant ingredient used in vaccines. The paper stated that "Tween® 80 induced the release of histamine, and a 2-fold increase in SC5b-9, 2.5-fold increase in C4d, 1.3-fold increase in Bb, while IgE remained unchanged. It also produced changes in pulmonary pressure, systemic pressure and ECG."

This may explain the anaphylaxis adverse events seen following the COVID-19 jabs. [1, 2]

December 10, 2012

100,000 Genome Project launched – towards genomic medicine

On December 10, 2012, then Prime Minister of UK, David Cameron, launched the **100,000 Genome Project**, England's first mission to sequence 100,000 human genomes by the end of 2017. The initiative is "paving the way for a digital NHS, where genomics is "driving the move away from a 'one size fits all' approach to treatment, towards personalized, or precision medicine, whereby **each patient is treated according to their individual genome sequence.**" [1, 2]

Prior genome sequencing ventures launched:

- 1990 – The Human Genome Project – completed 2003
- 2008 – 1,000 Genomes Project launched by Wellcome Trust [2, 3, 4, 5]
- 2010 – 10,000 Genome (UK10K) study launched by Wellcome Trust
- Feb 2012 – New York Genome Centre for Alzheimer's [8, 9]

- Dec 2012 – 100,000 Genomes Project [6, 7]

December 10, 2012

Germany runs a Novel Coronavirus simulation

Germany ran a novel coronavirus simulation on an event said to occur once in a 100 years.

This simulated event was based on the **scenario** of a hypothetical **novel coronavirus** called "**Modi-SARS**", that originated in a SE Asia wild animal market, that "naturally" jumps from animal to human. It takes some weeks for the Chinese to discover the virus, and as such it will spread throughout the world.

The incubation period ranged from 2 to 14 days; children are at lesser risk compared to over 65 years. A person is only infectious when they show clear symptoms of the disease. No drugs are available, and a vaccine is 3 years away, and lockdowns are needed until then. Mutations of the virus means there is no immunity!

6 million are expected to become ill in the first wave!

Translate German to English here.

December 17, 2012

Dr Fauci defines Gain-of-Function research

While presenting at an International Consultative Workshop on "Gain-of-Function Research on Highly Pathogenic Avian Influenza H5N1 Viruses", Dr Anthony

Fauci defines **Gain of Function** (GOF) research by specifically stating:

"what historically investigators have done is to actually create gain-of-function by making mutations, passage adoption, or other genetic techniques, such as reverse genetics."

These "reverse genetics" techniques were used in the Wuhan lab for coronavirus research, using grant funding from the NIH.

This 2012 definition of GOF is contrary to Dr Fauci's congressional testimony in May 11, 2021 [1].

2013

February 12, 2013

The First World Government Summit

The First **Government Summit** held February 12-13, 2013, its stated in their report was "not a convention of leading government officials and experts, but ...an interactive platform, a knowledge melting pot and an inclusive national assembly, positioning the United Arab Emirate as the destination for government

innovation, regionally.” With a focus on government services, including health. Australia participated.

By 2016 it is known as the **World Government Summit** (WGS) an annual gathering and “is the primary global forum dedicated to shaping the future of government worldwide”. It is a “neutral, non-profit organization” that “is a knowledge exchange platform at the intersection between government, futurism, technology and innovation. It functions as a thought leadership platform and networking hub for policymakers, experts and pioneers in human development.” [1] Its intended to “inspire and enable the next generation of governments.”

- It has a range of global partners, and requires membership.
- With past speakers like Klaus Schwab [2, 4] , Elon Musk [3], IMF & World Bank and Oxford University.
- In 2014 they partnered with WEF to publish the “Future of Government”
- 2018 – ask institutes to realign with the “global transition to the “new world order” [5]
- They have a vision for 2071
- “COVID-19 and Government”
- Guiding changes to the global Health Care system and more covering all the “sustainable” topics.

2022 – Programmable digital money announced at 2022 WGS

September 7, 2013

Xi Jinping announces Belt & Road initiative

In Kazakhstan on September 7, 2013 China’s President, Xi Jinping, announced an initiative to build an “economic belt along the Silk Road”, where China would invest in infrastructure and energy in nearly 70 countries and international organizations. This was later referred to as the Belt & Road initiative (BRI). [1, 2]

In 2017, the BRI was incorporated into the CCP’s constitution, resulting in an additional 61 countries joining in 2018 alone, and by 2021 a total of 139 countries are formally affiliated with China’s initiative, though not Australia. [3]

The project has a target completion date of 2049, which would coincide with the centennial of the People’s Republic of China (PRC)’s founding.

Private firm, CEFC China Energy Company Limited was part of the BRI build. CEFC Chairman, Ye Jianming, and China’s “Spy Chief”, Patrick Ho had business dealings with Hunter Biden, son of the then Vice President Biden (“the big guy”). [4]

October 2, 2013

DARPA awards Moderna \$25M for mRNA development

On October 2, 2013 the US Defense Advanced Research Projects Agency (**DARPA**) through its “synthetic biology” ADEPT:

PROTECT program, awarded **Moderna** Therapeutics “up to \$25 million to research and develop its messenger RNA therapeutics™ platform as a rapid and reliable way to

make antibody-producing drugs to protect against a wide range of known and unknown emerging infectious diseases and engineered biological threats.” Much of this funding will be used over the next 5 years to “advance promising antibody-producing drug candidates into preclinical testing and human clinical trials “. [1] The ADEPT: PROTECT Pandemic Prevention Platform program plans to have the “development and widescale deployment of protective countermeasures” within 60 days from detection of an outbreak.

DARPA’s Autonomous Diagnostics to Enable Prevention and Therapeutics:

Prophylactic Options to Environmental and Contagious Threats – **ADEPT:**

PROTECT program seeks to “enable adaptable, diagnostic devices that decrease the time required to design, manufacture, and rapidly distribute test panels in response to evolving or emerging diagnostic needs. “Moderna’s mRNA “**platform** has the potential to speed the development and manufacture of treatments that can produce a safer, more reliable and more robust immune response **than** existing technologies.” The ADEPT program began in August 2011 when DARPA began investing in “Controlling Cellular Machinery (CCM) “technologies such as nucleic acid vaccines. The hypothesis was that rather than delivering antigens to the immune system, we could **deliver genes that encode the antigen** and allow the human body to produce the antigen from its own cells, triggering a protective immune response.”

In January 2014 DARPA created a new division called the Biological Technologies Office (BTO), “to explore the increasingly dynamic intersection of biology and the physical sciences” i.e. synthetic biology, neuro-nanotechnology and AI. [2, 3]

“DARPA pioneered the use of the body as a bioreactor to produce prophylactic antibodies to protect against biothreats”. With “gene-encoded antibodies for near-immediate, temporary protection”. [4] This is different to gene-encoded antigen, which Moderna has claimed in 2020 to be a “vaccine”.

October 23, 2013

1st International mRNA Health Conference

On October 23-24, 2013 the **1st International mRNA Health Conference** was held in Tübingen, Germany and herald a “New Era in Modern Medicine”, The event brought together more than 150 attendees from leading international pharmaceutical and biotechnology companies and academic institutions. This conference “laid the foundation for the new biotechnological sector of mRNA-based therapeutics.” [1] Initiated by CureVac and the University of Tübingen in 2013, and held in the city of Tübingen “where nucleic acids were discovered over 140 years ago”, the conference became an annual event “for **everyone** who is working with **mRNA for medical purposes** or seeking messenger RNA as a novel tool to express proteins directly in situ.” [2]

A whole session was dedicated to mRNA vaccines of which Peter Brossart from the University of Bonn gave a presentation titled “*Development of RNA based vaccines*” [3]

In November 11-12, 2014, in Cambridge, Massachusetts, the second conference was held with gold sponsors being AstraZeneca, BioNTech, CureVac and Moderna. [3]

Allowing Moderna Therapeutics to give a presentation titled “*Is mRNA like software?*”. Lipid Nanoparticle developer Acuitus presented this poster in 2014, and was attended by a DARPA presenting “*Impact of mRNA on Global Health*”

October 30, 2013

ACE2 Receptor identified as bat coronavirus infection site for humans.

In an October 30, 2013, paper in *Nature*, Shi Zheng-Li and Peter Daszak *et al*/ reported a key discovery: that certain bat viruses could potentially infect humans without first jumping to an intermediate animal.

By isolating a live SARS-like bat coronavirus (from the rufous horseshoe bats in the 2012 Yunnan mine) for the first time, bat SL-CoV-WIV1, her team had found that it could enter human cells through a protein called the ACE2 receptor. [1]

2014

January 1, 2014

Film excerpt: predicted or coincidence?

In 2014 Former 80’s star from “The Young Ones”, Rik Mayall, released the film called “One by One” and died suddenly that same year. This is an alarming 10-minute excerpt. Is it all fiction? Was he trying to tell us something? Is there evidence of this playing out 2020?

January 1, 2014

AusVaxSafety is established

AusVaxSafety was established in 2014 to monitor adverse events following immunization with influenza vaccines in children, since then it has expanded its scope. Their stated purpose is to “optimize community and healthcare provider confidence” in the safety of vaccines, and complement existing programs.

The organization is led by NCIRS in collaboration with immunization providers, private enterprise, research institutions, state and territory governments and the Australian Government Department of Health”, and funded by the latter. [3, 4]

Vaccine safety surveillance through AusVaxSafety occurs in 374 selected vaccination clinics around Australia, up from an original 175 sites in 2016-17. **Active surveillance** is done through survey requests sent out via SmartVax SMS notification on day 3 after vaccination, or “a few days after” receiving the vaccine. [1, 2]

It appears Vaxtracker the online survey platform cuts off surveys at 6 weeks post COVID-19 vaccination. So the SMS is sent out at 3 days asking for participation in the online survey, which then ends at 6 weeks, and this may just be for select locations. Following their first annual report published in 2018, the Department of Health has released 2 more reports: 2019 and 2020 containing infographics of day 3 feedback. They don't report on any longer-term safety signals. SmartVax feed reports to the TGA.

The day 3 COVID-19 vaccine safety monitoring is only charting the already known and expected "commonly reported adverse events", but don't report on all adverse events, and they don't do a day 28 or 3 month, for example, follow up which could easily be implemented with their available technology.

AusVaxSafety leadership includes Professor Allen Cheng an influenza expert, who also happens to be the chair of ACV who are regulated to advise TGA on vaccine registrations and co-chair of ATAGI who advise the federal and state governments on COVID-19 vaccine use.

February 13, 2014

Global Health Security Agenda launched

The Global Health Security Agenda (GHSA) was launched in February 13, 2014 in response to "the global threat that infectious diseases constitute in our increasingly interconnected world". United States joined 28 other countries, the World Health Organization (WHO), the Food and Agriculture Organization (FAO), and the World Organization for Animal Health (OIE), to accelerate progress toward a world safe and secure from the threat of infectious disease, and committing to the goals of the Global Health Security Agenda.

The pledge "means working together to slow the spread of antimicrobial resistance, reducing zoonotic disease transmission, establishing national biosecurity systems, increasing routine immunization, strengthening national infectious disease surveillance and laboratory systems, and developing real-time electronic reporting systems and emergency operations centers."

By 2022 GHSA is a network of 70 countries, as well as international and non-government organizations, and private sector companies, "working to secure global health security". [1]

April 1, 2014

Australia's plan to manage the next pandemic

The Department of Health release the Australian Health Management Plan for Pandemic Influenza (AHMPPI). (With minor updates in 2019). With report contributions from Murdoch Children's Research Institute and Melbourne Uni School of Population Health. [1, 2]

The Minister for Health, The Hon Peter Dutton MP's opening remarks warn "it is inevitable that the world will face another influenza pandemic."

Six months later Dutton announced a landmark review of the ways in which the Therapeutic Goods Administration (TGA) regulates medicines, the very review that allows for the 2018 "Provisional Registration" to be added to the TGA catalogue of registration avenues.

The 2020 pandemic response for COVID-19 follows the pandemic Legal Framework set out in this document, and fast-tracked vaccine "approvals" were possible because of Peter Dutton.

June 14, 2014

China's Social Credit System Plan is released

On June 14, 2014 the "*Planning Outline for the Construction of a Social Credit System (2014-2020)*" was released to the public, as guidelines for the construction of a social credit system. It sets out the digital dictatorship plan for China. [1] [A model for the future world?]

"As early as in 2003, the Chinese government expressed interest in creating a comprehensive means of assigning citizens credit scores that would be an improvement over the country's credit rating system.

The State Council recently approved the "Outline of Regulations for Building a Social Credit System (2014-2020)" and at present eight companies have been granted the central bank's permission to conduct pilot testing of their own social credit systems, akin to the Fair, Isaac and Company (FICO) consumer credit ratings.

Part of what makes such an endeavor unique in China is the vagueness and, in some cases, complete absence of regulations regarding big data collection for credit scoring purposes, potential third party uses of such scores, and privacy protections of the user data that factors into credit score calculations. The new cybersecurity law released on November 7, 2016 contains language regarding privacy protections, yet will not be implemented until June 2017."

Read more>>>

August 27, 2014

WHO hold Health and Climate Conference

The World Health Organization (WHO) **Conference on Health and Climate** took place at the WHO Headquarters in Geneva, Switzerland from **August 27-29 , 2014**, it was attended by both public and private sector entities. [1]

Throughout the conference, participants discussed **linking** climate, sustainable development and health policy. A draft summary was produced "that recognizes both the need to strengthen health resilience to climate change and the opportunity to make gains in public health through well-planned **mitigation measures.**"

The following month September 23, 2014, the UN held their annual Climate summit.

The UN 17 Sustainable Development Goals (SDGs) begin

The UN/WHO **Millennium Development Goals** (MDGs) (a UN signed in 2000) come to the **end of their term** in December 2015 and a post-2015 health agenda, comprising called the **Sustainable Development Goals** (SDGs) takes their place and came into effect January 1, 2016. On 25 September 2015, the United Nations (UN) General Assembly adopted the new development agenda called "Transforming our world: the 2030 agenda for sustainable development...The agenda builds upon the outcome document of the UN Conference on Sustainable Development (Rio+20 conference)" [1, 2, 3] Australia signed by Julie Bishop. In late December 2015 the WHO released their first report "From MDGs to SDGs" which has gone from 8 goals to 17 goals. The WHO's Director-General Dr Margaret Chan wrote in the report "while progress towards the MDGs has been impressive in many ways, much work remains to be done...[as] several global and many country MDG targets were not met. The unfinished agenda needs to be addressed, but more importantly the dramatic progress paves the way for **more ambitious** achievements by 2030." [PDF] According to the report, the SDG date back to a resolution made at the pivotal 66th UN General Assembly in Rio de Janeiro on July 27, 2012, called "The future we want" "In 2016, WHO will publish the first in a series of annual reports on the SDGs to set the baseline and measure progress towards achieving the goals over the next 15 years" to 2030.

May 20, 2016

UN hold first ID2020 summit

On May 20, 2016 the United Nations held the first ID2020 summit in New York, which is now held annually. The United Nations recognizes "identity as a fundamental human right", and ID2020 is a **strategic, global initiative** launched in response to Sustainable Development Goal 16.9., with the aim "by 2030, provide legal identity to all, including birth registration" [1]

"Together we will foster a global conversation and build a working coalition to identify and build the enabling conditions for the creation of a legal digital identity **for all individuals at risk**". The UN claims that one fifth of the world's population is without a recognized legal ID which makes them "invisible to society and vulnerable to trafficking, prostitution, and child abuse."

Then the ID2020 Alliance launched in 2017 as a global public-private partnership setting the future course of digital identity (ID), ensuring that digital identity is responsibly implemented and widely accessible, as they state no government, company or agency can solve this challenge alone.

Its partners include Microsoft, the Rockefeller Foundation, Accenture, GAVI (a core partner of the WHO), UNICEF, the Bill & Melinda Gates Foundation and the World Bank. [2, 3]

May 24, 2016

WHO R&D Blueprint for action to prevent epidemics

Spurred by the West Africa Ebola epidemic, and “at the request of its 194 Member States”, in May 2015, “the World Health Organization (WHO) convened a broad coalition of experts to develop an **R&D Blueprint** for Action to Prevent Epidemics”. A year later, at the May 24, 2016 World Health Assembly (WHA), Members States welcomed the development of the R&D Blueprint” or Health Emergencies Program.

All because infectious disease outbreaks are “inevitable” due to more “frequent travel, globalized trade and greater interconnectedness between countries.” [2] The R&D Blueprint is a global strategy and preparedness plan that allows the rapid activation of research and development activities during epidemics. Its aim is to fast-track the availability of effective tests, vaccines and medicines that can be used to save lives and avert large scale crises.

The R&D Blueprint uses a list of identified priority diseases and an unknown “Disease X”. For each disease an R&D roadmap is created, followed by target product profiles. This is then used to guide the response to outbreaks in both urgent action and in developing ways to improve the global response for future epidemics.

On December 10, 2015 the WHO released its first (of what will be an annual) “list of top emerging diseases likely to cause major epidemics”. “This priority list forms the backbone of the new WHO Blueprint for R&D”. “The group of experts who developed the list represented a range of disciplines, including virology, microbiology, immunology, public health, clinical medicine, mathematical and computational modelling, product development, and respiratory and severe emerging infections. The conclusions of the experts were reviewed by the Blueprint’s independent Scientific Advisory Group.”

Interestingly “other diseases were designated as ‘serious’, requiring action by WHO to promote R&D; as soon as possible” included “thrombocytopenia syndrome” – a adverse event seen from 2021 following COVID-19 vaccination! [1]

G20 Declaration on 8 July 2017:

“We support the WHO’s central coordinating role, especially for capacity building and response to health emergencies...Furthermore, we see a need to foster R&D preparedness through **globally coordinated models** as guided by the **WHO R&D Blueprint**, such as the Coalition for Epidemic Preparedness Innovations (CEPI).” [3] COVID-19 roadmap was prepared following February 11, 2020 meetings – ARCHIVE Blueprint for MERS vaccine – HERE, ARCHIVE.

July 1, 2016

WHO Health Emergencies program established

WHO Health Emergencies (WHE) program set up to enable the WHO to respond more effectively to disease outbreaks and emergencies. The 7 member **Independent Oversight Advisory Committee** (IOAC) for the WHE is appointed by WHO Director-General.

IOAC reports on the COVID-19 pandemic.

July 1, 2016

UN Global Health Crisis Task force

Global Health Crises Task Force was established by the UN Secretary-General to support and monitor global response to health crises. The Task Force was represented by UN, WHO, World Bank Group and infectious disease experts such as Dr Anthony Fauci

July 5, 2016

Russiagate begins with The Steel Dossier

[Hindsight revealed by May 2023 Durham report] During a meeting in London on July 5, 2016 FBI "Handling Agent-I" [pg 87] received the first "Report" from **ex-MI6 agent Christopher Steele**, who alleged presidential candidate Donald Trump was colluding with Russia to win the 2016 election.

That agent said, "his initial reaction to Steele's allegations of Trump-Russia collusion was one of "disbelief" and that Steele was "politically motivated" but he passed the allegations up the FBI chain anyway. He appeared to be aware that Clinton's campaign was connected to Steele's work, including the notation "HC" in his notes. [1]

This would begin what is known as the **Steel Dossier**, now discredited, and known to be funded by **Hillary Clinton's** campaign. The FBI used this information to open up an investigation into her opposition candidate and fueled the chain of events that led to spying on Trump's campaign – referred to colloquially as **Russiagate**.

The ongoing, now known to be baseless investigation, undercut Trump's entire time as President, robbing the American people of the true pursuit of the "rule of law" and truth.

October 17, 2016

UN Habitat III conference on Sustainable Urban Development

"Habitat III" is shorthand for a major global summit, formally known as the United Nations Conference on Housing and Sustainable Urban Development, held in Quito, Ecuador, on 17-20 October 2016. [1, 2]

The United Nations has called the conference, the third in a series that began in 1976, to "reinvigorate" the global political commitment to urban **sustainable development** goals. The agenda will set a new global strategy around urbanization for the next two decades – The New Urban Agenda.

- Habitat I (1976): Vancouver Declaration on Human Settlements – Vancouver, Canada, May 31 – June 11, 1976 [5]
- Habitat II (1996): Istanbul Declaration on Human Settlements – Istanbul, Turkey June 3-14, 1996 [3]

- Habitat III (2016)

Starting in 1972 it was recognized that privately owned land was a threat to social equity on the planet, including ownership of “self”! [4]

November 1, 2016

Google’s censorship machine ramps up

Following Donald Trump’s presidential win the November 2016 US election, the Google “censorship machine” , was set into action as exposed by Google Whistleblower, Zach Vorhies, on August 14, 2019 to Project Veritas. In Google’s IPO they stated, “*Our company mission is to organize the world’s information and make it universally accessible and useful.*”

From 2016, censorship became [secretly] part their Google’s model. By 2020 they openly confirm they will delete pandemic “misinformation” content that is counter to the narrative demanded by “authorities”.

2017

January 1, 2017

WHO Emergency Response Framework

WHO released Second Edition of their Emergency Response Framework (ERF), (first 2013), to clarify and articulate WHO’s role and obligations under the **International Health Regulations (2005)**. ERF places ultimate authority for WHO’s work **in emergencies** with the Director-General, but accountability and response speeds are delegated to Regional Directors and the WHO (Est 2016) Executive Director.

January 1, 2017

Vaccine Safety Net

In 2017 the World Health Organization (WHO) forms the **Vaccine Safety Net**[work] (VSN), a network of a diverse group of global digital information resources (websites and social media). [1]

“The Vaccine Safety Net is a global network of websites, evaluated by the World Health Organization, that provide reliable information on vaccine safety”.

WHO evaluates the electronic resources (websites) for their adherence to the criteria of credibility, content, accessibility and design.

“A key player in the Project is the **Global Advisory Committee on Vaccine Safety** (GACVS) [3] , established by WHO in 1999, to respond promptly, efficiently, and with scientific rigor to vaccine safety issues of potential global importance.” [2]
The WHO received much funding from BMGF and Big Pharma!

January 9, 2017

Gain of Function moratorium set to be lifted

Just before the Inauguration of Donald Trump as President, on January 9, 2017 the Obama White House Office of Science and Technology Policy (OSTP) under the direction of John Holdren, announced policy guideline recommendations that “will **satisfy the requirements for lifting the current moratorium** on certain life sciences research [gain of function] that could enhance a pathogen’s virulence and/or transmissibility to produce a potential pandemic pathogen (an enhanced PPP).” [1]

These P3CO guidelines were adopted by December 19, 2017, and gain of function resumed – following committee review.

As pointed out by The Highwire, in 1977, **John Holdren** [2, 3] coauthored the book *Ecoscience* that discusses the concept of sterilization as a form of **population control**, but more alarming is the statement: “Biological warfare laboratories are potential sources of a man-made “solution” to the population explosion.”

Holdren’s co-author is population “alarmist” [4] **Paul Ehrlich**, who in 1969 published *The Population Bomb*, which argued to halt population growth predicting people would starve to death years ago – a failed prediction. In January 2023 Ehrlich returns as an “environmental authority” to “revive his argument that current levels of human consumption” is not sustainable and “will lead to the mass extinction of plants, animals, and mankind itself”.

January 10, 2017

Dr Fauci warned of a “Surprise Outbreak” during the Trump administration

On January 10, 2017, at the Georgetown Global Health Initiative, Dr Anthony Fauci delivered his Keynote Address titled *Pandemic Preparedness in the Next Administration* where he said:

*“There is no question that there will be a challenge to the coming administration in the arena of infectious diseases...**but also there will be a surprise outbreak**” [1, 2]*

Ten days later was the inauguration of Donald J. Trump as President of the United States.

January 13, 2017

FDA publish EUA guidance – condition of EUA “no alternatives” can be available

On January 13, 2017 following a PAHPRA amendment the FDA issued guidance for industry and stakeholders around Emergency Use Authorization (EUA) of Medical Products.

It states in guidance, section B.1.d titled “no alternatives” that “[f]or FDA to issue an EUA, **there must be no adequate, approved, and available alternative** to the candidate product for diagnosing, preventing, or treating the disease or condition” For COVID-19 vaccines to be eligible for EUA, the system had to discredit and suppress any early treatment options such as hydroxychloroquine and ivermectin. [1] “*Public health was built on an obsessive global vaccination policy, which ivermectin would have threatened*” says Dr Pierre Kory

January 15, 2017

UN holds first World Data Forum – launching “Sustainable Development Data”

The United Nations convened the first **World Data Forum** (UNWDF) in Cape Town, South Africa on January 15-18, 2017, which has become an annual event. At the conclusion of the first event, “the Cape Town Global Action Plan for **Sustainable Development Data** was launched” [1, 2, 3, 6]

“The Forum was organized with the guidance of the *UN Statistical Commission* and the support of the UN Statistics Division of the *UN Department of Economic and Social Affairs* (DESA) and the High-level Group for Partnership, Coordination and Capacity-Building **for statistics** for the **2030 Agenda** for Sustainable Development (HLG).”

This platform was used “for **intensifying** cooperation with various professional groups, such as **national statistical offices** (NSOs), information technology and geospatial information managers, and data scientists among other representatives of government, intergovernmental organizations and civil society.” [4] With “particular focus on addressing the monitoring needs of the 2030 Agenda”

“The decision to organize a series of UN World Data Forums **followed a recommendation** in the report titled, “*A World That Counts: Mobilizing the Data Revolution for Sustainable Development*,” [6] which was presented in November 2014 by the UN Secretary-General’s Independent Expert Advisory Group on a Data Revolution for Sustainable Development” [5]

On day three in the session titled “Capturing the 21st Century through Data and Algorithms.” Speakers emphasized that the public’s world view and knowledge do not mirror reality, and suggested that **schools are better places to create a more fact-based world view than the media**; emphasized the value of building narratives from data to steer the narrative to implement the SDGs...”

January 17, 2017

Xi Jinping the first Chinese president to attend WEF in Davos

Xi Jinping was the first Chinese president to attend the annual World Economic Forum (WEF) held in Davos, and was joined by the largest delegation the Asian giant ever sent including Jack Ma of Alibaba. [1, 2]

January 18, 2017

CEPI is launched

The **Coalition for Epidemic Preparedness and Innovations (CEPI)** was officially launched at the World Economic Forum (WEF) in Davos, Switzerland on January 18 2017, "in response to expert reports into the 2013-16 Ebola outbreak, calling for a new system to stimulate vaccine development based on collective action and partnerships across sectors and countries".

The are stated to be "a new alliance to finance and coordinate the development of new vaccines to prevent and contain infectious disease epidemics". It is structured as a "global coalition to create new vaccines for emerging infectious diseases" "for which no vaccines have been created" and prepare for "Disease X."

CEPI is a public-private collaboration with it founding partners the governments of Germany, Japan, Norway and India, the B&M Gates Foundation and the Wellcome Trust, plus Pharma companies: GSK, Pfizer, J&J, Merck & Sanofi. The Chairperson of CEPI is Australia's Jane Halton [1, 2]

CEPI is instrumental in the COVAX vaccine rollout, plus formed a partnership with CSL and University of Queensland to bring COVID-19 vaccine to market.

On September 5, 2020, just 9 months after launch they put a call out for proposals for vaccines that can reduce development time.

January 20, 2017

Donald J. Trump's Inauguration as the 45th President of The United States of America

On January 20, 2017 Donald J. Trump was sworn in as the 45th President of the United States of America. On that inauguration day Trump delivered a powerful speech.

Ten days before, Dr Anthony Fauci delivered his keynote speech to the Georgetown Global Health Initiative, stating the next administration (Trump's) WOULD experience an infectious disease "*surprise outbreak*".

February 17, 2017

Bill Gates' "prophecy" at Munich Security Conference – CEPI: to enable a vaccine in 90 days or less

"Prophetic" quotes from Bill Gate's speech at the Munich Security Conference on February 17, 2017, setting the stage:

"I decided 20 years ago to make global health the focus of my philanthropic work"...I spend a lot of my time on the effort to eradicate polio...

*It's also true that the **next epidemic** could originate on the computer screen of a terrorist intent on using genetic engineering to create a synthetic version of the smallpox virus . . . or a super contagious and deadly strain of the flu....The point is, we ignore the link between health security and international security at our peril. The good news is that with advances in biotechnology, **new vaccines** and drugs can help **prevent** epidemics from spreading out of control.*

***Vaccines** can be especially important in **containing** epidemics. But today, it typically takes **up to 10 years to develop and license a new vaccine**. To significantly curb deaths from a fast-moving airborne pathogen, we would have to get that down considerably—**to 90 days or less**.*

*We took an important step last month with the launch of a new public-private partnership called the Coalition for Epidemic Preparedness Innovations (**CEPI**). The hope is that CEPI will enable the world to produce safe, effective vaccines as quickly as new threats emerge.*

*The really **big breakthrough potential** is in **emerging technology platforms** that **leverage** recent advances in genomics to **dramatically reduce the time** needed to develop vaccines... **synthetic genetic material** that **instructs your cells to make a vaccine inside your own body**. And the great thing is that **once you've built a vaccine platform for one pathogen, you can use it again for other pathogens**. You only need to substitute a few genes.*

*The third thing we need to do is **prepare** for epidemics **the way the military prepares for war**.*

It is encouraging that global alliances like the G7 and the G20 are beginning to focus on pandemic preparedness...

Pandemics are everyone's problem—and as leaders, we cannot ignore it.

*...we face today with biological threats. **We may not know if that weapon is man-made or a product of nature**. But one thing we can be almost certain of. **A highly lethal global pandemic will occur in our lifetimes**.*

*I view the threat of deadly pandemics right up there with **nuclear war and climate change**.*

April 13, 2017

AAP/IAC are "challenged" by Trump's vaccine safety concerns

On **April 13, 2017** the **American Academy of Pediatrics** (AAP) attended an **Immunization Action Coalition** (IAC) webinar titled "*Vaccine Challenges in a New Administration*". Their presentation **slides** show their "alarm and disdain" about President Donald Trump's vaccine safety concerns and they singled out Robert F. Kennedy Jr. (RFK jr) [1, 3]

They knew that Trump was "not beholden to the pharmaceutical industry" as he didn't accept funding to get him elected in 2016 [though did for his inauguration], and that he has a history of expressing concerns regarding the regressive health trends in children relative to the increasing vaccine trends.

AAP noted on **January 10, 2017** that RFK jr met with President-elect Trump at Trump Tower where Kennedy was asked to chair a new commission on "vaccine safety and scientific integrity", allegedly focused on "autism". That same day AAP issues a statement declaring "*vaccines are safe, vaccines are effective, vaccines save lives*". [2]

At a **Feb. 15, 2017** – Press Conference with Robert De Niro and RFK jr before a congressional briefing the next day which was "sparsely attended", RFK jr offered \$100K reward to the "first journalist, or other individual, who can find a peer-reviewed scientific study demonstrating that thimerosal is safe in the amounts contained in vaccines currently being administered to American children and pregnant women."

What they didn't note was in late 2016 Trump did accepted millions in donations from pharmaceutical giants like Pfizer, for his inauguration celebrations. [4] Shortly after Trump appointed pharma connected Scott Gottlieb (March 2017) to head the FDA and then Alex Azar (Nov 2017) as secretary of HHS. RFK jr has said these two were "handpicked by Pfizer" [?] and they "killed the vaccine safety commission"!

Then over 4 days in **March 2018**, RFK, Jr. and 15 other advocates presented "**Six Steps to Vaccine Safety**" to every member of Congress, detailing the steep increase in childhood chronic illness and the actions necessary to introduce sound science and transparency to the US vaccination program. [11, 12]

The Immunization Action Coalition is a 501(c)(3) [9] non-profit founded by Deborah L Wexler, MD with a newsletter from 1990, because of a measles outbreak. By Feb 1994 they ran out of money but by June 1994 Wexler received a \$100K grant from Hep B vaccine maker Smith-Kline Beecham.

By September 1994 the newsletter "expanded to include all immunizations and the organization's name was changed from the Hepatitis B Coalition to the **Immunization Action Coalition** to reflect the shift. The newsletter's title also was changed to "Needle Tips & the Hepatitis B Coalition News." [13]

On August 30, 1995 Wexler won a funding boost of \$750K from the CDC, as well as their "prized mailing list of 14,000 health care professionals"! Wexler now promotes the CDC.

By 2021, Chief Strategy Officer, Litjen Tan MS PhD, pushes for adult immunizations. [5, 6, 7, 8, 9, 10]

April 27, 2017

Moderna: First-in-human mRNA vaccine study

In an April 27, 2017 paper, funded by Moderna Therapeutics, looking at the “Immunogenicity by mRNA Vaccines”, they concluded that “**LNP-formulated, modified mRNA vaccines** can induce protective immunogenicity with **acceptable tolerability** profiles” in mouse studies and a **First-in-Human** Phase 1 Study with 31 human subjects – of which only 8 received placebo, and were followed for only 43 days, but the intent is for subjects to be “followed for up to 1 year post-vaccination **for safety** and immunogenicity”. Clinical trials (NCT03076385) began March 2, 2017. [1, 2, 3]

“Adverse events (AEs) were mild or moderate with only a few severe [within only 23 treatment subjects] and no serious events.

Until recently mRNA vaccines were not advanced into the clinic due to concerns around stability and production.

The paper states that mRNA vaccines “offer advantages in **speed**, precision, **adaptability of antigen design** and production control that cannot be replicated with conventional platforms,” and that until recently mRNA vaccines “were not advanced into the clinic due to concerns around stability and production.” But now with the ever looming “concern for a potential pandemic and the need for an effective, safe, and high-speed, and scalable **vaccine production platform**, the **mRNA-based vaccines make them ideally suited to impede potential pandemic threats.**”

May 19, 2017

Global Health: The Berlin Declaration of the G20 Health Ministers

The first Meeting of Health Ministers of the Group of 20 leading industrialized and emerging economies (G20) took place in Berlin, Germany at the invitation of Federal Minister of Health Hermann Gröhe, for a two-day meeting focused on combating global health hazards and be better prepared for future health crises.

At that meeting the participants watched a fictitious Health Emergency Simulation named **MARS** (Mountain Associated Respiratory Syndrome). The exercise focused on multilateral coordination, WHO’s crisis response mechanisms and the International Health Regulations (IHR). This meeting marks the start of “Global Health” becoming a constant on the G20 agenda.

The Berlin Declaration came out of this meeting and is a “seven-page final resolution on pandemic preparedness and antimicrobial resistance.”

Following this 2017 meeting **The Center for Global Health** was founded in by Prof. Andrea Winkler and Prof. Clarissa Prazeres da Costa. Germany is leading the way with global health policy, their “goal is that research results are quickly translated into meaningful and effective **political measures**. This is the only way we can achieve the

goals for **sustainable development of the United Nations**, to which the Federal Republic of Germany has also committed itself.” [1]

“Due to the increasing interconnectedness of our world, health has also become an issue that needs to be viewed globally.”

June 28, 2017

Pandemic Bonds created by World Bank

World Bank launches first-ever Pandemic Emergency Financing (PEF) Bonds to channel funding to developing countries facing the risk of a pandemic. [1, 2]

June 28, 2017

NIAID convenes Universal Flu Vaccine workshop

In June 28-29, 2017 the NIAID convened a workshop in Rockville, Maryland titled “**Pathway to a Universal Influenza Vaccine**”, which was attended by 150 scientists from academia, industry, and government from around the world to develop criteria for defining a universal influenza vaccine, one “that would cover most or all seasonal strains of influenza, and also provide protection during a pandemic”

The workshop findings, jointly authored with Dr Anthony Fauci were published in the journal *Immunity* on October 17, 2017, outlining four key criteria that a universal vaccine should meet. [1, 2]

From this publication the NIAID’s **strategic plan** for **developing a universal influenza vaccine** emerged in February 28, 2018, followed by the creation of the Collaborative Influenza Vaccine Innovation Centers (CIVICs) center in 2019.

July 17, 2017

WHO release SDG Health Price Tag

“The SDG **Health Price Tag**, published July 17, 2017 in *The Lancet Global Health*, estimates the costs and benefits of progressively expanding health services in order to reach 16 Sustainable Development Goal (SDG) health targets in 67 low- and middle-income countries that account for 75% of the world’s population. [2]

The analysis shows that investments to expand services towards WHO’s priority goal of **universal health coverage** and the other SDG health targets **could** prevent 97 million premature deaths globally between now [2017] and 2030, and add as much as 8.4 years of life expectancy in some countries.... the poorest nations will need assistance to reach the targets.”

Under the “**ambitious**” **scenario**, achieving the SDG health targets would **require** new investments increasing over time from an initial US\$ 134 billion annually to \$371 billion, or \$58 per person, by 2030. ...As many as 32 of the world’s poorest countries will face an annual gap of up to US\$ 54 billion and will continue to need external assistance.

The ambitious scenario includes adding more than 23 million health workers, and building more than 415 000 new health facilities, 91% of which would be primary health care centers.

Promotional WHO info Graphics [1]

September 5, 2017

CEPI push for a rapid, new vaccine platform

On September 5, 2017, just 9 months after the launch of CEPI, they put a call out for proposals with the aim to identify new **vaccine platform technologies** that would enable **rapid** vaccine development, elicit rapid onset of immunity, and whose production can be scaled-up quickly to respond to the next pandemic disease, soon to be called Disease X. Funding from B&M Gates Foundation and NIAID.

On October 15, 2019, CEPI launches a "new call for innovative platform technologies to rapidly respond to Disease X" on the back of the September 2019 GPMB "A World At Risk" report!

October 23, 2017

SPARS Coronavirus Scenario

On October 23, 2017 The Johns Hopkins Center for Health Security released the SPARS Scenario, a pandemic simulation event, portraying a futuristic scenario for public health risk communicators, where a new virus infects mankind in 2025 and continues until 2028. The self-guided tabletop training experience challenged public health communicators and risk communication researchers to consider the complex **messaging dilemmas** of a future outbreak, which required the development of a **new vaccine**. [1, 2]

The fictitious outbreak of the novel SPARS **coronavirus** is first identified in a major US city in 2025, over 3 years it spreads worldwide and the case fatality rates vary depending on the capabilities of local health systems.

November 27, 2017

Children are labelled "super spreaders" - get the flu-jab to protect grandma!

In a November 27, 2017 article, the UK calls for parent to get their '**super spreader**' **children** in daycare, vaccinated with a free flu jab so that they "protect" their grandparents from the risk of the flu!

The vaccines are simply "assumed" to be safe and effective, yet the CDC state that influenza vaccines are only 40-60% effective, but in some years is as low as 10%! So what is the real benefit, and at what risk both short and long-term?

It would seem most people don't realize that influenza & pneumonia statistics are lumped together and advertised as deaths due to flu – it's a "death certificate" conundrum. Flu estimates are based on ever changing models such as Canada's estimate flu deaths going from 500/yr to 8000/yr. Every year there are many influenza-like-illness (ILI) which is generally called the flu, but is this yearly flu jabbing actually making things worse? [@45:50] [1]
Doctors are educated by marketers to increase flu-shot demand. So is this really about health, protection, or big-pharma money!

November 30, 2017

Chinese chimeric research funded by NIH

Published November 30, 2017, research in at the Wuhan Institute of Virology, that was funded by US NIH showed man-made (chimeric) viruses could replicate in human cells.

Dr Anthony Fauci and Dr Francis Collins claimed is not Gain of Function research, but Dr Fauci, in his own words, says it is! [1, 2, 3]

December 14, 2017

Fauci supported review paper sets the stage for pandemic "prototype vaccines"

In a private meeting in February 2017, Dr Barney Graham pitched his "brainchild" **Prototype Vaccine Project** to the NIAID executives which included Dr. Fauci who said the idea struck him and others in the executive committee "as something that is really doable."

Following that meeting, on December 14, 2017, Dr Graham published a review paper outlining the proposal in Nature Immunology titled "*Emerging viral diseases from a vaccinology perspective: preparing for the next pandemic*", in which Fauci provided "editorial comments" and the NIAID supported. **This paper sets the stage** for moving forward with "prototype vaccines" for all pathogens with pandemic potential!

The paper stated "developing rational candidate vaccines directed against at least one prototype virus within each major phenotypic category within each family of viruses is advisable"

The paper concluded that "[p]reparation for emerging viral disease will be an inherent component of achieving the **United Nations Sustainable Development Goals** (UN SDG)"

"But without the urgency of a threatening pandemic, his [Dr Graham's] idea remained just that." stated the New York Times on July 25, 2021, as Fauci seeks funding the "brainchild" project!

December 19, 2017

HHS lifts ban on Gain-of-Function research – P3CO Framework established

On **January 9, 2017** the White House Office of Science and Technology Policy (OSTP) released their “Recommended Policy Guidance for Departmental Development of Review Mechanisms for Potential Pandemic Pathogen Care and Oversight (**P3CO**).” Noting “adoption of these recommendations will satisfy the requirements for lifting the current moratorium on certain life sciences research that could enhance a pathogen’s virulence and/or transmissibility to produce a potential pandemic pathogen (an enhanced PPP).”

By the end of that year, on **December 19, 2017**, Francis Collins, Director of US National Institute of Health (NIH) announced it was lifting the October 16, 2014 funding moratorium [9, 10] on Gain-of-Function (GoF) research. [6] “Dual Use” research continued because HHS adopted the pre-funding review mechanism called the **Potential Pandemic Pathogen Care and Oversight (P3CO)** Framework which would be used to make **funding decisions** for GoF-type research. [1, 20]

How this came about:

Starting late 2014, the **National Science Advisory Board for Biosecurity (NSABB)** who served as the “official **federal advisory body on GoF research issues** and is responsible for developing recommendations for the appropriate level of Federal oversight of GoF research”. Which was informed by Gryphon Scientific, who were “contracted by the NIH Office of Science Policy [**OSTP**] to conduct risk and benefit assessments (RBA) of GoF research involving the pathogens subject to the funding pause.” NSABB worked in conjunction with the National Academies of Sciences. [18] Following less than 3 years (2014-2016) of NSABB symposiums, together with Gryphon Scientific reports, two reports were published:

- May 2015 the NSABB recommended *Framework for Conducting Risk and Benefit Assessments of Gain-of-Function Research*
- May 2016 the NSABB final report titled *Recommendations for the evaluation and oversight of proposed Gain-of-Function research* which Section 6 included “a more rigorous description of GOF research of concern (GOFROC).” [2, 14]

On January 9, 2017, just before the Inauguration of Donald Trump as President, the Obama White House OSTP released their recommended policy guidance for the Department of Health and Human Services (HHS) to develop a GoF research assessment framework based on the NSABB recommendations. [3, 4]

By December 2017 the HHS adopted the pre-funding guidance mechanism called the *Potential Pandemic Pathogen Care and Oversight (P3CO)*. Under the HHS P3CO Framework, the **HHS P3CO Review Group** [11] make **funding decisions** for enhanced PPP/GoF research projects. [5, 6] The review group approved example A & B. [12]

By February 2022 at a NSABB meeting, the NIH show slides with revised definitions of GoF research; either “**Dual Use Research Of Concern (DURC)**” or emerging pandemic potential pathogens “**ePPP**’s”. [7, 8]

Working in conjunction with NSABB, The National Academies of Sciences held two **Gain of Function Symposiums** (Dec. 15-16, 2014 [17] & Mar. 10-22, 2016).

Participating in these symposiums were:

- Philip Dormitzer [15, 19, 21] who went from Novartis Vaccines (2014) then to VP & Chief Scientific Officer of Pfizer's Viral Vaccines,
- China's CDC director George Gao
- Ralph Baric on the topic "vaccines targeting coronaviruses"
- Prof Ian Lipkin 2014 [16, 17]

2018

January 1, 2018

TGA Black Triangle Scheme set up to encourage adverse event reporting

The Therapeutic Goods Administration (TGA) Black Triangle Scheme (BTS) [1] commenced in January 2018, two months before Provisional Registration was added to the Therapeutics Goods Act in Australia.

All new and **Provisionally Registered (PR)** products fall under the BTS to help monitor for **early safety signals**. Product Inserts (PI) and Consumer Medicines Information (CMI) are indicated with a black triangle symbol [2, 3] which will appear for a period of not less than five years from start of PR. Sponsors are responsible to supply information for PI and CMI documents.

An adverse event is defined as "**any unfavourable and unintended** sign, symptom or disease associated with the use of " the provisionally registered product and **all** "should be reported" by either consumers but most importantly health professionals, although the TGA don't openly share this advice for COVID-19 vaccine products.

All 2021 COVID-19 vaccines were only Provisionally Registered, which is distinctly different to Registered. [4]

United Kingdom's drug regulator MHRA also has a Black Triangle Scheme, for continued monitoring of medicines, which appears to have been in place since June 1, 2009. [5] The European Medicines Agency (EMA) in 2017 was responsible for maintaining the list of black triangle products which included AstraZeneca, Moderna, BioNTech, Janssen COVID-19 vaccines.

It seems Black Triangle Scheme is not unique to Australia, but in fact a global regulatory practice which the TGA adopted.

January 19, 2018

Concerns raised about safety protocols at the China, Wuhan biosecurity lab

In a cable dated January 19, 2018, SU delegates paid multiple visits to China's Wuhan level 4 biosecurity lab and reported to Washington that a lack of safety protocols could spark a SARS-like outbreak. [1]

As lab security is a now known issue, a credible investigation into the 2020 origins of the SARS-CoV-2 virus is needed.

February 1, 2018

ACIP vaccine approval process

Cameras capture key moments in 2018 CDC **Advisory Committee on Immunization Practices** (ACIP) meeting as they surprisingly vote to approve a new vaccine with a brand new adjuvant that has known potential issues.

Reminder, Australian doctors refers to CDC for guidance on vaccine administration, and the TGA collaborate with international regulators.

February 6, 2018

The term "Disease X" is born – the next unknown pandemic

At a annual WHO R&D Blueprint meeting held February 6-7, 2018, "a group of experts" which Peter Daszak belongs to coined the term "**Disease X**". They were "referring to the next pandemic, which would be caused by an unknown, novel pathogen that hadn't yet entered the human population." and of which there was an "absence of efficacious drugs and/or vaccines". [1]

The objective of the blueprint and meeting was "to reduce the time between declaration of a public health emergency and the availability of effective diagnostic tests, vaccines, antivirals and other treatments that can save lives and avert a public health crisis"

Disease X would likely:

- This results from a virus originating in animals and would emerge somewhere on the planet where economic development drives people and wildlife together.
- Be confused with other diseases early in the outbreak and would spread quickly and silently; exploiting networks of human travel and trade, it would reach multiple countries and thwart containment.
- Have a mortality rate higher than a seasonal flu but would spread as easily as the flu.
- It would shake financial markets even before it achieved pandemic status.

On October 15, 2019, "CEPI launches new call for innovative platform technologies to rapidly respond to Disease X", their first call for fast new vaccine platforms went out in 2017.

February 18, 2018

NIAID release their Strategic Plan for a Universal Flu Vaccine

On February 28, 2018, the NIAID led by Dr Fauci, published their **strategic plan for developing a universal influenza vaccine**, which was the result of a June 2017 NIAID workshop. [1, 2]

The following by year in 2019 the NIAID created the Collaborative Influenza Vaccine Innovation Centers (CIVICs), out of needs identified in the NIAID Universal Influenza Vaccine Strategic Plan.

March 6, 2018

TGA legislations change sets up for Vaccine advertising

Clause 42DK(3) was added on March 6, 2018 to the Therapeutic Goods Act 1989 which sets the stage for future product advertising in the interest of "public health". In Australia advertising of pharmaceuticals has been prohibited, but the addition of this clause sets the stage for the TGA to allow Health Departments to advertise vaccines for manufacturers to the public.

March 11, 2018

Global Disinformation Index non-profit is established to rate "risk" of media sites

The self-appointed, **Global Disinformation Index** (GDI) non-profit organization launched its website around March 11, 2018, but registered but incorporated the UK-based entity on April 7, 2018. It established 2 affiliates in the use in Nov. 2018 and Sept. 2020 respectively. Their stated mission is to "Restore trust in the media by providing real-time automated **risk ratings** of the world's media sites through a Global Disinformation Index." [1, 2]

Their "Prototype Funding" round closing April 30, 2018, and by 2019 they were supported by: Knight Foundation, USAID, Luminate, the UK Foreign & Commonwealth Office and Article 19 [3, 4, 5, 6] Luminate was established in 2018 by philanthropists Pierre and Pam Omidyar, and curiously in 2017 they partnered with Knight Foundation to "research artificial intelligence for the public interest".

The archives list the co-founders as:

- **Alexandra Mousavizadeh** – CEO of Decima Global [an obscure company, that doesn't really exist, and is not mentioned in her LinkedIn]
- **Clare Melford** of 9 Degrees and former managing director of MTV Network
- **Miguel Martinez** – Chief Data Scientist, Signal – REF
- **Dr. Daniel Rogers** of Terbium Labs & Veracity.ai (He appears to be added as co-founder in June 2018)

In October 2018, Mousavizadeh was a speaker at the second United Nations World Data Forum in Dubai.

On April 13, 2021 The GDI submitted a report to the United Nations 47th session of the Human Rights Council, who called for "Reports on Disinformation" – where they

state the “GDI’s goal is to catalyze industry to reduce disinformation and its harms by going after the financial incentives to create disinformation....primarily by primarily by seeking to defund disinformation – breaking the incentive to create it for the purpose of garnering advertising revenues...”

[Disinformation Resolution passed at the 66th UN GA January 2022]

UNESCO state “GDI provides disinformation risk ratings for news sites in media markets around the globe.” Who’s risk ratings are neutral, independent and transparent”, but conservative media appear to be their target and they maybe violating the law. [7]

March 29, 2018

Provisional Registration added to TGA legislation

On March 29, 2018 the Australian government added a **Provisional Registration** (PR) amendment to the Therapeutic Goods Act (1989), of which the TGA Secretary now has overriding power to send a product application through the registration process with **only** preliminary clinical data. [3]

The intent of this new registration category was explained in parliament in September of 2017 by Mr. Greg Hunt as being intended as an avenue to provide “medicine” to those people with “significant unmet clinical needs for serious conditions”. [8, 9]

The process started in 2014 with the formation of the MMDR panel to review and report on the regulatory framework of therapeutic goods. [4, 5, 6, 7]

The government responded in 2016, noting the “**international trends** towards allowing earlier access to medicines” especially looking to fast-track “novel and life-saving medicines”, with a seeming emphasis on cancer drugs. [10]

- Provisional registrations are of a limited duration (max 2 years) and require the sponsor to supply ongoing clinical data to support their product.
- All PR products are part of the Black Triangle Scheme where healthcare professionals or consumers should report to the TGA all and any “any unfavorable and unintended sign, symptom or disease” following the use of the product “to help us **build up** the full picture of a medicine’s **safety** profile.” It’s not the doctor’s job to determine if a unintended consequence is related or not to the medicine.
- “For provisionally registered medicines, the black triangle symbol will appear for a period of not less than five years.”
- Such “registrations” are added to the Australian Register of Therapeutic Goods (ARTG), but they are not classed as fully registered, they are **still under assessment** and may never receive full registration status.

Between 1 April 2018 until 22 June 2021 there has been 12 Provisional Registrations of which 2 are COVID-19 vaccines [1, 2] and 1 is remdesivir.

April 4, 2018

100 years since Spanish Flu Pandemic

In a symposium marking 100 years since 1918 Spanish Flu Pandemic, Professor Ralph Baric from UNC-Chapel Hill, speaks to the necessity of Gain of Function (GOF) research, and the opportunities to available from pandemics.

Ralph Baric is a “longtime collaborator” with Shi Zheng-Li (the “Bat Lady”) of the bat coronavirus research lab in Wuhan.

April 10, 2018

Paper: Use of Novel Vaccine Technologies for Emerging Viral Diseases

On April 10, 2018, Dr Anthony Fauci co-authors a viewpoint paper in JAMA Network **setting the stage for novel genetic vaccines** (mRNA or DNA) to shorten the time “to design, manufacture, and evaluate vaccines for clinical use...in response to newly emerging infections”.

“The time-honored approach to vaccinology, has not adequately met” the challenge of “emerging viral diseases with pandemic potential.” So, this paper looks to “exploit modern-day technological advances.”

[Reading this paper in retrospect summarizes the “vaccine solution” response to Pandemic 2020.]

“Historically, the process of vaccine development through to licensure requires **decades**...in total, 15 to 20 years would be a typical timeframe from virus discovery to vaccine availability if the process proceeds smoothly and there are no major biological or logistical challenges.”

However, clinicians and public health officials are often faced with outbreaks of viral diseases, sometimes of a pandemic nature that **would require** vaccines for adequate control.”

“Rapid genetic sequencing allows both early identification of new pathogens and the identity of the genes encoding structural proteins that can form the basis for vaccine immunogen development.”

“Synthetic vaccinology and platform manufacturing are important innovations that can speed the initial vaccine immunogen design and vaccine development process, and shorten the time needed for manufacturing and initial regulatory approval to begin phase 1 testing.”

“The process of gene synthesis is now extremely rapid...these genetic vectors (DNA and mRNA) can be used directly for immunization whereby intramuscular immunization leads to muscle cells producing the viral proteins. Alternatively, the genetic vectors can be used to express recombinant protein antigens, in vitro, that can be used for immunization.”

“The term **platform** ...in vaccine production... implies that the method for generating and presenting a vaccine immunogen **can be applied across multiple pathogens.**”

“DNA or mRNA nucleic acid vaccines are good examples of

how platform manufacturing can shorten timelines from pathogen identification to phase 1 clinical trials.” [1, 2]

“DNA vaccine delivery and immunogenicity have evolved and improved over the last 2 decades, **making it a viable platform for vaccination.**”

Based on NIAID experience “Once these pathogens were identified, the time from viral sequence selection to initiation of the **phase 1 clinical trial** was shortened from 20 months to slightly longer than **3 months.**”

“Traditional approaches, such as live-attenuated virus vaccines (e.g., Sabin polio) or whole-inactivated virus vaccines (e.g., Salk polio) would not qualify as platform approaches because the requirements for growth in cell culture and purification are usually different among virus families. Protein-based approaches ... may not be amenable to platform approaches.”

“Having a **standard manufacturing approach** reduces the time needed for current Good Manufacturing Procedures process development and **simplifies regulatory approval** because the safety database that has accumulated for a **given platform can be applied to multiple vaccine products.**”

Dr Fauci published another paper on “novel vaccine technologies” in Nature in November 2019...all in time for pandemic 2020.

mRNA vaccines are still in “preclinical studies” in September 2018.

May 8, 2018

WHO STAG-IG group began

On May 8-9, 2018, the WHO Health Emergencies (WHE) Programme led by Dr Mike Ryan, convened a meeting to prepare for the establishment of the **Strategic and Technical Advisory Group for Infectious Hazards** (STAG-IH), a multidisciplinary group of external experts newly tasked with advising the Deputy Director-General of Emergency Preparedness and Response on new and emerging infectious hazards that can threaten global health security. A program “underpinned” by the International Health Regulations. The members of STAG-IH are chosen by the WHO Director-General, of which a current member include the Robert Koch Institute’s Prof Lothar Wieler.

COVID – 19 Meetings are here.

May 15, 2018

Clade X – US bio-terrorism Simulation

On May 15, 2018, hosted by the Johns Hopkins Center for Health Security and held in Washington, DC, high level officials participated in a day-long pandemic tabletop exercise called Clade X. [1, 2]

“Drawing from actual events, Clade X identifies important policy issues and preparedness challenges that could be solved with sufficient political will and attention.”

A fictional elitist cult had financed the creation of a deadly virus called “Clade X” in a bio-lab in Zurich, with the aim of reducing the global population. A Global pandemic resulted upon its fictitious release.

“In the end, the outcome was tragic: the most catastrophic pandemic in history with hundreds of millions of deaths, economic collapse and societal upheaval” — Clade X pandemic simulation (May 2018)

The simulation concluded that the world wasn’t prepared for a global pandemic.

May 24, 2018

Global Preparedness Monitoring Board Formed

Global Preparedness Monitoring Board (GPMB) was created in response to recommendations by the UN Secretary General’s Global Health Crises Task Force mid-2017.

The predecessor **Global Health Crises Task Force** was created in 2016 in response to the West Africa Ebola outbreak, they stated, “Recent health emergencies, including the 2014-2016 West African Ebola outbreak, shed light on the major gaps in sustained political will, action, and sustainable financing for preparedness” and they recommended “the need for robust ongoing monitoring of global health emergency preparedness.”

The GPMB was formally launched in 24 May 2018, with their first meeting was held Sept 2018, the board is co-convened by the WHO and the World Bank Group and is said to be “an independent monitoring and accountability body to ensure preparedness for global health crises”, with funding that has come from the Gates Foundation, Wellcome Trust, & Germany. [1]

The GPMB commissions, prepares and “publishes an annual report on global preparedness for health emergencies that provides an authoritative assessment that is easily translatable to action for policymakers, researchers, health professionals and donors”. The September 2019 report “A World At Risk”.

In Sept 2019 the Johns Hopkins Center for Health Security release a timely report titled “Preparedness for a High-Impact Respiratory Pathogen Pandemic”, and then in September 2019 the GMPB release their compiled report “A World At Risk”, a month later in October 2019 **Event 201** was held.

The founding co-chair Dr **Gro Harlem Brundtland**, was (may still be) a member of the Trilateral Commission and wrote “Our Common Future”, the book that popularised the term Sustainable Development, and provided the framework for the UN Agenda 21 in 1992.

Many of the Board members have been intimately involved with steering the pandemic narrative:

- Co-Chair – Dr Gro Harlem Brundtland – Served as WHO Director-General 1998-2003

- Co-Chair – Mr Elhadj As Sy – Red Cross
- Dr Victor Dzau – President Nat. Acad. Medicine
- Dr Chris Elias – President B&M Gates Foundation
- Sir Jeremy Farrar – Director Wellcome Trust
- George F Gao – China’s CDC
- Dr Anthony S Fauci – Director of NIH
- H.E. Sigrid Kaag – Netherlands
- Prof Ilona Kickbusch – German/Switzerland
- Henrietta Fore – UNICEF
- Dr Yasuhiro Suzuki – Japan
- Prof Veronika Skvortsova – Russian Federation
- Prof K VijayRaghaven – India

Learn more >>

May 31, 2018

Bill Gates predicts a large and lethal pandemic in our lifetime

Bill Gates writes in a NEJM perspective on May 31, 2018, “Thanks to **better vaccines**” we’ve made headway on diseases.

“Yet there is one area where the world isn’t making much progress: **pandemic preparedness**. This failure should concern us all, because history has taught us **there will be another deadly global pandemic**. We can’t predict when, but given the **continual emergence of new pathogens**, the increasing risk of a bioterror attack, and the ever-increasing connectedness of our world [population growth] , there is a **significant probability that a large and lethal modern-day pandemic will occur in our lifetime.**”

“What the world needs is a coordinated global approach to pandemics that will work regardless of whether the next pandemic is a **product of humans or of nature.**”

The percentage of people who choose to get a seasonal influenza vaccine is fairly small, but modelling simulations suggest a “highly contagious and lethal airborne pathogen” could see “33 million people worldwide would die in just 6 months”.

[2 1/2 years into the COVID-19 pandemic 6.3 million deaths have been recorded worldwide]

On May 29, 2018 the Gates foundation “launched a \$12 million Grand Challenge ... to accelerate the development of a universal influenza vaccine” in order to end the “pandemic threat”. He noted “the current influenza vaccines significantly underperform.”

“However, **the next threat** may not be influenza at all.”

Late 2018 CEPI will award grants “to several companies, working with a variety of technologies, including **nucleic acid vaccines, viral vectors**, and other innovative approaches. **The goal is the capability to develop, test, and release new vaccines in a matter of months rather than years.**”

“If we can learn how to use RNA or gene delivery effectively, we may not need to make the antibodies at all. Instead, new methods of gene delivery could **enable our own cells** to produce these **antibodies** directly.”

“In the case of biologic threats, that sense of urgency is lacking.” The “world needs to prepare for pandemics in the same serious way it prepares for war.”

June 29, 2018

TGA Advertising Code defines a “serious form of a disease”

Legislation changes to Australia’s Therapeutic Goods Advertising Code defines a “serious form of a disease” was restricted in 2015, and opened up in June 29, 2018 update, to be anything deemed “medically accepted” as a serious disease or a diagnostic test available (see Section 28). [1, 2]

August 10, 2018

FDA: first-in-class drug approval paves the way for RNA-based medicine

On August 10, 2018 the FDA approved patisiran (Onpattro) by Alnylam pharmaceuticals. This is a “first-in-class” drug is a small interfering RNA (siRNA) drug that work inside the cell at the RNA level. The FDA anticipates that **[RNA-based Medicine]** is the beginning of a new and exciting generation of therapeutics” [1, 2, 5]

The phase 3 trial included 225 patients with a “rare and frequently fatal” hereditary disease called transthyretin-mediated amyloidosis (hATTR), 148 were given the treatment [3]

Onpattro drug formulation contains “lipid excipients (DLin-MC3-DMA, DSPC, cholesterol, and PEG2000-C-DMG)”, because of this registration, the lipid nanoparticle ingredient **DSPC** (1,2-Distearoyl-sn-glycero-3-phosphocholine), which is also used in Pfizer’s mRNA COVID-19 vaccine as a structural lipid, is thus not considered as “novel”, unlike the functional lipids ALC-0315 and ALC-0159. [4]

September 1, 2018

China’s Digital Dictatorship set up for 2020

It’s been in the pipeline for years: a sprawling, technological mass surveillance network the likes of which the world has never seen. Journeyman Pictures provide an insight into China’s Social Credit System (as scoring system) otherwise referred to as a digital dictatorship where every aspect of their life is monitored and rewarded or banned accordingly. [6]

The social credit scheme will become a “truly national unified system” i.e. Mandatory by 2020. Computer algorithms with phones and 24/7 camera surveillance is scoring,

rating and controlling “bad” citizens, thanks to mass scale implementation and acceptance of technology coupled with Artificial Intelligence. [2, 3, 4, 5, 9]
The scheme was first unveiled in 2014 and after 2020 the next five-year plan, which covers 2021 to 2025, the regime has set out its ambitions surveil people even more. [7]

China believes their scheme is a broad way to encourage trustworthiness in it’s citizens through their mix of measures.

Have you noticed more cameras installed in your local main street? Have you heard of Smart Cities? [8, 10, 11]

October 16, 2018

BioNTech CEO predicts mRNA tech for rapid vaccine development

BioNTech’s founder and CEO Dr Ugur Sahin was a “Spotlight” speaker at the October 16, 2018 World Health Summit and Grand Challenges annual meeting, which was held in Berlin, Germany. Other speakers included Bill Gates and Tedros Adhanom Ghebreyesus.

In Dr Sahin’s speech he said [1, 2]

“his company might be able to use its so-called messenger RNA technology to rapidly develop a vaccine in the event of a global pandemic”

BioNTech was founded in 2008 by Dr. Sahin with his wife, Dr. Özlem Türeci. By late 2018 it was still a little known European biotechnology start-ups which mostly focused on cancer treatments. [3] Like Moderna, BioNTech had never brought a product to market.

A month earlier, On August 16, 2018 BioNTech announced a partnership agreement with Pfizer to collaborate on an mRNA influenza vaccines.

In September 4, 2019 the “Bill & Melinda Gates Foundation invested \$55 million to fund its work treating H.I.V. and tuberculosis”.

Starting September 24, 2019 BioNTech announces commencement of their Initial Product Offering (IPO). [3, 4]

Prior to all this, in 2001, Dr. Sahin and Dr. Türeci founded Ganymed Pharmaceuticals, which developed drugs to treat cancer using monoclonal antibodies, in October 2016 they sold that company for \$1.4 billion.

December 7, 2018

Moderna became a public listed company

In December 2018, Moderna became a public listed company via the largest biotech initial public offering (IPO) in history, only to slump through 2019. Moderna which was founded in 2013, was saved by their COVID-19 vaccine in 2020 as they had never produced a single product before. [1, 2]

On May 10, 2019 Moderna announced the first human studies of mRNA vaccines said to demonstrate “a new technological approach to flu vaccine development and production”. [3]

January 2019

January 1

Immunization Agenda 2030 – “leave no one behind”

In 2019 the World Health Organization (WHO) began planning a new decade of vaccines called **Immunization Agenda 2030** (IA2030), superseding the **Global Vaccine Action Plan** (GVAP), that started in 2011 and expired 2020.

Vaccination or Immunization, a practice the WHO claims saves “millions of lives every year”, is a component of 14 out of 17 of the United Nations Sustainable Development Goals (SDG). The plan is sold as “Immunization is an investment for the future, creating a healthier, safer and more prosperous world for all” and the intention is to “leave no one behind”, the market has opened up to everyone. [1, 2]

“Immunization is playing a critical role in achieving the Sustainable Development Goals (SDGs). Immunization reaches more people than any other health and social service, making it the **foundation** of primary health care systems and a key driver toward universal health **coverage**.” (Now think digital “vaccination certificate” – which will morph into passport)

In August 2020 at the 73rd World Health Assembly the new global vision for vaccines **IA2030** was endorsed.

January 24

Imperial College talks vaccines at Davos

On January 24, 2019, the UK’s Imperial College scientists present “developing a vaccine revolution” to world leaders at the World Economic Forum (WEF) in Davos. [1, 2] Is this about health or money?

January 28

The Stock Market introduced ESG Index – to measure a companies “sustainability”

The **S&P 500 ESG Index**(Environmental, Social and Governance) was launched January 28, 2019, just days after a WEF ESG white paper was released. [1]

The white paper was produced in collaboration with Allianz SE and Boston Consulting Group. [2]

The white paper states that the “role of the private sector in society is **evolving**. As the global community aims to **deliver on the United Nations’ Sustainable Development Goals for 2030**, citizens, governments and investors are looking increasingly to companies to take a leading role in addressing critical societal challenges.” “The evidence continues to mount that integrating **environmental, social and governance (ESG)** considerations into investment and company management helps deliver superior performance and long-term financial returns.” Tesla’s ESG score rated poorly where as the heavy carbon producer EXXON rates in the top 10!

February 1

February 2019

February 22

“Bat woman” gives a “TED Talk” on “Tracking the Source of SARS”

On February 22, 2019 **Shi Zhengli** known as “Bat Woman” gave a *One Seat* presentation (like a TED Talk) titled *Tracking the source of SARS*. [1, 2, 3] Not even a year later, a new SARS virus “emerges” which the media pushes to be of animal origin (zoonotic), and “officials” try to discount any consideration for SARS-CoV-2 being of potential lab origin, the very lab in Wuhan, China where Shi Zhengli stores collected bat coronaviruses, and genetically manipulates them.

March 1

March 2019

March 2

Paper: China bat coronavirus transmission potential urgently needs studying

On March 2, 2019, Shi Zheng-li and her Wuhan team published in the journal *Virology* “*Bat Coronaviruses in China*”, explaining that they aimed “to predict virus hot spots and their cross-species transmission potential,” describing it as a matter of “**urgency** to study bat coronaviruses in China to understand their **potential** of causing another outbreak.” [1]

March 11

WHO launch Global Influenza Strategy for 2019-2030

On March 11, 2019, the WHO launched their **Global Influenza Strategy for 2019-2030** framework document “for WHO, countries and partners to approach influenza holistically through tailored national programs – from surveillance to disease prevention and control – with the goal of strengthening seasonal prevention and control and preparedness for future pandemics.” The goal of the strategy is to prevent seasonal influenza, control the spread of influenza **from animals to humans**, and prepare for the next influenza pandemic.”

“The question is not if we will have another pandemic, but when. We must be vigilant and prepared – the cost of a major influenza outbreak will far outweigh the price of prevention.” said WHO Director-General Dr Tedros Adhanom Ghebreyesus.

Justified by the [alleged] global health “challenge” of influenza where every year they state globe has “an estimated 1 billion cases... resulting in 290 000 to 650 000 [or 500K?] influenza-**related** respiratory deaths”, but this figure for death is an “extrapolation” of US statistics of mostly “pneumonia” or influenzas-like illness. [4] The “WHO recommends annual influenza vaccination as the most effective way to **prevent** influenza”, however it is known that “licensed vaccines provide **suboptimal protection** against seasonal influenza (typically ranging from **10% to 60%** [3]), need to be updated each year...”. This global health organization, who is funded by private interest parties, does not consider or promote the known **immune-fortification** benefits gained from cheap Vit D, Vit C or the many other options already available.

This strategy builds on the **Global Influenza Surveillance and Response System (GISRS)** which for 65 years has monitored seasonal influenza strains – the backbone of the global alert system for influenza, as well as the **Pandemic Influenza Preparedness Framework**. Note: The WHO’s Global Influenza Surveillance Network “writes the annual vaccine recipe” targeting “the 3 most virulent strains in circulation”. [6]

This new strategy framework “integrates **broader goals** for prevention, control and preparedness for all countries” and is “aligned with the goals of WHO’s **13th General Program of Work** for achieving **universal health** coverage, addressing health emergencies and promoting healthier populations.” [2]

March 13

FDA considers mRNA products “gene therapy”

On March 13, 2019, Moderna submitted their Form 10-K Annual Report to the Securities & Exchange Commission (SEC) in which they claimed on page 150 that “Currently, **mRNA is considered a gene therapy product by the FDA**”. [1, 2]

In that same filing they state “because no product in which **mRNA** is the primary active ingredient has been approved, **the regulatory pathway for approval is uncertain**. The number and design of the clinical and preclinical studies required for the approval of these types of **medicines** have not been established...”

Fast forward to early 2020 and suddenly this mRNA product is no longer a “type of medicine” or drug, but is **referred to as a “vaccine”**, which means they can slip into an established regulatory pathway of a “biologic”. According to the FDA vaccines are meant to “prevent infectious diseases”. The FDA’s **Center for Biologics Evaluation and Research** (CBER) regulates vaccine products – a separate department within the FDA to medicines/drugs, with their own assessment and licensing process (BLA). Moderna goes from a company that has “incurred significant losses since our inception”, having never brought a product to market, to \$12 billion in profits in 2021 on the back of an mRNA product they called a “vaccine”.
‘We probably would have had a 95% refusal rate’ for these shots two years ago, but the pandemic and marketing of the injections as ‘vaccines’ has made them popular with the public, said Stefan Oelrich, president of Bayer’s Pharmaceuticals Division, speaks at the 2021 Global Health Summit

March 15

NSF Convergence Accelerator program begins

On March 15, 2019 the US National Science Foundations (NSF) sent out a call for applications (NSF 19-050) for their new **Convergence Accelerator Pilot (NSF C-Accel)**. The accelerator program stems from the NSF **Growing Convergence Research** which began March 31, 2017 as “one of 10 Big Ideas for Future NSF Investments”. [3]

The NSF Convergence Accelerator (C-Accel) seeks to encourage public-private partnerships (Cohorts). The initial set of pilot awards are focused on two of the NSF Big Ideas: *Harnessing the Data Revolution* (Track A) [surveillance?] and *Future of Work at the Human-Technology Frontier* (Track B) [trans-humanism?]. The idea is to support projects “that are identifying new ways to apply Big Data to science and engineering and create technologies that can enhance the lives of American workers.”

NSF C-Accel issued its first round of awards in **September 2019** totaling **\$39 million**. [The C-Accel is “a new capability within NSF to accelerate use-inspired, convergence research in areas of national importance via partnerships between academic and non-academic stakeholders.” **\$27M** in 2020 and **\$50M** in 2021, **\$12M** in 2022 [6]

By October 2022 the NSF C-Accel program awards \$5 million to accelerate “Phase II development of the **Analysis and Response Toolkit for Trust (ARTT)** [1, 2], a suite of expert-informed resources that are intended to provide guidance and encouragement to individuals and communities as they address contentious or difficult topics online.” Phase II is led by Hacks/Hackers , a non-profit organization focused on journalism and technology.

This \$5M funds software and **behavioral science** to manipulate and control free thinking and create bots to counter “misinformation” online! “Users are encouraged to paste in their friends’ Twitter and Facebook posts, and the tool will tell them **how “harmful” they are.**” with emphasis on vaccine misinformation!

Hacks/Hackers said "Additional advising in Phase I has come from members of WHO's Vaccine Safety Net." [4, 5]

April 2019

April 23

Johns Hopkins promotes Vaccine Platform Technologies

On April 23, 2019 the Johns Hopkins Center for Health Security publishes a report titled "Vaccine Platforms: State of the Field and Looming Challenges". The project was sponsored by Facebook co-founder, Dustin Moskovitz's "**Open Philanthropy Project**", which also sponsored Event 201. [1, 2]

"Over the past several years, [vaccine] platform technologies have been developed that **could** make it possible for multiple vaccines to be more rapidly produced from a single system." In the report "the researchers describe major scientific and policy issues related to vaccine platforms" and "it provides recommendations aimed at helping realize the potential benefits of **vaccine platform technologies**" such as **mRNA vaccines**.

To date "there has been little in-depth analysis of platform vaccine technologies as a distinct class of technologies and approaches." If these vaccine platform could be accepted by regulators and policy makers it would open the flood gates for investors and development, not to mention the promoted "urgent need for vaccines to combat emerging infectious disease outbreaks."

April 30

Twelve non-state health agencies met to accelerate global health-related SDGs

On April 30, 2019, 12 non-state actors for global health and development (Gavi, GFF, Global Fund, UNAIDS, UNDP, UNFPA, UNICEF, Unitaid, UN Women, WFP, WHO and the World Bank) met to discuss "new ways of working together to accelerate progress towards the health-related Sustainable Development Goal (SDG) targets. To guide their collaboration, organizations are developing a Global Action Plan (GAP) to be presented at the UN General Assembly in September 2019." [1, 2, 3]

Eight days later on May 8, 2019, the German led Global Health committee met to discuss "Strengthening global health – implementing the UN Sustainable Development Goal".

May 2019

May 8

Congress to Strengthen Global Health led by Germany

On May 1, 2019, the leaders of Germany's two conservative parties, the CDU and the CSU, pledged to stick together after a year of public discord, then 7 days later on **May 8, 2019**, at a "top-class congress", the CDU/CSU parliamentary group met in the Bundestag with invited guests to discuss the topic "Strengthening global health – implementing the UN Sustainable Development Goal".

In attendance was German Chancellor Angela Merkel, WHO's director general Tedros Adhanom Ghebreyesus, and members of the Global Health subcommittee represented by Gates Foundation, Christian Drosten, Wellcome Trust's Jeremy Farrar and the 2017 founder of the Center for Global Health Prof. Dr. Clarissa Prazeres da Costa. [1, 2, 3, 4] [NOTES]

Germany has taken on a pioneering lead role in "**developing a strategy for global health**, and the World Health Organization (WHO) is working on an **action plan**."

"With its G20 presidency, Germany has put global health on the international agenda."..."I think it's fair to say that Germany is one of WHO's greatest supporters and best friends." Tedros said. Tedros will present the Global Health the Plan to Nations General Assembly in September 2019!

At the meeting Ilona Kickbusch warned of "thinking in national units or in delimited sectors", but rather "No one should be left behind" and that "Health ministers in the 21st century always have international responsibilities." Today, **health policy can no longer be separated from climate policy**: "The health of people can no longer be understood separately from the health of the planet."

Federal Health Minister Jens Spahn "cited **vaccine fatigue** in Germany with a view to the re-spread of measles. He recalled that the WHO ranks **opponents of vaccination among the ten biggest risks to global health**. That is why he is campaigning for compulsory vaccination..."

"Spahn is also focusing on **digitization**. He said **smartphones** and health apps can be used to reach people who have never been reachable in traditional ways for healthcare services."

The Center for Global Health was founded in 2017 by Prof. Andrea Winkler and Prof. Clarissa Prazeres da Costa. Their "goal is that research results are quickly translated into meaningful and effective **political measures**. This is the only way we can achieve the goals for **sustainable development of the United Nations**, to which the Federal Republic of Germany has also committed itself." "Due to the increasing interconnectedness of our world, health has also become an issue that needs to be viewed globally." [4]

May 9

The One Health Lancet Commission is formed

On May 9-10, 2019 the **One Health Lancet Commission** (OHLC) is formed in Oslo, "the importance of a One Health approach, [is] simply because pandemics are more

than 75% likely to stem from animal disease'. A year later they release their official report. [1, 2, 3, 4] [The other 25% lab origin???] The commission comes just in time, as the COVID-19 pandemic propelled One Health into "importance"! [5, 6] The zoonotic origin story was pushed early by OHLC member Peter Daszak et al, claiming the lab leak hypothesis as a "conspiracy theory", which turned out to be the most plausible origin. Australia's OHLC representative Dr Anna Okello said in 2019 that 'someone can hop on plane and travel across the world quicker than the incubation period of a virus. Health security is everyone's problem.'

May 13

WEF's Schwab declares the 4th Industrial Revolution has already begun

On May 13, 2019 at the Chicago Council on Global Affairs, [2, 3] allowed World Economic Forum's founder, Klaus Schwab to declared the **Fourth Industrial Revolution** [globalization 4.0.] had already begun.

Schwab's message was that a "successful global future will require states, individuals, and organizations to innovate and cooperate in entirely new ways."..."At the end what the Fourth Industrial Revolution will lead to is a **fusion of our physical, our digital and our biological identities.**"! [1]

The Chicago "Council leaders, especially its former president Adlai Stevenson, helped create the United Nations."

May 15

WHO partners with the Wellcome Trust

On May 15, 2019 the **World Health Organization** (WHO) announced the formation of a partnership with the **Wellcome Trust**, a non-state actor. The partnership is focused "on three broad areas of work: health emergencies and epidemic preparedness, anti-microbial resistance and supporting the acceleration of health-related Sustainable Development Goals (SDGs) through research, innovation and data." [2]

"Epidemic preparedness is key for both organizations. As part of a joint initiative with the UK's Department for International Development, Wellcome is one of the partners providing funding for WHO's Research and Development (R&D) Blueprint activities." Endorsed at the World Health Assembly in May 2016 the R&D Blueprint "is a global strategy and preparedness plan that allows the rapid activation of research and development activities during epidemics" with the aim "to fast-track the availability of effective tests, vaccines and medicines that can be used to save lives and avert large scale crisis." [1, 3]

June 2019

June 1

China began buying up global supplies of PPE

A retrospective look found that “China had started hoarding **Personal Protective Equipment (PPE)** far earlier than the initial date of the [official SARS-CoV-2] outbreak”. China allegedly bought up PPE stock from US, Europe and Australia from **mid 2019 (May-June)**. Between August and September of PPE exports from China to US fell by around 50%, and as early as May-June 2019 China’s PPE spending doubled in 2019 compared to both 2017 and 2018 together. This information which calls into question whether China was aware of a virus outbreak earlier than December 2019? [1]

Additionally in late September 2019 US hospitals reporting they were unable to get their “normal supply of masks, gloves, gowns and goggles”.

When the US Dept of Homeland Security was made aware of this statistical intel they allegedly “declined to investigate.”

The restricting of PPE exports happened around the time frame the Wuhan Institute of Virology (WIV) removed a database of bat virus gene sequences, which has never been restored

June 1

WIV created mice with humanised lungs

A study submitted for publication in April 2020 from the **Wuhan Institute of Virology (WIV)** used transgenic humanized mice, engineered so their lungs express ACE2 receptors. These mice aid as animal models, representing a human subject and are used to study their susceptibility to viruses.

In a comprehensive Vanity Fair article, it was noted that **working this study timeline backwards**, it was estimated that sometime in the [US] summer of 2019 [winter in Australia JUNE], “months before the virus first appeared in Wuhan, the Wuhan Institute of Virology was growing human lungs, in mice, for the purpose of testing out the human infectivity of coronaviruses.” [1]

The NSC officials who uncovered this important evidence in favor of the lab-leak hypothesis began reaching out to other agencies, but were immediately “dismissed” with a very “negative” response. Throughout 2020, the notion that the novel coronavirus leaked from the WIV lab was taboo, by anyone!

Further, the “NSC officials were left wondering: Had the Chinese military been running viruses through humanized mouse models, to see which might be infectious to humans?”

Did the Chinese engineer these mice, or were they given them by the US? [2]

June 13

The United Nations partners with the WEF

On June 13, 2019 the **United Nations** formed a partnership with the **World Economic Forum** (WEF) a member-only, private non-governmental organization (NGO) and the promoter of The Fourth Industrial Revolution, The Great Reset and The Great Narrative. They signed a **Strategic Partnership Framework** to “jointly accelerate the implementation of the **2030 Agenda for Sustainable Development.**” [3, 4]

The six areas they will focus on are “financing the 2030 Agenda, climate change, health, digital cooperation, gender equality and empowerment of women, education and skills. [1]

The WEF is an NGO, independent, unelected and unaccountable, yet has extreme global influence. The WEF are “committed to improving the state of the world, is the **International Organization for Public-Private Cooperation.** The Forum engages the foremost political, business, and other leaders of society **to shape global, regional and industry agendas.**” [2]W

What this will mean >> WATCH

July 2019

July 1

Fort Detrick infectious disease lab shut down by CDC

In July 2019 the US CDC sent a “cease and desist order” to the **U.S. Army Medical Research Institute of Infectious Diseases** (USAMRIID) lab in Fort Detrick, Maryland, for failing to meet biosafety standards.

“After USAMRIID received the order from the CDC, its registration with the Federal Select Agent Program, which oversees disease-causing material use and possession, was suspended.” [1, 3]

“During an inspection in June, the C.D.C. found that the new procedures were not being followed consistently. Inspectors also found mechanical problems with the chemical-based decontamination system, as well as leaks...” The problems date back to May 2018, [2]

Fort Detrick military lab employed Bruce E. Ivins who was a leading suspect in the anthrax mailings in 2001, before his apparent suicide in 2008. The lab was previously suspended in February 2009. There have been many other pathogen containment issues at US labs.

July 5

Two research scientists with connections to China escorted from Canada's Level-4 virology lab

On July 5, 2019 two research scientists and an unknown number of her students from China were escorted out of the National Microbiology Lab in Winnipeg, Canada's only Level-4 virology lab. [1, 2]

Dr. Xiangguo Qiu and her biologist husband, Keding Cheng, were stripped of their security clearances and escorted from the National Microbiology Lab (NML) in July 2019 and fired in January 2020 for reasons a possible patent "policy breach."

Xiangguo Qiu is listed as an inventor on two patents filed by official agencies in China in recent years.

"Qiu is a medical doctor from Tianjin, China, who came to Canada for graduate studies in 1996. She is still affiliated with the university there and has brought in many students over the years to help with her work."

July 11

Trusted News Initiative announced

At a FCO Global Conference on Media Freedom on **July 11, 2019**, Tony Hall, Director-General of UK's BBC, announced that "last month I convened, behind closed doors, a Trusted News Summit" with Big Tech giants and other media to fight disinformation and fake news. So was born the **Trusted News Initiative (TNI)**. Together with "major publishers, Google, Twitter and Facebook" who have "helped devise the scheme" on the back of "criticism of big technology firms ... failing to do enough to prevent the spread of "false news"" and assist with fact checking. Together they intend to control information "from scares about vaccines to stories manufactured to influence elections." [1, 2, 3]

TNI partners include: AP, AFP; BBC, CBC/Radio-Canada, European Broadcasting Union (EBU), Facebook, Financial Times, First Draft, Google/YouTube, The Hindu, Microsoft, Reuters, Reuters Institute for the Study of Journalism, Twitter, The Washington Post, all heavily funded or have ties with Big Pharma companies aka the vaccine manufactures. [4, 5]

From March 2020 the TNI network of media and Big Tech giants, coordinated the censorship and "fact checking" of any expert voice that didn't ask "approved" questions or come to "approved" conclusions, or promotes anything that jeopardized the vaccine agenda.

The Narrative >>>

The Mockingbird Media >>>

August 2019

August 1

Mysterious outbreak of vaping-related lung injury illness in US

On August 1, 2019 the CDC launched a multistate investigation into a mysterious outbreak of lung injury illnesses later referred to as EVALI. At this time 25 US states had reported possible cases of lung illnesses associated with use of e-cigarette (vaping) products (e.g., devices, liquids, refill pods, and cartridges), of which 2 deaths had been reported. [2, 3]

As early as July 2019 several patients aged 18–35 years with acute lung injury, reported to all have “experienced several days of worsening dyspnea, nausea, vomiting, abdominal discomfort and fever”. “All five patients shared a history of recent use of marijuana oils or concentrates in e-cigarettes”.

On Feb 25, 2020 the CDC reported Emergency department (ED) visits related to vaping products continue to decline, after sharply increasing in August 2019 and peaking in September 2019. [4] As of February 18, 2020, a total of 2,807 hospitalized EVALI cases were reported to CDC from all 50 states, the District of Columbia, and two U.S. territories (Puerto Rico and U.S. Virgin Islands) of which 68 died. The first death was reported on Aug 23, 2019.

“No evidence of infectious diseases has been identified in these patients, therefore lung illnesses are likely associated with a chemical exposure.” Investigations by the CDC into EVALI revealed 82% of hospitalized patients reported tetrahydrocannabinol (THC)-containing product use, potentially contaminated. [5]

August 7

Kary Mullis, the inventor of PCR, passes away

Kary Banks Mullis, who received the Nobel Prize in Chemistry in 1993 for his invention of PCR, died on August 7, 2019 of pneumonia at the age of 74. [1, 2, 3] Kary was clear that PCR tests are **not a diagnostic tool**, they can't tell you that you're sick. [5]

“PCR is just a process that is used to make a whole lot of something out of something” because there's “very few molecules that you don't have at least one single one of in your body.”

The intended use of the PCR was, and still is, to apply it as a manufacturing technique, being able to replicate DNA sequences millions and billions of times, and not as a diagnostic tool to detect viruses.[4]

Mullis once stated that Dr Anthony Fauci “*doesn't know anything about anything*” and because of this “*he should not be in the position he's in*”.

More on PCR >>

August 9

Remdesivir dropped from Ebola trial in DRC

On August 9, 2019 the independent Data and Safety Monitoring Board (DSMB) recommended the early termination of an Ebola Therapeutics Trial in Democratic Republic of the Congo (DRC) because an early stopping criterion in the protocol had been met by one of the products, REGN-EB3, a monoclonal antibody. They recommended that all future patients be randomized to receive either REGN-EB3 or mAb114 in what is being considered an extension phase of the study. [1, 2]

“The four therapies are administered as intravenous infusions. REGN-EB3 and mAb114 are administered as single infusions and ZMapp and remdesivir are administered as infusions over multiple days.”

“The study was designed to compare mortality among patients who received one of three investigational Ebola drugs with that from a control group of patients who received the investigational monoclonal antibody cocktail ZMapp”...“The mortality rate in the remdesivir treatment group, 53% (93/175), was similar to ZMapp.” Remdesivir increased the risk of deaths and caused renal failure.

Three drugs were supported by US NIH/NIAID and BARDA, and one of the products dropped from the trial, remdesivir is made by Gilead Sciences.

The Pamoja Tulinde Maisha (PALM [together save lives]) study is a randomized, controlled trial of four investigational agents (ZMapp, remdesivir, mAb114 and REGN-EB3) for the treatment of patients with Ebola virus disease. The study began on November 20, 2018 in the Democratic Republic of the Congo (DRC) as part of the emergency response to an ongoing Ebola outbreak in the North Kivu and Ituri Provinces.

The paper was published December 12, 2019, in the New England Journal of Medicine. [3]

September 2019

September 1

Declassified: Breach of lab containment WIV

A declassified US State Department intelligence report released in January 15, 2021, stated there was reason to believe that several workers at Wuhan Institute of Virology (WIV) displayed symptoms consistent with COVID-19 in “autumn 2019” (**Sept**-Nov 2019) before the first official “identified” case of the outbreak.

“This raises questions about the credibility of WIV senior researcher Shi Zhengli’s public claim that there was “zero infection” among the WIV’s staff and students of SARS-CoV-2 or SARS-related viruses.”

Questioning whether the virus “escaped” from WIV?

September 1

Retrospective: China paper suggest virus origin September 2019 in US!

According to a September 23, 2021 article **out of China**, they report that “Chinese researchers have discovered by employing big-data analysis that the COVID-19 pandemic in the United States might have started to spread around in September 2019” [1]

“According to... a preprint in ChinaXiv, a series of previous studies showed that the United States, Spain, France, Italy, Brazil and other countries had shown signs of being hit by the virus **before its outbreak in China**” [2]

“The result indicated that, for the 12 U.S. states, the possible dates of the first infection, with a probability of 50 percent, fall mostly between August and October 2019, while the earliest is April 26, 2019, on Rhode Island, and the latest is Nov. 30, 2019 in Delaware.”

Other novel approaches suggested the virus started in China earlier than officially declared, as early as October-November 2021.

September 1

CDC's Data Modernization Initiative starts with a white paper

In September 2019, The Council of State and Territorial Epidemiologists (CSTE) released a deBeaumont funded, white paper titled, “*Driving Public Health in the Fast Lane: The Urgent Need for a 21st Century **Data Superhighway***.”,

Then justified by the pandemic, the CDC uses CARES Act funding to promote their **Data Modernization Initiative** (DMI), the Public Health 21st Century Surveillance Superhighway.

On June 6, 2022 the CDC shuts down their National Vital Statistics System (NVSS) for an upgrade – which allowed the CDC to “Short and Reassign Death Records” such as for cancer, excess deaths and SADS. [1]

September 3

SARS-CoV-2 was circulating in Italy – blood work antibodies indicate

Between **September 3, 2019** to March 2020, blood was taken from healthy trial volunteers from across several Italian regions who were enrolled in a lung cancer screening trial. Upon later analysis it was found the blood from many participants had the “unexpected detection of SARS-CoV-2 antibodies”, **strongly suggesting** the virus was in circulation in Italy as early as September 2019, approximately 5 months before the first official reported case of COVID-19 in February 2020.

The National Cancer Institute (INT) of the Italian city of Milan published their data in Tumori Journal and it is reported to show that 11.6% of 959 healthy volunteers

enrolled in a lung cancer screening trial had developed SARS-CoV-2 antibodies well before February 21, 2020 when their first official COVID-19 patient was recorded. Italian researchers told Reuters in March 2020 that they reported a higher than usual number of cases of **severe pneumonia and flu** in Lombardy in the **last quarter of 2019** [1]

Italy had a bad 2019 flu season (late 2019), and so did the US. [1]

Tests of the US blood supply indicates the SARS-CoV-2 antibodies were present in December 2019.

September 4

"The vaccine will be the real killer" states an anonymous "Operative"

Curiously on **September 4, 2019** (US time) an anonymous person claiming to be an "Operative" who displays a Swedish flag, posted on 4Chan warning of a "major event" coming in 2020-2021 that will kill "9-10 million Americans". They stated "Do not accept any **vaccines** that will be released for a deadly virus in the winter of 2020" [Dec-Feb?]. They stated the virus would first appear in "TORILLE! :)" which in Finnish translates to "square" or maybe market square or "wet market"?

A few minutes later they stated "It will originate from a pharmaceutical company working with military ops in a west coast state. It will be accurately planted in major cities and it will cause flu like symptoms and may be deadly to elders and babies but **the media** will report it as deadly for everyone but **It's a hoax, the vaccine will be the real killer** packed with copious amounts of toxic metals."...then "...I know they have tested it multiple times already but in different "brand" names".

Not all accurate, but the timing is interesting, as one person points out "That's the plot to at least a dozen Hollywood movies. "Make of this as you will! - CREDIT

September 12

Moderna/DARPA: First human Phase 1 trial using "mRNA therapeutic"

On September 12, 2019 Moderna announced study findings from their first ever human trial using a "mRNA therapeutic", mRNA-1944, to encode the antibody protein, CHKV-24, for chikungunya "a mosquito-borne virus that poses a significant public health problem in tropical and subtropical regions". [1, 2, 3, 4]

"These exciting data demonstrate a new way to address infectious diseases that uses mRNA to make antibodies in humans, establishing a powerful technology that could be **deployable in a pandemic setting**." was commented in the press release.

"The results of this clinical trial validate that approach" DARPA representative stated. Sponsored by US DARPA, the trial protocol was first posted on Clinical Trials on February 4, 2019, taking 7 months to complete Phase 1 of the trial in 22 healthy adults, of which 6 received the placebo.

Phase 1 trial was “paused” in May 2020 due to the pandemic.

September 12

WIV removed database of virus gene sequences

On September 12, 2019, some 22,000 records of the bat virus genetic sequences collected from both Yunnan and Laos were removed from 16 online databases at the **Wuhan Institute of Virology** (WIV) for reasons unclear! Most of WIV’s databases were once accessible online – but have since all been systematically taken offline by China.

Leaked US government documents show Wuhan scientists were studying viral strain found in bats which is near-identical to Covid-19 in latest lab-leak evidence. [1]

September 17

2019 repo crisis – Fed starts bailing out the banks

On September 17, 2019 the lending rate in the overnight repos spiked to unprecedented 10% (normally 2%), necessitating an emergency infusion by the Federal Reserve (Fed) to prevent the breakdown of the cash market. The Fed injected \$53 billion infusion on Tuesday then \$75 billion the following days. [5, 6]

- This directive was found to have been authorized by FOMC 48 days earlier on July 31, 2019. [1, 2, 4]
- The bail-out was greater than the 2008 credit crisis
- In the last quarter of 2019 the Fed pumped \$4.5 trillion in cumulative repo loans to unnamed trading houses on Wall Street.
- Historical injections by Fed: Great Depression, WW2, 2008 crisis [3]

The chronicling of the Fed Bailout READ >>>

September 18

China conduct a novel coronavirus simulation in Wuhan

The Chinese government conducted an “Emergency Response Drill” in Wuhan to simulate a response for a novel coronavirus strain as reported by journalist Jennifer Zeng. [1]

September 18

GPMB release their Annual Report: “A World At Risk”

This September 2019 GPMB release their Annual Report this year called “A World At Risk”, which justified the October 2019 **Event 201** pandemic preparedness simulation (a “required action” pg. 30). The simulation highlighted the need to “flood the zone” and control the message and the “need for funding”. [1]

The report aimed for its goals to be achieved by September 2020, where the United Nations would have “simulated” the “deliberate release of a lethal respiratory pathogen.”

- Dr Anthony Fauci (US Coronavirus Task Force and NIH) is a 2020 Board Member of GPMB, who coincidentally predicted there’d “definitely get a surprise outbreak” of an infectious disease during Trump’s administration.
- The GPMB co-chair H.E. Dr Gro Harlem Brundtland wrote “Our Common Future”, the book that popularized the term “Sustainable Development”, and provided the framework for the Agenda 21 in 1992

Some of the other GPMB members include:

- Dr Victor Dzau – President Nat. Acad. Medicine
- Dr Chris Elias – President of Bill and Melinda Gates Foundation
- Sir Jeremy Farrar – Director of the Wellcome Trust
- George F Gao – Director China’s CDC
- Dr Anthony S Fauci – Director of NIH
- Prof Ilona Kickbusch – Switzerland

The 2020 pandemic has certainly allowed stakeholders to “solve” the many “challenges and obstacles” this report identified on page 28, and funded by governments (tax payers) around the world.

Watch >>

September 19

WHO releases a systematic review of non-pharmaceutical measures for Influenza pandemics

In March 2019, Hong Kong hosted the WHO Consultation Symposium on *Non-pharmaceutical Public Health Measures for Mitigating the Risk and Impact of Epidemic and Pandemic Influenza*. [non-pharmaceutical interventions (NPI’s)]

Six months later, on September 19, 2019 the WHO published the findings in a report, concluding, amongst other things, that **contact tracing** is “not recommended in any circumstances” no matter the severity of Influenza pandemic or epidemic. The “quality of evidence” and epidemiological design is poor to draw conclusions. [1, 2]

Based on the systematic literature review they determined that “unless the severity is high, **face masks** are for only symptomatic individuals because face masks have a “lack of effectiveness in reducing influenza transmission”, a respiratory disease. [3] Quarantine of those “who may or may not be infected but are not ill” has “very low overall quality of evidence” for supporting stopping transmission, at best it delays the inevitable spread. [pg 45]

September 19

Trump signs EO to “Modernize Influenza Vaccines”

On September 19, 2019, President Trump signed an Executive Order (EO): “Modernizing Influenza Vaccines in the United States to Promote National Security and Public Health” and Fauci stated that “*these platform technologies include DNA, messenger RNA (mRNA), virus-like particles, vector-based, and self-assembling nanoparticle vaccines.*” [1]

This follows a September 2019 White House Council of Economic Advisers report titled, “*Mitigating the Impact of Pandemic Influenza through Vaccine Innovation*”. The report effectively concluded that “it’s not “if” there’s another pandemic; it’s “when” there’s another pandemic.” According to the study summary “a future pandemic would likely incur costs ranging from \$413 billion to \$3.79 trillion and claim the lives of about half a million people in the United States alone” Technology platforms that would allow for a more rapid and flexible response to both seasonal and pandemic influenza than do existing vaccine production strategies. Any vaccine developed in US will likely make it to Australia as the TGA works closely with international regulators like the FDA and CDC.

September 23

Climate Scientists Write To UN: There Is No Climate Emergency!

A September 23, 2019, letter was sent to the Secretary-General of the United Nations (UN) and the Executive Secretary of the United Nations Framework Convention on Climate Change (UNFCCC) called the European Climate Declaration signed by 500 esteemed scientists and professionals in climate science to officially notify the United Nations that **there is no climate crisis** and that spending trillions on a non-problem is ‘cruel and imprudent. [1]

They are asking for a little perspective, that climate science should be less political, while climate policies should be more scientific:

- Natural as well as anthropogenic factors cause warming.
- Warming is far slower than predicted.
- Climate policy relies on inadequate models.
- CO2 is plant food, the basis of all life on Earth.
- Global warming has not increased natural disasters.
- Climate policy must respect scientific and economic realities.

Three months earlier on 29 June 2019, scientists in Finland found “practically no anthropogenic [man-made] climate change” after a series of studies, which was corroborated by Japan, debunking IPCC models from scientists “hooked on government grants”. [2]

Contrary to the Union of Concerned Scientists (UCS) who in 2017 warned of an “imminent apocalypse”. [3]

September 24

Monkeypox/smallpox vaccine approved by FDA

On September 24, 2019, the FDA approved the first live, non-replicating vaccine called Jynneos, to prevent smallpox and monkeypox. **Jynneos** contains a modified form of the *vaccinia* virus called “Modified Vaccinia Ankara”. The vaccine will be part of the **Strategic National Stockpile** (SNS). [4]

Dr Rick Bright [1, 2, 3] from BARDA, wrote on the HHS blog that this “newly licensed vaccine resulted from years of dedication and collaboration between the private sector and the U.S. government”...because “the virus remains a potential global security threat.”

“Monkeypox, which does not occur naturally in the U.S., is a rare disease caused by infection with monkeypox virus, which causes symptoms similar to, but milder than, smallpox.”

More on monkeypox – [HERE](#)

September 24

WHO launches the global health Action Plan

Following the May 8, 2019 conference on Strengthening Global Health held, as planned the WHO launched the *Global Action Plan for Healthy Lives and Well-being for All* (SDG3 GAP) at the United Nations General Assembly on September 24, 2019 held in New York, USA. This Sustainable Development Goals Global Action Plan (SDG3 GAP) brings together 13 multilateral health, development and humanitarian agencies. This Global Health initiative was born out of the May 19, 2017 Berlin declaration. [1]

This “Global Action Plan for healthy lives and well-being for All” was born out of a “request” in October 2018 from Germany, Ghana and Norway with support from the UN to “To leverage the enormous reach, experience and expertise of the global health community to accelerate progress towards SDG3”. Then on October 16, 2018 global health agencies agreed to commit to working together with the Global Action Plan where the “final plan will be delivered in September 2019 at the United Nations General Assembly”. [2, 3]

September 25

Pelosi announces impeachment enquiry in to President Trump

On September 24, 2019 US House of Representatives Speaker Nancy Pelosi announced the launch of an impeachment enquiry against President Donald Trump spurred on by a July 25, 2019 phone conversation with Ukrainian President Volodymyr Zelensky. The “two discuss corruption in the country and how Joe Biden

“stopped” an investigation into his son, Hunter” by holding back \$1 billion in aid. The media was reporting on this the month before. [1, 2]

Three months earlier, in April 2019, Hunter Biden dropped off his “laptop from hell” to be repaired, and failed to collect it. In September 2019 the computer repair guy gave the laptop to the FBI and kept a copy himself for insurance – since after 90 days, according to law the property becomes the repair guys!

On February 5, 2020 President Trump was acquitted just as the coronavirus was taking hold spread throughout the world.

It was on the back of Pelosi’s announcement, Steve Bannon got the idea to launch “War Room Impeachment”, a daily American and geo-political news show, which turned into the “War Room Pandemic” on January 25, 2020, before the pandemic was even announced!

Visit timeline of Hunter’s Laptop revelations – [HERE](#)

October 2019

October 4

Explained: 2014-2019 US-Ukraine Collusion – Trump impeachment hoax

On October 4, 2019, Glenn Beck lays out the timeline of Ukrainian-US “relationship” from 2014 to 2019. An important data point that tracks the involvement of Hunter and Joe Biden and so many players including George Soros. He shows that there was DNC collusion during the 2016 US election.

The “**democrats worked with Ukrainian officials** [a foreign power] to investigate “dirt” on Trump.” As Patrick Byrne reveals they didn’t expect Hillary to lose?

The mainstream version of events from Wikipedia [HERE](#) (padlock!)
v ARCHIVE version.

The Biden family involvement in Ukraine prompted President Trump on a **July 25, 2019** phone call with President Zelensky to ask him to “look into” this.

A whistleblower complaint about this call led to the impeachment inquiry of President Trump beginning **September 24, 2019** over “allegations that he **sought to enlist a foreign power to aid him politically**”.

President Trump was acquitted **February 5, 2020**, just before the **pandemic** took hold [BBC timeline] [1, 2, 3]

Glen Beck: Ukraine, The Democrat’s Russia Explained

– WATCH, BACKUP, FULL, DOCS, TIMELINE

Biden’s Ukraine Scandal Explained – WATCH 2

October 18

Military World Games in Wuhan, China

The 7th Military World Games was a multi-sport event held in Wuhan, China from October 18-27, 2019, with “9,308 athletes from 109 countries competed in 329 events in 27 sports”. Wuhan was the epicentre of the “official” December 2019 start of the SARS-CoV-2 outbreak, though emerging data suggest it may have started earlier.

Reports of military athletes falling “extremely sick” at or after the games can be found. [3, 4]

Reports in USA of a strange influenza-like-illness occurred in Nov-Dec 2019. CDC data during that time, including Jan 2020, show extremely high Influenza like illness (ILI), test come back negative for influenza. With a supposed 2 week incubation period for SARS-CoV-2 infection, the dates line up for when the military returned from Wuhan through Washington DC.

October 15, 2019 US delegate of 17 athletes arrive in Wuhan for the games. Senator Marshall asks if the military could be the source of spread into the US. [3]

Could this “recovered population” account for the very high positive PCR, asymptomatic COVID-19 case numbers reported mid to late 2020 in US? Meaning they had “dead nucleotide” in their system from past infection which the highly amplified (40Ct) PCR tests picked up?

A special investigation by Sharri Markson in September 2021, spoke with Chinese defector Wei Jingsheng who claimed that China was aware of the virus in October 2019, and deliberately allowed it to spread via the Wuhan Military Games. [1, 2]

October 18

Event 201 – A Coronavirus Pandemic Simulation

On October 18, 2019, only one month after the GPMB report was released, the Johns Hopkins Center for Health Security (CHS) in partnership with the World Economic Forum and the Bill and Melinda Gates Foundation hosted Event 201 a coronavirus pandemic preparedness simulation event. The fourth simulation hosted by Johns Hopkins CHS.

This was a comprehensive, heavily scripted, well prepared 3.5 hr televised simulation exercise held in New York, based on the scenario of a global respiratory coronavirus outbreak. Australia was represented by Jane Halton, China by their CDC director George Gao.

“Event 201 allowed an entire public-private apparatus to set up well in advance ready to pounce on an available health crisis”, and be in “positions of vast influence.”

Sponsors and funders would benefit greatly from a future predicted “surprise” event. Facebook co-founder Dustin Moskovitz who’s Open Philanthropy (OP) was a major sponsor of Event 201, also donated \$16M in 2017, \$19.5M in 2019 & \$1.86 M in Feb 2020 to Johns Hopkins CHS. In 2019 Moskovitz invested seed funds into Sherlock Biosciences, which positioned them to gain an EUA for their novel CRISPR-based products. [1]

OP’s Dec 2018 “philanthropic” sponsorship, helped prepare the marketplace for the emerging vaccine technologies that “promise to deliver rapid vaccine solutions in

a streamlined, cost-effective manner." Using these new technologies under emergency authorization helps set a precedent for their ongoing use for any disease. "Together, the **Johns Hopkins Center for Health Security**, the **World Economic Forum**, and the **Bill and Melinda Gates Foundation** submitted 7 recommendations for governments, international organizations, and global business **to follow in the event of a pandemic** [3]

On January 24, 2020 the Johns Hopkins Uni issued a statement regarding the coronavirus pandemic simulation.

The simulation concluded that the world wasn't prepared for a global pandemic. [2]

Event 201: VIDEOS, Polly's breakdown – WATCH

Documentary on Pandemic simulations

October 29

Health experts discuss "roll out" of a Universal Flu Vaccine

On October 29, 2019 at the Milken Institute's Future of Health Summit in Washington DC, HHS health experts featuring Dr Anthony Fauci, and Dr Rick Bright (BARDA and Rockefeller Foundation) and includes Michael Specter of The New Yorker, discuss their goal of a **Universal Flu Vaccine**, which was captured by C-Span.

The panel spoke about how to speed up the transition (@22min) from egg grown vaccines to introducing a new **mRNA vaccine technology** "that we haven't given to anyone yet" [5], a process that if "all works perfectly" could take as long as 10 years. By using an "entity of excitement" such as "an outbreak of novel avian virus" from "China somewhere" which would lead to "some kind of **global event** where many people were dying" and allow a "**new mRNA vaccine** to be" rolled out and "tested on the public." [3]

*"But it is not too crazy to think that an outbreak of a novel avian virus [or coronavirus!] could occur in China somewhere. We could get the **RNA sequence** from that, beam it to a number of regional centers, if not local, if not **even in your home at some point and print those vaccines on a patch and self-administer.**"* stated Rick Bright

Three months later, on Jan 13, 2020, Moderna (who've never before had a licensed product) in collaboration with Anthony Fauci's NIAID, and funded by CEPI, had their "2019-nCoV vaccine" sequence finalized and ready to start Phase 1 human trials, seemingly skipping the animal studies, and the 10 years of development Dr Fauci previously calculated. [1, 2, 4]

- Fast forward to early Oct 2021 and **Moderna** already have a "COVID + Flu vaccine" in preclinical development, plus a long list of other mRNA products in various stages of developmental – destined for worldwide use. Perfect for the Flu-RONA season predicted for 2022!
- Pfizer already has a flu vaccine ready for testing based on "proven" mRNA vaccine platform.
-

November 2019

November 1

Chinese defector warns US intelligence of mysterious virus in China

In November 2019 [day unknown] – six weeks before China admitted there was an outbreak in Wuhan, Wei Jingsheng, the father of China’s democracy movement and famous 1997 defector to America, warned US intelligence agencies of a **mysterious new virus in China**, spread at the time of the World Military Games. He told Sky News investigative reporter Sharri Markson this in September 2021.

Wei said he found out about the virus from high-level contacts in Beijing and told intelligence officials who in turn seemed “not as heavily concerned as I was” stated Wei. [1]

Wei Jingsheng had spent 18 years in Chinese prisons for objecting to the Communist regime and following international pressure, was released and he reluctantly defected to the United States in November 1997.

November 1

Three Wuhan virology lab staff fall ill – in June 2023 they were named “Patients Zero”

Sometime in November 2019, three research staff members from the **Wuhan Institute of Virology** allegedly fell ill with symptoms “consistent with both COVID-19 and common seasonal illness” – as reported in retrospect in a U.S. intelligence report in May 2021. [1, 2]

On June 14, 2023 the Twitter Files journalists broke the news that sources within the US government are 100% certain of the identity of the three individuals who became infected with SARS-CoV-2 in November 2019, they are **Ben Hu, Yu Ping, and Yan Zhu**.

Ben Hu, who was Shi Zhengli’s “star pupil”, led the risky Gain-of-Function research on SARS-like bat coronaviruses at the Wuhan Institute of Virology, working together with Ping and Zhu. [3, 4, 5, 6]

It’s not clear what time in November these three Wuhan lab staff fell ill, but this doesn’t explain the sickness following the Wuhan military games in October 2019, nor the SARS-CoV-2 antibodies found in blood taken in Italy, September 2019.

November 7

Netflix episode “The Next Pandemic”

A globally viewed Netflix documentary series called ‘Explained’ released episode 7 titled “The Next Pandemic” on November 7, 2019. This episode conditions the audience for how wet markets can increase the risk of zoonotic viruses moving from animal to human.

Bill Gates (who is not a doctor, nor scientist) warned that it takes 4 to 5 years to develop a vaccine, but **new technologies** might shorten this time!

November 15

US bad-flu season – test positive for SARS-CoV-2

Retrospective evidence that people in the United States had bad flu in November 2019, where they tested negative for influenza. Antibody tests in early 2020 show IgG antibodies for SARS-CoV-2, which doesn't match the official timeline! [1]

November 17

China's first potential COVID-19 case

A 55 year-old from Hubei province could have been the **first person** to have contracted COVID-19 on November 17, 2019 according to government data seen by the *South China Morning Post*. [1, 2]

"Interviews with whistle-blowers from the medical community suggest Chinese doctors only realized they were dealing with a new disease in late December."

By December 20, 2019, the total number of confirmed cases had reached 60.

"On December 27, Zhang Jixian, a doctor from Hubei Provincial Hospital of Integrated Chinese and Western Medicine, told China's health authorities that **the disease was caused by a new coronavirus**. By that date, more than 180 people had been infected, though doctors might not have been aware of all of them at the time."

November 17

Evidence suggests presence of SARS-CoV-2 in China

In a peer reviewed paper published 2021 by University of Kent and the Czech Academy of Sciences, the scientists estimates that the SARS-CoV-2 virus first appeared between early October to mid-November 2019, and noted that "significant changes in hospital and search engine traffic in Wuhan" suggest it may have been present as early as **August** to October, 2019.

The study concluded that **November 17, 2019**, is the most likely date for the virus' emerged in China and adds that it had probably already spread globally by January 2020—before China began locking down the city of Wuhan. [2]

Another study led by Francois Balloux estimate from phylogenetic assessment that **October 6, 2019** could be the pandemic start date. [1]

Spanish virologists were reported to have found traces of the virus from Barcelona waste water samples collected **March 12, 2019** [unconfirmed].

November 18

TGA issued a permission for States to advertise vaccines

On November 18, 2019 the TGA issued a permission that now allows States and Territories to advertise vaccines for public health reasons. Previous legislation specified each disease (column 2) now any State declared "serious form of a disease" can be used to justify the promotion of a vaccine. [1, 2] (see June 29, 2018) The "Commonwealth" legislation was repealed for this new "Government" legislation which now provides provision for State Vaccine Advertising Campaigns. Setting the stage for COVID-19 vaccine advertising by each State and Territory of Australia in 2021.

November 26

Presentation reveals new insight into the complexity of modern knowledge of the immune system

On November 26, 2019 Dr Shiva Ayyadurai delivered a prestige lecture at NSF Science & Technology Center, Purdue University on the "Modern Theory of the Immune System" based on current science and his PhD work. The immune system is far more complex than the 1950's Innate plus Adaptive parts that is the accepted model.

This knowledge will help your understanding of how natural infection builds broad-spectrum, long-lasting immunity against virus variants, compared to the narrow spectrum, waning immunity that a single-protein, antigen vaccine stimulates...but even that is a simplified explanation.

December 2019

December 1

China's new mandatory vaccination law takes effect

New mandatory vaccination law [1] takes effect in China on **December 1, 2019**. "The Law mandates the launching of a national vaccine **electronic tracking platform...**"

"On June 29, 2019, the National People's Congress Standing Committee of the People's Republic of China (PRC or China) adopted the PRC Law on Vaccine Administration (Vaccine Law). The official Xinhua news agency states that the Law provides for the "strictest" vaccine management with tough penalties in order to ensure the country's vaccine safety."..."The Law will take effect on December 1, 2019 (art. 100)." [1]

December 1

China: First patient symptom onset date

Wuhan, China: On December 1, 2019, the first person reporting ill (later determined with coronavirus) was originally stated to have no link to the seafood market. This seafood market reference is removed from the later Johns Hopkin's article. [2] In a leaked Five-Eyes intelligence report it is stated on December 6, 2019, that being "Five days after a man linked to Wuhan's seafood market presented pneumonia-like symptoms, his wife contracts it, **suggesting human to human transmission**" *The Daily Telegraph* reports in their compiled timeline of key dates mentioned in the Five-Eyes intelligence report. [1] CDC place the first cluster of patients on 12 December 2019 (with no citation).

December 2

WHO: Global Vaccine Safety Summit

On the December 2-3, 2019 the WHO hosted the **Global Vaccine Safety Summit** at their HQ in Geneva, Switzerland. It marked the 20th year anniversary for the global advisory committee on vaccine safety (GACVS). The meeting was a congregation of the world's leaders on vaccine safety science – an area where "the science is settled"! [1, 7]

This meeting was recorded and caught some shocking claims regarding the **lack** of vaccine safety research and surveillance (which the public trusts are done), plus the increasing incidence of **doctors questioning** the safety of vaccines. [5]

"In medical schools you're lucky if you have a half day on vaccines, never mind keeping up to date with all this." said Dr Heidi Larson

*"We're in a unique position in human history where **we've shifted the human population to vaccine dependency.***

We've wiped out natural, lifetime immunity through mass vaccination programs. When vaccination began there were only a few antigens, now children can receive 71 antigens (possibly more) by 18 years of age. [6]

The World Health Organization, over the past decade, has determined that "vaccine hesitancy" is one of the greatest threats to health! It is a growing trend as more and more families and friends experience a child injured following vaccination. [2, 3, 4]

WHO Chief Scientist, Dr Souyam Swaminathan, stated at the safety summit:

*"I think we cannot over emphasize the fact **we really don't have very good safety monitoring systems in many countries...**"*

BUT in public, promotional video for the WHO, just days before, on November 28, 2019 she stated:

*"Vaccines are very safe. If someone gets sick after vaccination it is usually a **coincidence**, and error in administering the vaccine, or very rarely, a problem with the vaccine itself. That's why we have...**robust** vaccine safety systems."*

In 2001 this same committee drew the exact same conclusions of "coincidental" events regarding vaccine safety – to the public!

December 9

Hunter Biden's laptop handed over to the FBI

On December 9, 2019 Delaware's The Mac Store owner John Paul Mac Isaac, handed over Hunter Biden's (Presidential candidate Joe Biden's son) laptop to the FBI. Under contract law the unclaimed laptop became the property of Isaac, which he believed needed to be in the hands of the FBI as it appeared to be a huge national security issue.

In October 2020 after The New York Post's article, the mainstream media reported the laptop and the emails within, were "classic trademarks" of Russian disinformation, based on the "opinion" of 50 former senior intelligence officials. Twitter removed the NY Post article, and Facebook censored it – all before the 2020 Presidential election between Hunter's father and President Trump.

On March 16, 2022, 17 months later, The New York Times finally "confirms" the laptop is real.

On October 27, 2022 Elon Musk buys Twitter, and shortly after the Twitter Files begin, revealing the evidence of collusion between US government officials and Twitter to censor the Laptop story and more.

On February 9, 2023 the US House Select Subcommittee on the Weaponization of the Federal Government public hearings began.

Follow the timeline of events [HERE](#)

December 9

The IG FISA report is released

On December 9, 2019 the US Department of Justice Office of the Inspector General (OIG) released their 478-page review of "Four FISA Applications and Other Aspects of the FBI's Crossfire Hurricane Investigation" known as the IG Report on "FISA abuse" or the Horowitz report.

On that same day (curiously) at exactly 1:29 pm both US Attorney John H Durham and Attorney General Bill Barr tweeted their response to the IG Report. Durham hints at what's to come in "Criminal Investigation into Origins Of Russia Probe." [1]

John Durham, who's running a criminal investigation into the matter has "broken his silence in what is a pretty stunning statement" of not agreeing "with some of the report's conclusions as to predication and how the FBI case was opened." The FBI director Christopher Wray accepted the finding of the report. For Durham "to come out and make this statement carries some serious weight." [2]

Barr stated: "While most of the misconduct identified by the Inspector General was committed in 2016 and 2017 by a small group of now-former FBI officials, the malfeasance and misfeasance detailed in the Inspector General's report reflects a clear abuse of the FISA process." [4]

The fact checkers use the report to accuse Trump of “false” claims! such as “The report also discounted the role of a dossier compiled by former British spy Christopher Steele, saying it “played no role” in the FBI’s decision”! “The report revealed...the FBI defrauded the FISA court and purposely omitted exculpatory information from the FISA judges in order to obtain FOUR FISA warrants on Trump campaign advisor Carter Page.” [3]

December 10

Suspected first patient worked in the seafood market

The Wall Street Journal reports: “It was on Dec. 10 [2019] that Wei Guixian, a seafood merchant in this city’s **Hua’nan market**, first started to feel sick. Thinking she was getting a cold; she walked to a small local clinic to get some treatment and then went back to work. Eight days later, the 57-year-old was barely conscious in a hospital bed, one of the **first suspected cases** in a coronavirus epidemic ...”

December 12

Moderna/NIAID send “mRNA coronavirus vaccine candidates” to Dr Ralph Baric

On December 12, 2019, Dr Ralph Baric of University of North Carolina at Chapel Hill, signed an agreement (pg 105) to receive the “mRNA coronavirus vaccine candidates developed and jointly-owned by NIAID and Moderna”. [1, 2, 3, 4] Thus NIH has joint ownership of Moderna’s mRNA coronavirus vaccine.

Dr Baric has a long history of coronavirus chimeric research and collaboration with the Wuhan Virology Lab plus knows how to profit from a pandemic.

December 13

France sets to ban chloroquine from over the counter

Extending from a decision made on December 13, 2019, France will make all pain killer drugs, as well as the anti-malarial drug, **chloroquine** only be available behind the counter effective January 15, 2020, where pharmacists will be able to “ask the right questions”. [1, 2, 3, 4]

As of March 25, 2020, in France, pharmacies can only dispense hydroxychloroquine for scripts “exclusively by specialists in rheumatology, internal medicine, dermatology, nephrology, neurology or pediatrics or in the context of a prescription renewal from any doctor.”

May 2020 the French government bans the drug hydroxychloroquine for treatment of COVID-19 “ due to serious concerns over health risks.” [5]

December 18

Gates funded paper: Invisible ink quantum dots “tatoo” to check vaccination status

On December 18, 2019, MIT Scientists publish their paper on their development of a new “biocompatible near-infrared quantum dots delivered to the skin by microneedle patches” to record and check for mandated vaccination status. [1] MIT believe “[t]his study presents a novel approach where the medical record is stored and controlled by the patient within the patient’s skin in a minimally invasive and elegant way.” [3, 4]

Their justification “Vaccines prevent disease and save lives; however, lack of standardized immunization recordkeeping makes it challenging to track vaccine coverage across the world.” The concept was a “direct request” by Gates himself, and sold as a means to solve “lack of vaccination” problem in the developing nations.

“If we don’t have good data, it’s really difficult to eradicate disease” such as polio and measles Gates said. [2]

A step closer to tracking everyone that we were warned about.

Microneedle technology was patented in 2011, and quantum dot research was funded by the US intelligence community in 2008.

December 19

FDA approves first Ebola vaccine

On December 19, 2019, The U.S. Food and Drug Administration (FDA) announced the approval of Ervebo, the first FDA-approved vaccine for the prevention of Ebola virus disease (EVD) said to be a “a historic milestone in global health security.”

This approval “which follows last month’s European Union-wide conditional marketing approval by the European Medicines Agency and the World Health Organization’s prequalification of the vaccine, provides healthcare workers and civilians in affected areas with more confidence in the vaccine.”

December 24

US: SARS-CoV-2 IgG antibodies found in blood

Tests of the US blood supply indicates the SARS-CoV-2 IgG antibodies were present in the US in late December 2019, around 2 weeks prior to January 7, 2020 when the blood was taken, earlier than the official first case of COVID-19. These IgG antibodies do not appear until about two weeks post infection, placing infection date around December 24, 2019.

The US flu season was very bad in late 2019 to early 2020.

December 27

China first aware of “viral pneumonia”

According to a Chinese government White Paper published on June 7, 2020 titled “Fighting Covid-19 China in Action”, “China’s fight against the epidemic” began on **December 27, 2019** and was then recognized as a “**Public Health Emergency.**” [1, 2, 3]

On December 27, 2019, Zhang Jixian, a doctor from Hubei *Provincial Hospital of Integrated Chinese and Western Medicine*, reported cases of pneumonia of unknown cause to the Wuhan Jiangnan Center for Disease Prevention and Control, China’s health authority.” Investigations concluded “they were cases of viral pneumonia”. According to South China Morning Post [5] the doctor told China’s health authorities that the disease was caused by a **new coronavirus.**

“By the final day of 2019, the number of confirmed cases had risen to 266, On the first day of 2020 it stood at 381.”...“As late as January 11, Wuhan’s health authorities were still claiming there were just 41 confirmed cases.” [5]

Some additional responses reported in the white paper by China:

- From Jan 3 China began to regularly update the WHO
- On Jan 4, the “head of China CDC [George Gao Fu] held a telephone conversation with the director of the **US CDC** [Robert Redfield]
- On Jan 5: With now 59 cases of viral pneumonia of unknown cause. “Laboratory tests ruled out respiratory pathogens as the cause, such as influenza, avian influenza, adenovirus, the Severe Acute Respiratory Syndrome coronavirus, and the Middle East Respiratory Syndrome coronavirus.”
- On Jan 5: “China sent a situation update to the WHO. The WHO released its first briefing on cases of pneumonia of unknown cause in Wuhan.”
- Jan 7: Xi Jinping, general secretary of the CPC Central Committee, presided over a meeting of the Standing Committee of the Political Bureau of the CPC Central Committee and issued instructions on the prevention and control of a possible epidemic of the pneumonia of unknown cause in Wuhan.
- Jan 7 “China CDC succeeded in isolating the first novel coronavirus strain.”

The white paper chronologically reports China’s version of events until June 2020.

– READ

The Washington Examiner reports: “Wuhan Central Hospital got its **first coronavirus patient** on **December 16, 2019** according to an interview Dr. Ai Fen gave to the *Wall Street Journal*. China’s *CDC Weekly* would note that Chinese doctors began tracking “a cluster of pneumonia cases with an unknown cause” that “occurred in Wuhan” on Dec. 21.

Another coronavirus patient with similar symptoms arrived at the Wuhan Central Hospital on Dec. 27, and by the next day, the hospital had seven unexplained pneumonia-like cases, including four connected to the wet market. On Dec. 29, Ai warned the hospital’s leadership about the contagious virus, and the hospital warned China’s local CDC.

Ai received lab results on Dec. 30 that warned of a SARS-like coronavirus...” [4]

December 30

Dr Shi Zhengli wondered if the novel coronavirus came from her lab – in Wuhan

Dr Shi Zhengli, China's "**bat woman**", recalls her Wuhan institute's director telling her on the phone to "drop whatever you are doing and deal with it now", that being the "mysterious patient samples" which had arrived at Wuhan Institute of Virology at 7 pm on December 30, 2019. Shi had just "walked out of the conference she was attending in Shanghai and hopped on the next train back to Wuhan."

"The Wuhan Center for Disease Control and Prevention had detected a novel coronavirus in two hospital patients with atypical pneumonia, , and it wanted Shi's renowned laboratory to investigate."

"*"I wondered if [the municipal health authority] got it wrong," she says. "I had never expected this kind of thing to happen in Wuhan, in central China."* Her studies had shown that the southern, subtropical areas of Guangdong, Guangxi and Yunnan have the greatest risk of coronaviruses jumping to humans from animals—particularly bats, a known reservoir for many viruses. If coronaviruses were the culprit, she remembers thinking, "**could they have come from our lab?**" [1, 2, 3]

SARS-CoV-2 ORIGINS

December 30

Wuhan Doctor warns his WeChat friends about a coronavirus

As reported by CNN:

On December 30, 2019, a 34-year-old Chinese doctor working in Wuhan, Li Wenliang, told his medical school alumni friends on WeChat to warn their loved ones privately to be careful as "seven patients from a local seafood market had been diagnosed with a SARS-like illness and quarantined in his hospital". Li explained that, according to a test he had seen, the illness was a coronavirus..."

Within hours screenshots of his messages had gone viral — without his name being blurred.

On January 3, 2020, Li was called to a local police station and reprimanded for "spreading rumors online" and "severely disrupting social order" over the message he sent in the chat group.

On January 10, 2020, after unwittingly treating a patient with the Wuhan coronavirus, Li started coughing and developed a fever the next day. He was hospitalized on January 12. In the following days, Li's condition deteriorated so badly that he was admitted to the intensive care unit and given oxygen support.

On February 1, he tested positive for coronavirus and on February 7, 2020 it was announced that he had died. [1, 2, 3]

Does CNN normally get exclusive information out of China?

December 30

Western media picks up on viral pneumonia in Wuhan, China

On December 30, 2019, Reuters report from Beijing Monitoring Desk, that the Chinese health authorities “are investigating 27 cases of viral pneumonia in the central city of Wuhan, after rumors on social media suggested the outbreak could be linked to Severe Acute Respiratory Syndrome (SARS).”

The paper notes that in 2003, Chinese officials covered up a SARS outbreak for weeks before a growing death toll and rumors forced the government to reveal the epidemic

December 31

WHO: Cases of “undiagnosed pneumonia” reported in Hubei, China

On the last day of 2019 (Dec 31), a cluster of the novel coronavirus disease was reported by China. “Local authorities have so far confirmed 41 cases with novel coronavirus infection preliminarily diagnosed in Wuhan, of whom seven are severely ill. The only death case was a patient with other underlying health conditions.” [2] According to NEJM paper “three adult patients presented with severe pneumonia and were admitted to a hospital in Wuhan on December 27, 2019”. Patient 1, a 49 year old woman was a retailer in the seafood wholesale market, patient 2, a 61 year old man was a frequent visitor to the seafood wholesale market. Patient 3 was 32 years old. Only patient 2 died. Patient samples were tested.

At the time the “WHO’s Country Office in the People’s Republic of China picked up a media statement by the Wuhan Municipal Health Commission from their website on cases of ‘viral pneumonia’ in Wuhan, People’s Republic of China. The Country Office notified the International Health Regulations (IHR) focal point in the WHO Western Pacific Regional Office...” The following day “WHO requested information on the reported cluster of atypical pneumonia cases in Wuhan from the Chinese authorities.” [1]

WHO’s Epidemic Intelligence from Open Sources (EIOS) platform also picked up a media report on ProMED titled “UNDIAGNOSED PNEUMONIA – CHINA (HUBEI): REQUEST FOR INFORMATION” [screenshot]

The media report stated: “The so-called unexplained pneumonia cases refer to the following 4 cases of pneumonia that cannot be diagnosed at the same time: fever (greater than or equal to 38C); imaging characteristics of pneumonia or acute respiratory distress syndrome; reduced or normal white blood cells in the early stages of onset The number of lymphocytes was reduced. After treatment with antibiotics for 3 to 5 days, the condition did not improve significantly.”

The patients appeared from multiple hospitals and the “investigation found that most of the cases were operated by South China Seafood City in Jiangnan District,

Wuhan.” Of the 27 cases found “7 were critically ill, and the remaining cases were controllable.”

It is reported to be stated in a Five Eye’s intelligence report that the “Chinese internet authorities begin censoring terms from social media such as Wuhan Unknown Pneumonia” on December 31, 2019.

WHO Timeline [HERE](#) & [HERE](#)

The last day of 2019 would eventually earn the disease name “coronavirus disease 2019” or COVID-19.

January 2020

January 1

Wuhan Seafood Market closed for renovation

The South China [Huanan] Seafood Wholesale Market was reported to have been closed for renovation [English], yet the Lancet paper states the market was shut down by the local health authorities!

China CDC reported “22% of patients had direct exposure to the Huanan Seafood Wholesale Market before illness onset” of “viral pneumonia of unknown etiology (VPUE)”. The Lancet study suggests 66% of the initial 41 cases had direct exposure to the market. [1]

January 1

Eight Chinese Doctors tried to warn of SARS-like virus

8 Chinese people [Doctors] were dealt with in accordance with the CCP law for disseminating false information about “Wuhan Viral Pneumonia” on the Internet. [translation] [4, 5]

Reported BBC 3/1/20

Dr. Li Wenliang, who died on Feb 7, 2020, was trying to warn about the SARS-like virus.[1, 2, 3]

By 28 January, 2020 the Supreme People’s Court of China vindicated all doctors of wrongdoing.

January 2

Wuhan: 27 of 41 hospital patients had connection to seafood market

By Jan 2, 2020, 41 admitted hospital patients had been identified as having laboratory-confirmed 2019-nCoV infection in China. Of these, there were 30 men, 11

women all with a median age of 49 years. Of the 41 patients, 27 had been exposed to the **Huanan seafood market**. [1]

January 3

China first alerted WHO of new viral pneumonia

On January 3, 2020, according to a China White Paper, the Wuhan City Health Commission (WCHC) issued an Information Circular on a **Viral Pneumonia of Unknown Cause**, reporting a total of 44 cases. They first became aware on December 27, 2019.

Under the direction of the National Health Commission (NHC), China CDC and three other institutions carried out parallel laboratory testing of the samples to identify the pathogen. The NHC and the Health Commission of Hubei Province jointly formulated nine documents, including Diagnosis and Treatment Protocol for Viral Pneumonia of Unknown Cause (for Trial Implementation).

From January 3 onward, China began to update the WHO on a regular basis on the development of the disease.

January 4

WHO activates their Incident Management System

As part of the World Health Organization's (WHO) Emergency Response Framework [2nd Ed 2017] an **Incident Management System** (IMS) was activated across the three levels of WHO (country office, regional office and headquarters) within 24 hrs. "of grading the emergency."

China first notified the WHO on January 3, 2020 of a new viral pneumonia, one week after they first became aware.

"On 5 January 2020, WHO shared detailed information and risk analyses about the cluster of cases with all Member States through the International Health Regulations Event Information Site (EIS) and published a public Disease Outbreak News alert."

[1, 2]

[Time Zones may account for this appearing to be greater than 24 hrs.]

January 4

China's CDC director telephones US CDC director

On January 4, 2020 the Director of China's CDC [George Gao Fu] held a telephone conversation with the director of the United States CDC [Robert Redfield] according to, and specifically stated in China's June 2020 white paper. [1, 2]

George Gao Fu has been a board member of the GPMB with Dr Anthony Fauci since its formation, and played part in the coronavirus simulation, Event 201 in October 2019.

January 4

CIA officer in Wuhan contacted Dr Robert Malone

According to Dr Robert Malone a CIA officer [Michael Callahan [1]] , who was in Wuhan at the time called him on January 4, 2020 and said:

"Robert, you've got to get your team spun up because we've got a problem with this virus"

From this point Dr Malone made a "Threat Assessment" through following the epidemiological data and "decided to focus on repurposed drugs." [ref @22:20 min] "Dr. Callahan escaped Wuhan surreptitiously by boat immediately prior to the lockdown of the region on 23 January 2020." [2]

January 5

WHO notifies Member States of an unknown pneumonia

"On 5 January 2020, the World Health Organization (WHO) notified member states that an outbreak of pneumonia of unknown cause had been identified in Wuhan City, China."

China reported to WHO on 4/1/20, but China had been investigating since December 27, 2019 when they first became aware of the unknown pneumonia.

January 7

Novel coronavirus identified by Chinese authorities

The Chinese authorities identified a "**new type of coronavirus**, which was isolated on **January 7, 2020**", and officially determined it to be the causal agent of the viral pneumonia outbreak. In their Situation Report 1 the WHO stated the genome was released to the public on January 12, 2020.

Reported by China on January 3, 2020, under the direction of the National Health Commission (NHC), China CDC and three other institutions [unnamed] they began parallel laboratory testing of the samples in order to identify the pathogen. [1] China's CDC report that on "January 3, 2020, the sequence of novel β -genus coronaviruses (2019-nCoV) was determined from specimens collected from patients in Wuhan by scientists of the National Institute of Viral Disease Control and Prevention (IVDC), and **three distinct strains** have been established."

On **January 7, 2020**, this novel coronavirus was confirmed to be the pathogenic cause of this viral pneumonia of unknown etiology (VPUE) cluster, and the disease has been designated novel coronavirus-infected pneumonia (NCIP).

Chinese CDC reports >>

January 9

WHO: China identifies a novel coronavirus as cause of pneumonia cluster

On January 9, 2020 the WHO announced "Chinese authorities have made a preliminary determination of a novel (or new) coronavirus, identified in a hospitalized person with pneumonia in Wuhan. Chinese investigators conducted gene sequencing of the virus, using an isolate from one positive patient sample." [1]

Initial information about the cases of pneumonia includes the occupation, location and symptom profile of the people affected – pointed to a coronavirus (CoV) as a possible pathogen causing this cluster.

"WHO does not recommend any specific measures for travelers. WHO advises against the application of any travel or trade restrictions on China based on the information currently available."

January 10

BioNTech initiates vaccine mRNA code

On January 10, 2020, following the SARS-CoV-2 genetic sequence released by the Chinese Center for Disease Control and Prevention and disseminated globally by the GISAID (Global Initiative on Sharing All Influenza Data)

initiative, BioNTech initiated the development of its COVID-19 vaccine mRNA sequence of which would become known as "BNT162b2".

January 10

China official reports the mostly "mild condition" is "under control"

On January 10, 2020, according to a Five Eye's report, Wang Guangfa, a People's Republic of China official says the outbreak is "under control" and mostly a "mild condition".

January 11

WHO was notified of seafood market link

On 11 and 12 January 2020, the WHO stated in their Situation Report 1 that they "received further detailed information from the National Health Commission China that the outbreak is **associated** with exposures in one seafood market in Wuhan City" "22% of patients had direct exposure to the Huanan Seafood Wholesale Market before illness onset"

"Despite extensive searching, no animal from the market has thus far been identified as a possible source of infection."

January 11

China reports first pneumonia death from “new type of coronavirus”

On January 11, 2020, **China** reports their **first death** of a “61-year-old man has died from pneumonia in the central Chinese city of Wuhan”. On the same day Beijing announced that 41 people have been diagnosed with pathogen linked to a new type of coronavirus. [1, 2]

January 12

Novel coronavirus (2019-nCoV) genome sequence is made public

Following China’s Jan 7, 2020 announcement a “viral genome sequence was released for immediate public health support via the community online resource virological.org on 10 January (Wuhan-Hu-1, GenBank accession number MN908947), followed by four other genomes deposited on 12 January in the viral sequence database curated by the Global Initiative on Sharing All Influenza Data (GISAID)”, according to Drosten et al. [4]

According to WHO on 12 January 2020, “China shared the genetic sequence of the novel coronavirus for countries to use in developing specific diagnostic kits.”

The genetic sequence of 2019-nCoV (now SARS-CoV-2), a new coronavirus associated with human respiratory disease in Wuhan, China (collection date 26/12/2019), was published on GISAID for countries to use in developing specific diagnostic kits. [3]

- The University of Sydney coordinated the notice of release of the genome to the world.
- The complete genome sequence called SARS-CoV-2 isolate Wuhan-Hu-1

The virus is closely related genetically to SARS-CoV (82%) and to SARS-related bat and civet coronaviruses within the family *Betacoronavirus*, subgenus *Sarbecovirus*. [1, 2] The epidemiology of this subgenus is largely unknown, especially outside China.

China’s CDC report that on “January 3, 2020, the sequence of novel β -genus coronaviruses (2019-nCoV) was determined from specimens collected from patients in Wuhan by scientists of the National Institute of Viral Disease Control and Prevention (IVDC), and **three distinct strains** have been established.”

The **genome sequence** was published by China’s CDC. [4] The new *Betacoronavirus* genome sequence was deposited in GISAID (www.gisaid.org) under the accession numbers:

- EPI_ISL_402119

- EPI_ISL_402020
- EPI_ISL_402121

January 12

WHO release clinical treatment guidelines

WHO clinical treatment guidelines for novel CoV based on MERS infection – first released, then updated on 28th January 2020.

Advanced stage illness includes pneumonia, ARDS & sepsis.

High-flow nasal oxygen (HFNO) or non-invasive ventilation (NIV) should only be used in **selected** patient.

According to WHO, based on SARS and MERS data, corticosteroids should not be routinely given systemically.

Yet, early into the pandemic US frontline doctors had great success using early corticosteroid treatment such as Budesonide, contrary to WHO's blanket recommendation not to use it.

The Lancet study states "no antiviral treatment for coronavirus infection has been proven to be effective." Yet, early on in pandemic doctors discover through past literature that Zinc + HCQ demonstrates to be an effective anti-viral.

January 12

The China lab who shared the genomic sequence data is closed by authorities

On January 12, 2020, Professor Zhang Yongzhen's lab in Shanghai is closed by authorities for "rectification", one day after it shares genomic sequence data with the world for the first time, a Five Eyes intelligence report exposes.

January 13

WHO releases PCR "diagnostic" protocol – The catalyst for pandemic "cases"

On January 13, 2020 the "WHO publishes the protocol for RT-PCR assay designed by a WHO partner laboratory to **diagnose** the novel coronavirus". [updated V2] Target PCR gene primers and probes from 7 world labs, reinforcing up to 45 cycles of amplification.

WHO "immediately began working with companies to produce high-quality PCR kits that were shipped to laboratories worldwide in early February 2020" [1]

This PCR test protocol was developed by Dr Drosten under "sever time constraints" and was in turn adopted by WHO without any clinical testing to then became the foundation for "diagnosing" COVID-19, and 17 days later generated the "case data" that justified declaring a PHEIC. [2]

PCR is a laboratory technique, also referred to as a **Nucleic Acid Amplification Test** (NAAT).

The WHO protocol references Christian Drosten *et al*, of which their paper was published 10 days later on 23 Jan, after less than 24 hours in peer review, in a journal that Drosten is an editorial member!

By Nov 2020, this paper had been externally peer review finding 10 major scientific flaws, and major conflicts of interest. [3]

WHO released Diagnostic Testing for SARS-CoV-2 – 17 Jan, 19 Mar, 11 Sept 2020. It wasn't until the September edition before "clinical" criteria became part of the diagnosis on top of PCR.

Drosten also raced to design the diagnostic test protocol for 2003 SARS and 2009 H1N1 swine flu. [CV]

PCR tests have been the driver of "diagnosing" an "infected case" and to justify the "quarantining" of healthy people referred to as "asymptomatic carriers".

PCR test with up to 40 cycles of amplification is recommended by CDC and AU health to "avoid false positives", Drosten's paper references 45 cycles, yet in 2014 he stated PCR is not suitable for mass testing and turns healthy people into "statistically ill".

Kary Mullis, PCR inventor, his patent used 20 cycles as each cycle doubles the initial sample.

WHO pushes "test, test, test" even though they know the PCR tests are meaningless as a diagnostic tool to determine an alleged infection of SARS-CoV-2.

WHO knows "the cycle threshold (Ct) needed to detect virus is inversely proportional to the patient's viral load." This means when virus levels are low a high Ct is required to detect it (>35) and vice versa.

By Jan 2020 WHO reported the CDC had "developed a rRT-PCR test that can diagnose 2019-nCoV." CDC rushed to produce the test kit and applied for FDA EUA, for a product that states "this test cannot rule out diseases caused by other bacterial or viral pathogens." [4]

"Since **no quantified virus isolates** of the 2019-nCoV were available for CDC use at the time the test was developed...for detection of the 2019-nCoV RNA... characterized stocks [computer generated sequences were used] of in vitro transcribed full length RNA". [2020, 2021]

January 13

Moderna vaccine sequence finalised

President Trump is said to have partnered with Moderna-NIH to begin producing a COVID-19 vaccine, piggybacking on November 2015 collaborations. [1, 2]

On March 2, 2020, Moderna's CEO Stéphane Bancel, told President Trump that "we're able to move very, very fast from a few phone calls to getting a vaccine made, ready for the clinic" because of existing MERS working relationship already with DARPA and

NIH. He said *"in only 42 days from the sequence of the virus, [we sent] our vaccine to Dr. Fauci's team at the NIH"*. [5]

Using this brand new vaccine platform and in the fastest time ever, on **January 13, 2020**, the NIAID spike protein design team in collaboration with Moderna "finalized the sequence for the SARS-CoV-2 vaccine" and "mobilized toward clinical manufacture" and "the first clinical batch was completed on February 7, 2020." "Mutations were made to the spike-encoding gene so that the protein it encodes stays in a stable, "prefusion" form." [3]

On 24th February, 2020, Moderna ship their "first batch of [mRNA-1273] its candidate mRNA vaccine against SARS-CoV-2 for phase 1 study"

Moderna (formally called ModeRNA) who has never before brought a product to market, they attribute their technology to an operating system. [4]

Later a \$1.5 billion deal was struck with Moderna under Operation Warp Speed.

Moderna received \$483 million taxpayer funding from US government for the development. On Feb 4, 2021, pharma giants were granted immunity from liability.

January 13

First "imported" case of coronavirus

On 13 January 2020, the Ministry of Public Health, Thailand reported to the WHO the **first imported case** of lab-confirmed novel coronavirus (2019-nCoV) from Wuhan, Hubei Province. [1]

"The case is a 61-year-old Chinese woman living in Wuhan City, Hubei Province, China. On 5 January 2020, she developed fever with chills, sore throat and headache. On 8 January 2020, she took a direct flight to Thailand from Wuhan City... [She] was detected on the same day by **thermal surveillance** at Suvarnabhumi Airport (BKK), Thailand, and was hospitalized the same day."

"She reported a history of visiting a **local fresh market** in Wuhan on regular basis prior to the onset of illness on 5 January 2020; however, she did **not** report visiting the **Huanan South China Seafood Market** from where most of the cases were detected.

On January 15, 2020, Japan reports the next imported case of lab-confirmed 2019-nCoV from Wuhan.

January 14

WHO: Preliminary evidence no human-to-human transmission

In a January 14, 2020 tweet the WHO state the "[p]reliminary investigations conducted by the Chinese authorities have found no clear evidence of human-to-human transmission" of the novel coronavirus (2019-nCoV) identified in Wuhan China. Six days later they "found" the evidence. [1]

January 14

Chinese official privately warns virus will likely be a major public health event

On January 14, 2020 the Peoples Republic of China (PRC) National Health Commission's chief, Ma Xiaowei, privately warns colleagues that the coronavirus is likely to develop into a major public health event according to a Five Eyes intelligence report leaked in May 2020.

Eight days later Wuhan goes into lockdown.

January 15

BioNTech launches project Lightspeed to find a vaccine candidate

By mid-January 2020 BioNTech starts Project Lightspeed to develop a vaccine against this new coronavirus, several vaccine candidates are selected and initial non-clinical studies are conducted.

According to New York Times article, after Dr. Sahin, BioNTech's CEO read an article in the The Lancet that left him convinced that the coronavirus would explode into a full-blown pandemic, scientists at the company, based in Mainz, Germany, canceled their vacations and set to work on what they called Project Lightspeed. [1]

By Mid-January "BioNTech selects several vaccine candidates and conducts initial non-clinical studies."

BioNTech then partnered with Pfizer (and Fosun Pharma) in March 17 & 16, 2020 respectively, to co-develop and commercialization of an mRNA-based vaccine.

By December 2020, just after 11 months, the FDA awarded their COVID-19 mRNA vaccine Emergency Use Authorization (EUA), the **first product** BioNTech has brought to market.

BioNTech vaccine development timeline – [HERE](#)

January 16

Imperial College release their first modelling predictions

On January 16, 2020 **Neil Ferguson** *et al* at the UK Imperial College, WHO collaboration center, released their first modelling report "*Estimating the potential total number of novel Coronavirus (2019-nCoV) cases in Wuhan City, China*", followed by their Report 2 on January 22, 2020 with their updated figures.

[1]

- Report 1: estimated 1700 cases in Wuhan so far
- Report 2: estimated 4000 cases in Wuhan with symptoms onset by January 18, 2020

On 23 January 2020 when China's CDC director, Gao Fu was asked about the "UK universities" estimation of 2,000 people having been infected in China, he responded:

"What we've learned about the real situation is not in line with the model by the British scientist."

"In order to know the exact casualty caused by a new virus, facts should be ascertained by the available numbers, and it should not be based on theories."

January 20

China/WHO: Human to Human transmission confirmed

On January 20, 2020 it is reported that scientists in China **confirm human-to-human transmission** of the new novel coronavirus, showing it is "contagious". The WHO believes this is limited to "between close contacts". Though intelligence from a leaked Five Eyes report suggests China was aware there was "evidence of human-human transmission from early December," yet Chinese authorities denied such transmission "until January 20." Officials in Taiwan had sounded the alarm about people spreading the virus to each other as early as December 31, 2019 and experts in Hong Kong did the same on January 4, 2020. [1]

WHO state "animal-to-human infection still appeared to be the main source of the outbreak".

Global labs have begun work on "diagnostic tests" and started "work on a vaccine". [At the same time President Trump is being impeached]

January 20

Healthcare workers infected by patients

WHO claim first reports of infection in healthcare workers caring for patients with 2019-nCoV. [1]

January 21

The potential "Super Spreader" is born

According to ABC news reported on January 21, 2020, "one of China's top health experts is warning of **the potential** for "super-spreaders" to worsen the impact of the new coronavirus strain" as they "confirm" person-to-person transmission.

“Zhong Nanshan, the leader of an expert team sent to the city of Wuhan to investigate the deadly virus, told the South China Morning Post there was evidence one patient alone had spread the disease to 14 medical workers.”
Two days later China’s CDC director stated, “There’s no evidence to support the idea there are already **super-spreaders**.”
On 26 January, China’s Health Minister Ma Xiaowei told the press that “people can spread it before they become symptomatic.”

A Super Spreader is a “phenomenon” where a healthy person, with no symptoms of illness (asymptomatic), is allegedly highly contagious. [1, 2]
This “potential” threat to the spread of the virus comes just 8 days after a “diagnostic tool” is released by the WHO, that “could” diagnose the asymptomatic “potential” spreaders of the virus – The PCR test.
The WHO recommends (thanks to Drosten *et al*) to set the test at 40-45 cycles, to diagnose infection of SARS-CoV-2 in all people both with symptoms or healthy.
In time, experts reveal that the PCR test used with greater than 35 cycles leads to 97% false positive results – the very people who are classified as asymptomatic super spreaders and labelled as COVID-19 case – statistically ill!

January 21

US reports first novel coronavirus case – treated with remdesivir (antibiotics prior!)

On January 21, 2020, the CDC reported the detection of the first person in the United States diagnosed with 2019-nCoV infection. The case history of this 35-year-old male, who became known as patient zero, was published, and said to have returned to Washington state from Wuhan, China on 15th January. [4, 5, 6]
The CDC press release added, “While originally thought to be spreading from animal-to-person, there are growing indications that limited person-to-person spread is happening. It’s unclear how easily this virus is spreading between people.” [3]
Genome testing, confirmed by Kristian Andersen, connected “patient zero” with the Life Care Center nursing home in Kirkland, Washington, where nearly half of initial COVID-19 deaths occurred.
The patented drug **remdesivir** by Gilead and which was “not yet licensed or approved anywhere globally”, was administered intravenously on day 7 of illness this first patient, by 30 January the patients symptoms had resolved, except for a mild cough. The patient was treated with antibiotics on day 6 when pneumonia began to develop! [5] Recovery was “attributed” to remdesivir, but the virus began to clear on day 3 (PCR Ct confirmed), and antibiotics cleared the lung infection!
A few days later China began testing remdesivir on their patients – but they failed to find a benefit.

- In August 2019, remdesivir was pulled from an Ebola trial because it caused excess mortality.

- Gilead's drug GS-5734 called remdesivir has funding ties with Ralph Baric, who has ties to WIV
- Gilead Sciences is historically a highly profitable, anti-viral focused, pharma company [1, 2]

On January 27, 2020 the CDC confirms 5 cases in the US all involved adults who traveled to Wuhan, China. "At this time in the U.S., this virus is not spreading in the community", thus the "immediate health risk" to the community is "low" said the CDC. An additional 73 potential cases are still under investigation.

The CDC is creating tests and laboratory guidelines "diagnostic kits so states can perform their own testing".

January 21

President Trump addressed the WEF at Davos 2020

On January 21, 2020 President Donald Trump gave a "Special Address" to the World Economic Forum's Davos 2020 providing an overview of the United States achievements made in the past 3 years under his leadership.

"The US is in the midst of economic boom the likes of which the world has never seen before." Trump said.

With policies focused on the worker and middle class, he achieved the lowest unemployment rate in 50 years at 3.5%, it's a "*Blue Collar Boom*" he said. The US stock market was up 50%, and 12,000 industries were gained back and growing, following the 60,000 factories lost under the previous 2 Administrations. In early 2019 the US gained 25% share of all foreign investments.

Two traded deals were completed in the same week, one with China the other between US-Mexico-Canada (USMCA), the latter replacing the 25 year NAFTA, setting a "*new model for trade for the 21st century*" he said.

"To embrace the possibilities of tomorrow, we must reject the perennial prophets of doom and their predictions of the apocalypse...They are the heirs of yesterday's foolish fortune tellers"... "Their alarmists always demand the same thing...absolute power to dominate, transform and control every aspect of our lives."

The very next day Prince Charles launched the platform to drive a "new economic model", which is counter to President Trump's non-Socialist vision of:

"A growing and vibrant market economy, focused on the future, lifts the human spirit and excites creativity strong enough to overcome any challenge..."

Trump speaks to the many scientific breakthroughs of the 20th Century which... "*have lifted living standards and saved billions of lives*" but then says

*"we continue to work on things which you will be hearing about **in the near future**...we have found answers to things that people said would not be possible...certainly not possible in a very short period of time".*

Was he referring to mRNA vaccines? He did pass an Executive Order in September 2019 to “modernize” influenza vaccines, was Operation Warp Speed planned?

January 22

Prince Charles launched the Sustainable Market Initiative to accelerate a “new economic model”

On the second day (Jan 22, 2020) of the World Economic Forum’s 50th Annual Meeting in Davos, Switzerland (January 21-24, 2020), Prince Charles launched the **Sustainable Market Initiative** which “aims to **lead and accelerate** the world’s transition to a sustainable future by putting nature, people and planet at the heart of global value creation” [1, 2, 3, 6]

The Prince also announced his *10-Point Plan*: “Within the framework of sustainable markets and rapid decarbonization, Prince of Wales **believes** that changing our current trajectory will require bold and imaginative action in 10 key areas” [4]

The Sustainable Markets Initiative is [self-appointed] “platform to inspire the innovation urgently needed to demonstrate what is possible, and accelerate the transition to sustainable markets” as they believe “our markets are unsustainable” and a “**new economic model**” [hint] is needed.

Prince Charles began “discussions” months earlier in June 2019 by hosting a round table meeting, followed by his appointed **Sustainable Markets Council** meetings “comprising leaders from the public, private and philanthropic sectors” who are “working to transition the world to genuinely sustainable markets and a net-zero global economy”. The Council met at the World Economic Forum’s *Sustainable Development Impact Summit* in New York in September 2019. Then in November 2019 Prince Charles hosted the inaugural meeting of the **Sustainable Markets Council** in London which includes WEF members, bankers and AstraZeneca. [5] The day before Prince Charles, President Donald Trump gave a “Special Address” listing his achievements over the past 3 years of his presidency – in contradiction to the WEF plans .

January 22

Wuhan, China locks down and sets a “new standard”

Chinese government reported on January 22, 2020 the “Strictest measures enacted to contain viral pneumonia” where the city of Wuhan closed its transport networks and advised it’s citizens not to leave the city”.

11 million people in Wuhan, China, considered the epicentre of the novel coronavirus outbreak, are ordered to abide by the restrictions. [1] Wuhan lockdown measures were kept in place until April 8, 2020. It is thought 5 million people departed before the lockdown was put in place.

Locking down healthy people is a public health measure **never** done before for a virus outbreak.

On 30 January 2020, the WHO's director general tweeted **China's lockdown measures** are "**setting a new standard for outbreak response.**"

An action not actually based on science, and contrary to an October 2019 WHO report, yet sovereign nations of the world actively followed this unprecedented CCP led "control measure"!

Further key data points from the China report:

- "On **Jan 19**, President Xi Jinping ordered that resolute efforts should be made to curb the spread of the virus, stressing putting people's safety and health as the top priority."
- "The Wuhan Health Commission reported on the morning of **Jan 21** that 15 medical workers in the city have been infected."
- At this time "much remains to be understood about 2019-nCoV, including how it is transmitted, the clinical features of the disease, its severity, the extent to which it has spread and its source."
- "Health experts agree the possibility exists for mutation of the virus".
- "Also on **Jan 19**, the National Health Commission listed the pneumonia caused by the virus among **Grade B** infectious diseases, a category that includes such major infectious diseases as SARS, AIDS and polio."
- "Currently, **however**, the new virus **will be treated as a Grade A** infectious disease, **which requires the strictest prevention and control measures**, including mandatory quarantine of patients and medical observation for those who have had close contact with patients, according to the commission." A classification reserved for "bubonic plague and cholera", but "managing the new disease as Grade A will greatly help in its control and prevention."
- "On **Jan 21**, the World Health Organization said in a statement that sustained human-to-human transmission may exist, and warned more cases of the virus could appear in China and outside in the coming days, given travel patterns and increased testing."
- "China, along with other affected countries, will attend an emergency committee meeting convened by the **WHO on Jan 22** to share information about the disease."

Dr Ian Lipkin stated "The most important tool we have right now is isolation"...a vaccine will take us "a year or more to do".

January 22

Johns Hopkins launch their coronavirus tracking dashboard

Ensheng Dong, a Johns Hopkins PhD student from China, created the JH online coronavirus tracking dashboard "to collect data to show the public". [1]

After 12 hours of collecting and translating Chinese data, designing tables and "bulldozed the statistics into a program that would create a map", the next morning on January 22, 2020 he showed his supervisor, associate professor Lauren Gardner.

“After a few tweaks, the project went live, with red dots ballooning across countries...to show numbers of known cases” and deaths.

The Coronavirus Resource Center “rapidly becomes a premier source around the world for real-time, accurate data about the pandemic. Its dashboard, created by Whiting School of Engineering civil and systems engineering associate professor Lauren Gardner and others, has been viewed more than 1 billion times.”

January 23

2019-nCoV genome 96.2% similar to a bat coronavirus

On January 23, 2020 – A team led by Shi Zheng-Li, from Wuhan Institute of Virology, reported on bioRxiv that they “ found that nCoV-2019 is 96% identical at the whole genome level to a bat coronavirus” which shows the coronavirus has a potential bat origin. They also said it had 79.5% similarity to SARS-CoV, the coronavirus that causes severe acute respiratory syndrome (SARS).

Reported in the paper they “found a short RdRp region from a bat coronavirus termed BatCoV **RaTG13** which [was] previously detected in *Rhinolophus affinis* from Yunnan Province showed high sequence identity to nCoV-2019.”

An article in Science magazine a week later, states that it still “remains a mystery which animal spread the virus to humans.”

January 23

First media connection between Wuhan BSL-3 Lab and the new coronavirus

The British Daily Mail was one of the first to suggest a connection between the new coronavirus and the Wuhan National Biosafety Laboratory housed at the Wuhan Institute of Virology, followed by the Washington Times.

The Wuhan BSL-4 lab is located 20 miles away from the Huanan Seafood Market. The lab happens to be the only BSL-4 lab in China designated for studying dangerous pathogens.

Shortly after, the main stream media and “scientists conspired and dubbed the lab leak possibility as a “conspiracy theory”, frantically steering the narrative towards a natural, animal origin.

January 23

China’s CDC director “confirms” seafood market animal as source of SARS-CoV-2

According to China media, on January 23, 2020 at a government briefing on the coronavirus outbreak the Director of the Chinese CDC, Gao Fu stated about the virus origin:

"We have **confirmed it was** transmitted via wild animals illegally sold at a seafood market in Wuhan.

At first, it was spread from animals to humans. However, the virus has since been mutating and has become adaptive to its host. Human-to-human transmission has occurred, and there has been some community transmission. That is to say, it has gone through three stages."

No evidence is provided as to which specific zoonotic source, wild animal(s) that is. In the weeks following this proclamation the media, public health and even scientists around the world used this claim to begin reporting about the threat of animal to human (zoonotic) diseases from seafood markets, such as Australia's 60 Minutes.

On March 26, 2020 in a report the WHO were unable to identify the origin of the virus, only environmental samples taken at the seafood market were positive for SARS-CoV-2, no animal.

By mid-2021, after 18 months and almost 3 million viruses sequenced in Hubei, China and worldwide, the WHO investigation were **unable** to find a single animal specimen with SARS-CoV-2. [@3:38] [1]

January 23

Eurosurveillance Corman-Drosten PCR paper published

On January 23, 2020 Christian Drosten and Victor Corman *et al* publish in Eurosurveillance, just 24 hrs after submission, their paper titled "*Detection of 2019 novel coronavirus (2019-nCoV) by real-time RT-PCR*" – the basis for PCR testing globally. The paper was submitted only 11 days after genome sequence release on Jan 10, 2020, before anyone outside of China. In acute respiratory infection, **RT-PCR** is routinely used to detect causative viruses from respiratory secretions....virus isolates or samples from infected patients have so far not become available to the international public health community."

"We report here on the establishment and validation of a diagnostic workflow for 2019-nCoV screening and specific confirmation, **designed in absence of available virus isolates or original patient specimens**".

January 23

Australia on Biosecurity Alert

Australia's **Prime Minister Scott Morrison** in a press release stated "a human coronavirus with pandemic potential was added as a listed human disease under the Biosecurity Act of 2015."

Chief Medical Officer, Dr Brandan Murphy stated "Chinese authorities confirmed 571 cases of coronavirus infections and 17 deaths... and have now stopped transport

out of Wuhan city...There have been no reported confirmed cases of the coronavirus in Australia as yet.”

At the time Australia was still recovering from major bush fires.

January 24

CDC publish instructions for use of RT-PCR test

On January 24, 2020 the CDC provided information for laboratories and publish their **instructions for use** of *Real-Time RT-PCR Panel for Detection 2019-Novel Coronavirus* along with publishing initial PCR “Primers and Probes” sequences [1, 2, 3, 4]

The charts indicated amplifying **cycles up to 45**, but stated Under Interpreting Test Results that “RP should be positive **at or before 35 cycles** for all clinical samples and HSC, thus **indicating** the presence of sufficient nucleic acid from human RNase P gene and that the specimen is of **acceptable quality**.” Their graph indicated the **Cycle Threshold (Ct)** before the “exponential PCR phase” was between 22 to 28 cycles of amplification.

January 24

China: videos of people collapsing in the streets of Wuhan

Around January 24th, 2020, viral video footage had spread throughout the world showing people collapsing in the streets of China, videos were tagged as coming from Wuhan where a new virus had emerged. [1, 2]

Wall Street expert Edward Dowd stated:

“Nothing comes out of China unless they want it to”

Were the videos staged or have other explanations but used by the media to instill fear?

January 24

Paper describing Wuhan virus sequencing

A paper published in the New England Journal of Medicine entitled “A Novel Coronavirus from Patients with Pneumonia in China, 2019” describes how China CDC scientists took “lower respiratory tract samples...from patients with pneumonia of unknown cause” and “who had been present at the Huanan Seafood Market”.

“Extracted nucleic acid samples [RNA] were tested for viruses and bacteria by polymerase chain reaction” (PCR). RNA extracted from lung fluid and culture supernatants was used as a template to clone and sequence the genome using genomic software.” This paper references China’s PCR test.

“Primers were subsequently designed for PCR”.

“Although our study does not fulfill Koch’s postulates, our analyses provide evidence implicating 2019-nCoV in the Wuhan outbreak”.

The resultant genetic sequence will become known as SARS-CoV-2. A computer-generated sequence of a virus not isolated and purified. [1, 2]

January 24

Wuhan, China: Clinical features of 2019 novel coronavirus

On January 24, 2020 The Lancet published data out of China, titled *Clinical features of patients infected with 2019 novel coronavirus in Wuhan, China*.

By Jan 2, 2020, 41 admitted hospital patients had been identified as having laboratory-confirmed 2019-nCoV infection. The median age of the patients was 49.0 years, no children or adolescents were infected.

Of the 41 patients, 13 (32%) were admitted to the ICU because they required high-flow nasal cannula or higher-level **oxygen support** measures to correct hypoxaemia. Most of the infected were male, less than half with underlying conditions.

Invasive mechanical ventilation was required in four ([only] 10%) patients. . . . As of Jan 22, 2020, 28 (68%) of 41 patients have been discharged and six (15%) patients have died. [1]

January 24

Beijing prevent WIV sharing virus isolates with Uni Texas

On January 24, 2020 it is reported in a Five Eyes intelligence report that officials in Beijing, China prevented the Wuhan Institute of Virology (WIV) from sharing virus sample isolates with the University of Texas. [There is a standing agreement between the labs]

“The Galveston National Laboratory is a national biocontainment laboratory built at the University of Texas Medical Branch [UTMB] by the National Institutes of Health and the State of Texas to help combat global health threats” [1, 2]

The UTMB released a statement in April 2020 saying the Galveston National Laboratory “has hosted Chinese scientists for training to work in the high-containment lab” and that its lab “is part of National Institute of Allergy and Infectious Diseases [NIAID] Biodefense Laboratory Network.”

“According to the U.S. Education Department, the UT system reported 10 contracts with Huawei and 24 contracts with Chinese state-owned universities between 2014 and 2019, totaling nearly \$13 million”

January 25

Australia: First COVID-19 Case

First case of novel coronavirus 2019 is detected in Australia in a passenger who traveled from Guangdong, China, to Melbourne in the state of Victoria.

January 25

War Room: Pandemic is launched – before a “pandemic” is declared

Steve Bannon, former Chief Strategist to President Trump, who tracks world affairs and is focused on the CCP [4], transitioned his 6 day per week War

Room: Impeachment podcast into **War Room: Pandemic** and launched the first episode on January 25, 2020. [3] Because of his relationship with Miles Gao, he already knew the “coronavirus” was a “world historical event out of China”, even before the World Health Organisation officially declared a pandemic on March 11, 2020 [1, 2]

The next day, on January 26, 2020, Dr Anthony Fauci declared on John Catsimatidis radio show that there is nothing to worry about:

*“The American people should not be worried of frightened by this its a very, very low risk to the United States ...this is a virus that **has** emerged and jumped species from an animal reservoir”.*

On January 30, 2020 the health freedom media platform The Highwire, which airs on Thursdays, had their first episode that began tracking the pandemic response.

Both **The Highwire** and **Bannons War Room** became a go-to source for information and education about the pandemic response and the bigger picture, emerging global affairs, for a growing audience throughout the world, not just America. Both platforms were/are heavily censored and were deleted from YouTube. Both platforms cover content which does not follow the mainstream media narrative. [6, 7, 8]

War Room – EPISODES, pandemic timeline – ARCHIVE

The Highwire – EPISODES

January 26

China warns that coronavirus “spreads before symptoms show” (1 to 14 days)

China’s Health Minister Ma Xiaowei announced that the Wuhan coronavirus “can spread it before they become symptomatic.”, meaning **people are contagious during the virus’ incubation period**. A highly unusual phenomenon and different to SARS-CoV! The incubation period of the new coronavirus “is anywhere from **one to 14 days**” officials believe. [1, 2]

CDC advisor Dr Schaffner said this “means the infection is much more contagious than we originally thought,” and “It’s much harder to contain a virus — to track down a patient’s contacts and quarantine them immediately — if the patient was spreading the disease for days or weeks before they even realized they had it.”

“Without symptoms, a person may not know they have the infection, but still be able to spread it.” The Super-spreader that China’s CDC debunked a couple of days ago is back!

The authorities are still not clear about the disease source, but have now banned the sale of wildlife in markets and restaurants.

Many people believe that it crossed to humans from snakes.

January 28

SA declares COVID-19 a notifiable disease.

Human coronavirus disease 2019 was declared by the Minister for Health and Wellbeing to be a controlled notifiable condition by notice in the Gazette dated 28 January 2020 under the *South Australian Public Health Act 2011*. [1, 2, 3]

As a controlled notifiable condition it became a “legal requirement of all medical providers and laboratories to report any suspected, probable or confirmed cases” to SA Health.

On July 19, 2020, COVID-19 was further added to regulation 5 as a “controlled notifiable condition” under the *South Australian Public Health (Notifiable and Controlled Notifiable Conditions) Regulations 2012 (SA)*.

This legislation amendment provides the Chief Public Health Officer (CPHO) a “range of powers to require examination, testing, counselling, quarantine and detention in relation to controlled notifiable conditions”.

January 29

White House Coronavirus Task Force setup

President Trump creates the **White House Coronavirus Task Force** on January 29, 2020 to lead the coronavirus response. This 12-member group was established just before HHS Secretary Alex Azar declared a public health emergency. At that time there were 15 cases of the coronavirus in the US, of which one is in the hospital. “The task force is made up of subject matter experts from across the federal government and has been meeting daily since Monday”. [2]

The “experts” are claiming most people don’t have any immunity to it because it is a ‘new virus’, claiming “none of us have any protection”. [1]

Two days earlier on January 27, 2020, Trump’s staff attended the first full meeting on the coronavirus in the White House Situation Room. Unbeknownst to those in attendance, Matthew Pottinger, Deputy National Security Advisor, had unilaterally called the meeting. He pushed for travel bans while others urged for calm. [3]

On January 31, 2020, “Pottinger began popularizing the idea of shutdowns within the White House by circulating a Philly study among his White House colleagues” that showed Philadelphia was hit harder allegedly because they didn’t shut down.

Around the same time, Jan 28, CDC physician-scientist, Yen Pottinger, reached out to Deborah Birx on behalf of her husband Matt Pottinger to ask her to meet at the

“West Wing”, where Matt then offered Birx “the position of White House spokesperson on the virus.” [3]

January 29

First AHPPC meeting on COVID-19

The Australian Health Protection Principal Committee (AHPPC) documented first meeting on COVID-19. AHPPC is comprised of all state and territory **Chief Health Officers** and is chaired by the Australian Chief Medical Officer, Professor Paul Kelly. This group is equivalent to UK SAGE.

January 30

CDC confirms first person-to-person spread of 2019-nCoV

On January 30, 2020 the CDC confirmed that the 2019 Novel Coronavirus (2019-nCoV) had spread from an infected person [woman from Chicago] to a household member [husband], representing the **first instance of person-to-person transmission** in the US, involving someone who had not traveled to China. He is the 6th case in the US. [1, 2]

“Previously, all confirmed U.S. cases had been associated with travel to Wuhan, China,” this latest case has no history of travel to Wuhan, “but shared a household with the patient diagnosed with 2019-nCoV infection on January 21, 2020.”

“Officials warned that the case of human-to-human transmission indicated that the coronavirus was a “very serious public health situation.”

January 30

WHO declares COVID-19 a Public Health Emergency of International Concern

The International Health Regulations (IHR) Emergency Committee for COVID-19 held its first meeting on January 22 & 23, 2020 [found COVID-19 not an emergency], then 7 days later on **January 30, 2020** they met again and upon the committee’s advice, the WHO Director-General Tedros Adhanom Ghebreyesus declared that the novel coronavirus outbreak constituted a **Public Health Emergency of International Concern (PHEIC)**, the “WHO’s highest level of alarm”. [1, 3]

- “The Committee also acknowledged that there are still many unknowns, cases have now been reported in five WHO regions in one month, and human-to-human transmission has occurred outside Wuhan and outside China.”
- “The Committee believes that it is still possible to interrupt virus spread, provided that countries put in place strong measures to detect disease

early, isolate and treat cases, trace contacts, and promote social distancing measures commensurate with the risk.”

- “The Committee agreed that the outbreak now meets the criteria for a Public Health Emergency of International Concern.”
- The Committee emphasized that the declaration of a PHEIC should be seen in the spirit of support and appreciation for China, its people, and the actions China has taken on the frontlines of this outbreak, with transparency, and, it is to be hoped, with success. In line with the need for global solidarity, the Committee felt that a global coordinated effort is needed to enhance preparedness in other regions of the world that may need additional support for that.

“A key factor in reaching their decision – which the WHO had initially been reluctant to make – was that the outbreak was **no longer limited to China** but had spread rapidly to 18 other countries. Among them, Australia, Vietnam and South Korea which all announced new infections today, while India and the Philippines reported their first cases, and the CDC announced the **first person-to-person** transmission of the virus in the U.S.” [2]

- Australia is represented by Professor John Mackenzie of Curtin University on the Emergency Committee.
- At the time PHEIC was declared 171 people were determined to have died globally from the novel coronavirus. [4]
- Is this the mark for the start of a technocratic “new economic model”?

Only 5 times before has the WHO declared a PHEIC, since its power to do so was established in 2005 with the IHR:

- 2009 pandemic influenza
- 2014 polio resurgence
- 2014 Ebola epidemic in West Africa
- 2016 Zika virus outbreak
- 2019 Ebola outbreak in the Democratic Republic of Congo

January 30

India & the Philippines confirms their first coronavirus case

On January 30, 2020, India confirmed that at least one case of coronavirus has reached the country. The Philippines also confirmed its first case on the same day. [1]

By April 5, 2020, as reported in the Hindustan Times, police surveillance with cameras and drones are used in India, ensuring citizen compliance (stay indoors and maintain social distancing) of COVID-19 lockdown measures.

January 31

FDA grants license for new pandemic influenza vaccine using next generation technology

On January 31, 2020 the FDA approved “the first adjuvanted, cell-based influenza vaccine” called of Audenz, designed to protect individuals 6 months and older against the H5N1 avian influenza virus, and is said to be “a major milestone in pandemic influenza preparedness”. [1]

AUDENZ™, an Influenza A (H5N1) Monovalent Vaccine containing the MF59C.1 adjuvant and hidden ingredients, is sponsored by Seqirus Inc and supported by the US government agency, BARDA. Instead of producing the vaccine in chicken embryos, which is said to have “supply” issues in times of a pandemic, “Audenz uses two leading-edge technologies – an antigen-sparing adjuvant and cell-based vaccine technology – that represent a game-changing advance in the state of pandemic influenza preparedness.”

The application was submitted in January 2019, before President Trump’s Influenza EO, on the grounds “for Accelerated Approval of Biological Products for Serious or Life-Threatening Illnesses”. The vaccine will be produced in the US and supplied on demand. The approval letter acknowledged the manufactures “plans to collect additional safety and effectiveness data in the U.S., when Influenza A (H5N1) Monovalent Vaccine, Adjuvanted **is used.**”

Australia’s CSL (Seqirus part of CSL) has this H5N1 vaccine in “registration” with TGA according to their pipeline.

January 31

US declares a Public Health Emergency

On January 31, 2020 in the US, “[a]s a result of confirmed cases of 2019 Novel Coronavirus (2019-nCoV)”, HHS secretary Alex Azar determined “that a public health emergency (PHE) exists and has existed since **January 27, 2020**, nationwide”.

“This U.S. public health emergency declaration follows a declaration by the World Health Organization that spread of the virus constituted a public health emergency of international concern.” [2, 3]

This declaration sets up justification for Emergency Use Authorisation (EUA) of drugs where “the FDA Commissioner may allow medical countermeasures to be used in an emergency to diagnose, treat, or prevent serious or life-threatening diseases or conditions caused by [biological, chemical, radiological, and nuclear agents], **when there are no adequate, approved and available alternatives.**” [1]

In January 2017, FDA finalized the guidance to explain the FDA’s general recommendations and procedures applicable to EUA for industry and stakeholders.

January 31

WHO releases COVID-19 Case Definitions

On January 31, 2020 the WHO released their interim guidelines for Case Definitions for Surveillance purposes:

- Suspected case
- Probable case

- Confirmed case

A confirmed case: "A person with laboratory confirmation of 2019-nCoV infection, **irrespective of clinical signs and symptoms**"

WHO Dec 2020 update: A **Confirmed Case**: "A person with a positive Nucleic Acid Amplification Test (NAAT)", which is simply a positive RT-PCR test, no symptoms necessary. A positive PCR result makes a healthy person "statistically ill".

February 1

February 2020

February 1

Dr Fauci has confidential emergency teleconference with Jeremy Farrar et al

It was revealed in a series of emails obtained from Dr Anthony Fauci under the Freedom of Information Act (FOIA), that on Saturday **February 1, 2020** he attended a "confidential" teleconference set up by Jeremy Farrar, the head of the Wellcome Trust (a WHO partner) with 11 other invited participants including Dr Fauci and Dr Francis Collins, but notably absent/excluded were President Trump's other coronavirus task force members, in particular CDC director Dr Redfield – who's view didn't follow their "narrative".

This "emergency" teleconference appears to have been sparked because of the "revelation" from Kristian Andersen *et al*, that the virus genome was "inconsistent with expectations from evolutionary theory", thus it could potentially be engineered and of lab origin. [1]

By March 5, 2023 in a congressional memorandum, it stated that "[i]t was on this conference call that Drs. Fauci and Collins were first warned that COVID-19 [technically SARS-CoV-2] **may have leaked from a lab in Wuhan, China** and, further, may have been intentionally genetically manipulated"

Three days later, on February 4, 2020, "four participants of the conference call authored a paper entitled "*The Proximal Origin of SARS-CoV-2*" (Proximal Origin) and ...prior to final publication in Nature Medicine, the paper was sent to Dr. Fauci for editing and approval." The preprint was published Feb 16, 2020.

February 1

Chinese scientists concluded the virus was of lab origin

On February 1, 2020, two Chinese scientists, Botao Xiao and Lei Xiao, one from Wuhan, published the pre-print paper "The possible origins of 2019-nCoV coronavirus", the paper was quickly scrubbed and only available in the web archives. [1, 2]

In the paper they point out that "According to municipal reports and the testimonies of 31 residents and 28 visitors, the bat was never a food source in the city, and no

bat was traded in the market.” They also point out there is no recombination or intermediate host that has been reported.

But they screened the area around the Wuhan seafood market and identified two laboratories conducting research on bat coronavirus:

1. the Wuhan Center for Disease Control & Prevention (WHCDC) located ~280 meters, which also happens to be adjacent the Union Hospital where the first group of doctors were infected.

2. Wuhan Institute of Virology, Chinese Academy of Sciences ~12 kilometers Of the latter, the “principal investigator participated in a project which generated a chimeric virus using the SARS-CoV reverse genetics system and reported the potential for human emergence.”

From this circumstantial evidence they concluded “the killer coronavirus **probably** originated from a laboratory in Wuhan. ”

Vanity Fair reported that US National Security Council (NSC) officials cited this pre-print paper said to be published on February 1, 2020, noting that “almost as soon as the paper appeared on the internet, it disappeared, but not before U.S. government officials took note.” (sec V)

Then on February 19, 2020 a group of 27 public health scientists from eight countries signed an open letter in The Lancet to condemn conspiracy theories surrounding the origin of the virus. The same day the WHO affirms the virus was not produced in a laboratory or as a biological weapon. [3]

February 1

South Australia: First 2 cases

SA announces first two cases of COVID-19 in couple returning from Wuhan.

February 1

Italy launches “Hug a Chinese” campaign

On February 1, 2020, Italy launched their “**Hug a Chinese**” campaign. China was reported to have reached out to the Italian government to help with Chinese relations and so launched “Hug a Chinese” day, where “well put together” videos were aired!

At the time thousands of Chinese immigrants from the city of Wuhan traveled to Northern Italy for work, the very area hardest hit with COVID-19 deaths.

21 days after the campaign launch on February 21, 2020, Italy reported its first official COVID-19 patient in a little town near Milan, in the northern region of Lombardy. [1]

In retrospect a study by the National Cancer Institute (INT) of the Italian city of Milan showed that SARS-CoV-2 was spreading in Northern Italy as early as September 2019.

February 1

Borders begin closing around the world

As the coronavirus spreads around the world countries begin closing borders and restricting travel from around **early February 2020**, except for citizens. Mandatory quarantine is required for 14 days upon entry in many countries. [1, 2, 3]

On March 20, 2020 President Trump bans non-essential travel between US and Mexico. [4]

February 1

CEPI calls for vaccine proposals with proven, rapid and scalable technologies

On February 1, 2020 the Coalition for Epidemic Preparedness Innovations (CEPI) put out a "Call for Proposals" for proven vaccine technologies, applicable for large scale manufacturing, for rapid response against novel coronavirus, 2019-nCoV with an application deadline of February 14, 2020 ("open for 2 weeks").

Stating the "rapid global spread and **unique epidemiological characteristics** of 2019-nCoV virus is deeply concerning."

February 2

50 tons vitamin C delivered to Wuhan, then ICU admissions plummeted

On February 2, 2020 Dutch State Mines (DSM) subsidiary DSM Jiangshan Pharmaceutical (Jiangsu) Co. tweeted that they had **shipped 50 tons of vitamin C** to China's Hubei Province, where **Wuhan** is located. This shipment provided 50 million one gram doses of immune boosting Vitamin C which was given to hospitalized patients and hospital workers. [1, 4]

On February 24, 2020 the Chinese CDC published their novel coronavirus data for up to February 11, 2020, revealing, prior to vitamin C's distribution, 5% of COVID-19 cases were "critical" [ICU] with a **case fatality rate (CFR) of 2.4%**. [3, 5]

A randomized clinical trial using **high dose vitamin C** in ICU patient in Wuhan began early February 2020. But following this shipment of vitamin C "**new admissions into Intensive Care Units (ICUs) plummeted**", and as a result the study failed to enroll the needed 140 patients to be statistically powered. Nevertheless, the trial reported patients who received IV vitamin C (IVC) were 60% more likely to survive and had statistically improved markers, revealing a potential benefit for incorporating IVC into hospital treatments. [2]

Yet, in early 2020 any social media talk about potential benefits of vitamin C was censored, YouTube deleted content as they said it went against WHO guidelines!

February 2

Ethiopia continues to allow Chinese traffic entry – first case

It is noted that on February 2, 2020 the Ethiopian government, despite citizen backlash, kept air travel from China open, despite Australia, Japan and the US already imposing travel restrictions. Ethiopia is the entry point for air travel between China through which they received around 1,500 passengers from China per day. The first reported case of coronavirus into Ethiopia was on March 13, 2020, a 48-year-old Japanese national who had entered the country after visiting Burkina Faso has tested positive for the virus. The government of Ethiopia was said to be following the WHO's directions.

The Director-General of the WHO, Tedros, is from Ethiopia.

February 2

Virus genome paper published then withdrawn within a week.

On February 2, 2020, a paper by Indian authors Pradhan et al, titled "*Uncanny similarity of unique inserts in the 2019-nCoV spike protein to HIV-1 gp120 and Gag*" was published and then withdrawn within a week.

"The scientific paper claimed that the SARS-CoV-2 virus had four "inserts" in its spike protein that were similar to the ones found in HIV and concluded that these are unlikely to occur naturally in a coronavirus, suggesting an "unconventional evolution" of the virus that warrants further investigation." [1, 2]

This paper was discussed by Dr Fauci as revealed in his emails released under Freedom of Information.

February 2

US bans entry from China, Biden accuses Trump of being xenophobic

On January 31, 2020 the Trump administration put into place temporary travel restrictions that barred entry into the United States by any foreign national who has traveled to China in the past 14 days, American citizen returning to the United States from the Hubei Province in China will be subject to up to 14 days of mandatory quarantine. The ban came into effect on February 2, 2020

Dr Fauci said the actions were being taken because there were "a lot of unknowns" surrounding the virus and its transmission path.

Trump was accused of being "xenophobic" by the media and Democrats, who by April changed their tune!

On February 2, 2020 Democratic presidential contender Joe Biden led the way, quickly attacking what he called Trump's "record of hysteria, xenophobia and fear-mongering" after the travel restrictions were announced, and stated that Trump "is the worst possible person to lead our country through a global health emergency." 2 months later Trump is accused of being slow to respond to the virus!

February 4

WHO – Strategic Preparedness and Response Plans

WHO released their **Strategic Preparedness and Response Plan (SPRP)**, their strategy for coordinating national, regional, and global actions in the response to COVID-19, and chart the course out of the pandemic. [1, 2]

Each country was encouraged to plan its preparedness and response actions in line with the Feb 2020 global SPRP2021 document.

New updated SPRP2021 was released February 1, 2021.

February 4

US HHS secretary determines EUA justified and invokes the PREP Act

Following the declaration of a Public Health Emergency (PHE) on January 31, 2020 by the US Secretary of Health and Human Services (HHS), Alex Azar, he then, on **February 4, 2020**, determined that circumstances existed to justify the Food & Drug Administration (FDA) can **authorization of emergency use (EUA)** "of medical devices, including alternative products used as medical devices", (including biological products), pursuant to section 564 of the Federal Food, Drug, and Cosmetic (FD&C) Act. The declaration was effective March 24, 2020 [3, 5]

Also on February 4, 2020, HHS Secretary Alex Azar invoked the **Public Readiness and Emergency Preparedness Act (PREP Act)** a 2005 law. Under this US Act pharma giants are provided total immunity from liability until 2024. [1, 2, 4]

The FDA may issue an EUA **ONLY** after concluding that 4 statutory criteria are met:

1. The agent referred to in the declaration [SARS-CoV-2 which causes disease COVID-19] can cause serious or life-threatening disease or condition.
2. Evidence of effectiveness based on the totality of scientific evidence available. [5]
3. The known potential benefits outweigh the known potential risks.
4. There is no adequate, approved, and available alternative.

February 4

CDC release their PCR test to diagnose COVID-19

On Monday, February 3, 2020, CDC submitted an Emergency Use Authorization (EUA) their own product package to the U.S. Food and Drug Administration (FDA) to expedite FDA permitted use in the United States.” This is to “authorize the use of unapproved, but potentially life-saving medical or diagnostic products during a public health emergency.”

The next day on February 4, 2020, the FDA issued the EUA and the CDC release their “CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel” which is “intended for the presumptive qualitative detection of nucleic acid from the 2019-nCoV...Positive results are indicative of active infection with 2019-nCoV but do not rule out bacterial infection or co-infection with other viruses.” During the following 21 days after release of the CDC “exclusive” kit, “performance issues were identified related to a problem in the manufacturing of one of the reagents which led to laboratories not being able to verify the test performance.” By then the virus had spread across the country. The CDC test kit fiasco had hindered the public health response to the virus.

Which in May 2021 a FOIA revealed that the tests were “poorly designed and came with erroneous instructions that made it doubly difficult for labs to rely on the test’s results” and the CDC lab scientists knew that the tests failed 33% of the time but didn’t stop it’s release.

February 5

Impeachment trial: President Trump acquitted

On February 5, 2020 President Donald Trump’s attempted impeachment ended in his acquittal following Senate impeachment trial. The impeachment began September 24, 2019.

February 5

Dr Fauci: masks are not really effective in keeping out virus

In an email dated February 5, 2020 Anthony Fauci tells Sylvia Burwell that: “**Masks are really for infected people** to prevent them from spreading infection...[t]he typical mask you buy in the drug store **is not really effective in keeping out virus**, which is small enough to pass through the material” [@6:30]

The email was gained through a Freedom of Information request by ICAN.

February 10

Poor interest in coronavirus research is a concern

Statnews draws attention to the field of **coronavirus research** to be “small and modestly funded” and as the past two decades have proven is a “boom-and-bust” research area, as such coronavirus experts are minimal to few.

In addition, there are no drugs approved specifically to treat coronavirus infection, and the demand for funding and career focus is driven by the need.

A “declared” pandemic would “highlight” that immediate need, the “economics will follow the hype” said Peter Daszak in March 2015 workshop. The hype is needed to sustain the research funding!

February 11

US HHS-BARDA announce collaboration with Janssen/J&J on vaccine

On February 11, 2020, the US Health & Human Services (HHS), the parent body of the FDA, announced a collaboration with **Janssen** Research & Development, part of **Johnson & Johnson**, to help “develop coronavirus therapeutics, as well to “expedite development of **vaccines** that protect against the 2019 novel coronavirus” The Biomedical Advanced Research and Development Authority (**BARDA**), headed by Rick Bright [1, 2, 3], is part of HHS & ASPR, they will collaborate with Janssen to identify compounds that have antiviral activity against SARS-CoV-2 as an initial step in developing **new** treatments.

BARDA will share research and development costs and expertise to help accelerate Janssen’s investigational novel coronavirus vaccine into clinical evaluation.

February 11

WHO defines nomenclature

On February 11, 2020 the WHO announced that the International Committee on Taxonomy of Viruses (ICTV) had classified the novel coronavirus (formally 2019-nCov) as **Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2)**, causing the disease called Coronavirus Disease 2019 (**COVID-19**). [1, 2, 3, 4]

February 11

Images of the virus SARS-CoV-2

NIAID’s Rocky Mountain Laboratories (RML) in Hamilton, Montana, claimed to have produced images of SARS-CoV-2 using scanning and transmission electron microscopes (EM). Other claim EM images show the SARS-CoV-2 virus, but is it viral-like particles or cellular debris? [1, 2, 3, 4]

Compare to the SARS and MERS viruses.

February 11

WHO develop global research roadmap for 2019 Novel Coronavirus

On 11-12 February 2020, the WHO, in collaboration with the Global Research Collaboration for Infectious Disease Preparedness and Response (GLOPID-R) – an international network of funders to facilitate coordination and information sharing, organized a Global Forum on research and innovation for COVID-19 ('Global Research Forum'). [1]

Using the R&D Blueprint strategy as a framework at this forum world scientists assessed "the current level of knowledge about the new virus, agree on critical research questions that need to be answered urgently, and to find ways to work together to accelerate and fund priority research to curtail this outbreak and prepare for those in the future."

From this the WHO SOLIDARITY trials emerged.

February 15

WHO: we're fighting an infodemic!

Director General of the World Health Organization (WHO), Tedros Adhanom Ghebreyesus, announced at the Munich Security Conference in February 2020: "we're not just fighting an epidemic; we're fighting an infodemic ... Fake news spreads faster and more easily than this virus, and is just as dangerous.

That's why we're also working with search and media companies like Facebook, Google, Pinterest, Tencent, Twitter, TikTok, YouTube and others to counter the spread of rumors and misinformation...

- This is a time for facts, not fear.
- This is a time for rationality, not rumors.
- This is a time for solidarity, not stigma.

In April 2020 the UN Secretary-General launched the United Nations Communications Response initiative to combat the spread of mis- and disinformation, then at the World Health Assembly in May 2020, WHO Member States passed Resolution WHA73.1 on the COVID-19 response to recognize "that managing the infodemic is a critical part of controlling the COVID-19 pandemic". [1] Infodemic is now a "public health" issue managed by WHO Department of Global Infectious Hazard Preparedness, who state infodemics occur during an epidemic, and is an "emerging scientific field" called **infodemiology**. [6]

The WHO hold **Infodemic Management** training (1st, 2nd, 3rd), they have an Infodemic Management team, they hold conferences and produce summary reports, they're doing infodemic research and so much more. [2, 3, 4, 5] This inspired the formation of "The Disinformation Project" in New Zealand to study the trends of mis- and disinformation. [7]

February 16

WHO: China setting the stage for global reponse

The WHO released a report dated 16-24 February 2020, on how China responded to COVID-19 and how the virus spreads. This Joint Mission report includes relevant statements that set the stage for how the world then responded:

- bats
- seafood market
- no prior immunity

- post infection immunity
- droplet transmission
- human-to-human transmission
- contact tracing.
- symptom – spectrum from asymptomatic to death
- 80% cases mild to moderate
- incubation possibly 1-14 days
- at highest risk are with underlying conditions – over 80.

The report found “early cases identified in Wuhan are believed to have acquired infection from a zoonotic source” in the Huanan Seafood Wholesale Market. [1]

February 17

Dr Fauci states the risk of this virus is minuscule

On February 17, 2020 Dr Anthony Fauci, a “Global Health Expert” who sits on numerous, influential global health boards stated *“the risk of coronavirus in USA right now is minuscule”*

He also pointed out “a mask is for the infected”, just keep washing your hand. Sound advice.

It won't be long before Dr Fauci flip-flops on his own advice.

February 18

Two German travellers: suggest asymptomatic spread of SARS-CoV-2

In correspondence to the editor of the New England Journal of Medicine (NEJM) on February 18, 2020 of a group of German national evacuated from Hubei Province, who were screened “for symptoms and clinical signs of infection” before their departure from China and again upon arrival in Frankfurt, found 2 persons with no symptoms but returned a positive PCR test.

“Two of the 114 persons (1.8%) in this cohort of travelers who had passed [asymptomatic] the symptoms-based screening tested positive for SARS-CoV-2 by RT-PCR (cycle threshold value in the two samples, 24.39 and 30.25, respectively).” They both remained well with no fever for 7 days post admission.

“In this effort to evacuate 126 people from Wuhan to Frankfurt, a symptom-based screening process **was ineffective** in detecting SARS-CoV-2 infection in 2 persons who later were found to have evidence of SARS-CoV-2 in a throat swab. We discovered that shedding of potentially infectious virus may occur in persons who have no fever and no signs or only minor signs of infection.”

This correspondence served as “evidence” for Bill Gates once-in-a-century paper ten days later.

February 19

Trimeric spike glycoprotein becomes the target for novel vaccines

A study published February 19, 2020 providing the first 3D map of the coronavirus is said to be “a breakthrough achievement that could speed the development of a SARS-CoV-2 vaccine” as it provides “valuable information to guide the development of medical counter-measures for 2019-nCoV”, now called SARS-CoV-2.

The virus binds to host cells through its trimeric spike glycoprotein, making this spike protein a key target for potential vaccines, therapies and diagnostics.

The researchers state “this protein binds at least 10 times more tightly” than SARS-CoV to their common host receptor – the human ACE2 receptor, and this affinity “may contribute to the apparent ease with which 2019-nCoV can spread from human to human.” [1]

This information “should enable the rapid development and evaluation of medical countermeasures to address the ongoing public health crisis.”

February 19

Scientific Consensus: Lancet letter used to “debunk” lab-leak theory

On February 19, 2020 a letter was published in The Lancet by 27 expert scientists to debunk “rumors and misinformation” about potential lab leak origins of the SARS-CoV-2 virus. This consensus was used as “evidence” for suppressing debate on whether the virus could have escaped the Wuhan lab; demonstrating the power of “scientific consensus” coupled with the media influence to rule a narrative. [1]

They stated: “we stand together to strongly condemn **conspiracy theories** suggesting that COVID-19 does not have a natural origin.”

They claimed no competing interests! Though 2021, it was revealed that 26 of the 27 scientists have links to Wuhan scientists including Professor John Mackenzie from Australia, who also served on WHO Emergency Committee. [2, 3]

Emails gained under FOI request shows planning by Peter Daszak of EcoHealth Alliance in who should sign the letter! [4]

In June 2021 we learn:

- Peter Daszak who heads EcoHealth Alliance who funds Wuhan Institute of Virology and is a WHO investigator clearly has competing interests.
- Daszak thanked Fauci in an email for dismissing the lab-leak theory
- Peter Palese does a 180 turn in opinion.
- Jeremy Farrar, of the Wellcome Trust and on the CEPI executive and SAC is very conflicted, and focused on evolutionary origin as per 13 Feb 2020 email from Fauci.
- Drosten wrote controversial PCR paper.
- The Lancet editor refuses to comment.

February 19

Determining the Incubation Period

WHO worked with an international network of statisticians and mathematical modellers to estimate key epidemiological parameters of COVID-19, such as the **incubation period** (the time between infection and onset of symptoms).

- Preliminary estimates of median incubation period are 5-6 days (ranging from 0-14 days).
- By March 6, 2020, the WHO settled on incubation period of **up to 14 days** [2].

With the new concept of asymptomatic spread, an incubation period gives cause to isolate a **PCR** positive test case for the WHO declared maximum duration of 14 days. Meaning it could be 14 days before the onset of symptoms! That person may never produce symptoms! Historically a disease meant “dis-ease”, not well, having a symptom.

From 2020 anyone off the street can get diagnosed with COVID-19 disease if they return a positive PCR test, the lab runs the **cycles of amplification** up to 40 cycles (or 45) , which as Kary Mullis cautioned, you’re sure to find “something” its that good!

February 20

First Italian COVID-19 patient registered in Lombardy

February 20, 2020: the first Italian patient affected by COVID-19 is registered in Lombardy, a region in northern Italy. [1]

February 21

China report asymptomatic spread of SARS-CoV-2

On February 21, 2020 Chinese scientists publish letter to JAMA Network “presuming” that they have evidence that the SARS-CoV-2 virus is spread from **asymptomatic carriers** after a “20-year-old woman from Wuhan passed it to five of her family members but never got physically sick herself”. [1]

Reports of nursing home residents (the highest risk group) test positive for the virus, presumed infectious, but don't show any symptoms.

February 24

Chinese military scientist files for COVID vaccine patent, then dies!

According to documents obtained by The Australian's Sharri Markson (4 June 2021), Chinese military scientist Zhou Yusen, who specialised in coronavirus research and was funded by US NIH(separate to EcoHealth alliance funding), filed for COVID vaccine patent in February 2020. He mysteriously died May 2020, just 3 month later. [1, 2]

Filing a patent in this time frame, Flinders University researcher Nikolai Petrovsky noted was a "remarkable achievement", raising questions as to when the genetic sequence of SARS-CoV-2 was first known.

February 24

Chief Medical Officer warns a pandemic is likely

Australia's Chief Medical Officer, Professor Brendan Murphy, told *The Age* and *The Sydney Morning Herald* there was "a strong possibility of a pandemic" which had "increased in recent days" and has not been contained." At this point "There is still no sign the virus is spreading in Australia."

- it is now clear the virus can readily spread through coughing and sneezing.
- "This is a proper respiratory virus, with all the bells and whistles," Professor Mackey of UQ said.
- The WHO has yet to declare COVID-19 a pandemic – "a disease that spreads across the globe."
- The WHO's declaration of a pandemic is "**no longer a designation triggering a formal response**"!!!
- A sudden eruption of cases in Italy has forced them to lockdown.
- The virus is spreading undetected, probably by people who are infected but not showing symptoms.
- Australian hospitals preparing for "the surge in patients a pandemic would cause."
- Age care expected to be worst hit.
- Coronavirus poses a very small risk to healthy people aged under 60" like the common cold.

February 25

French Virologist Shares Chloroquine Treatment.

French Biologist and Infectious Diseases Specialist – Dr Didier Raoult MD said reposition old drug molecules with known toxic profiles to see if they could be used to treat the new coronavirus. Chloroquine brings spectacular improvement in trials.^[1] Didier said “From all respiratory infections [SARS-CoV-2 is] probably the easiest to treat. There’s really no need to rush to produce a vaccine”. Chloroquine and hydroxychloroquine are listed as WHO Essential Medicines.

February 25

Australia’s Pandemic Emergency Response Plan enacted

The Australian Prime Minister activated the government’s health emergency response plan, or ‘pandemic, to an “impending coronavirus pandemic, foreshadowing fever clinics, fast-tracked vaccines and severe pressure on hospitals, blood banks, medical supplies and mortuaries”. [1, 2, 3]

February 26

President Trump names VP Mike Pence to coordinate the Coronavirus response

At a White House news conference on February 26, 2020, President Trump announced that **Vice President Mike Pence** would coordinate the government’s response to the public health threat and lead the **Coronavirus Taskforce**, he wanted governors and members of Congress to have a single point-person to communicate with [1, 2]

At the news conference Dr. Anne Schuchat, the principal deputy director of the C.D.C., warned Americans that there would be more infections, there is currently 60, though “the trajectory of what we’re looking at over the weeks and months ahead is very uncertain.”

Pence selected **Dr. Deborah L. Birx**, the director of the United States effort to combat H.I.V. and AIDS, to serve as the **Coronavirus Response Coordinator** for the White House. Mr. Trump said that “Mike is going to be in charge, and Mike will report back to me.” Meanwhile, Alex M. Azar II, the health and human services secretary, remains the chairman of the government’s coronavirus task force.

The appointment of a taskforce was “to coordinate the alphabet soup of federal health and security agencies that have roles to play in protecting the country.”

Dr. Anthony S. Fauci, told associates that the White House had instructed him not to say anything else without clearance.

The announcement also came on a day when the CDC reported a person infected, with no known risk factors, who did not appear to have traveled to countries hard hit by the virus or been exposed to a known coronavirus patient. “That raised the prospect that the virus was spreading through unknown means.” At this point the CDC limited testing for the virus to people who have traveled in China or have come

into contact with someone who has, whereas other countries are testing more broadly. [3]

February 26

US could have 1.9 million requiring ICU – not enough ventilators

From a February 26, 2020, “leaked” slides from Dr. James Lawler presentation to the **American Hospitals Association**, revealed his model projected that 96 million Americans could become infected cases, of which 4.8 million could result in hospital admissions and 1.9 million of those “could require a stay in a hospital’s intensive care unit (ICU), and approximately **half of them would need a ventilator**”. The “slide says hospitals should prepare for an impact to the system that’s **10 times greater** than a severe flu season.”

But in the same presentation Lawler showed clearly that the death rate in China was significantly higher in 80+ years than other age brackets and pre-existing conditions were associated with death. [3]

Also in February 2020 the Center for Health Security at Johns Hopkins released a February report [no archive for Feb] which estimated the United States “has about 160,000 ventilators ready for use in hospitals, with another 8,900 held in a national reserve”, enough for day-today operational capabilities but not for a severe pandemic. A shortage of skilled respiratory therapists is also noted. [2]

On March 13, 2020 the World Health Organization released [2, 3] their updated interim guidance for “Clinical management of severe acute respiratory infection (SARI) when COVID-19 disease is suspected”, which recommended “**mechanical ventilators as an early intervention**” based on China’s experience. [1] And thus begins the ventilator panic.

February 27

Daszak: COVID-19 is “Disease X”

On February 27, 2020, Peter Daszak wrote an Opinion in New York Time stating COVID-19 is Disease X which they’ve been telling us was coming and that CEPI was preparing for with fast, new vaccine platforms.

Peter Daszak heads up EcoHealth Alliance and funded coronavirus research at the Wuhan labs, the very labs he helped investigate as potential origin of SARS-CoV-2. But this pandemic “**will challenge us in new ways**, as people try to evade quarantines, and misinformation campaigns and conspiracy theorists ply their trade in open democracies.” More to the point he states “the really big picture: **Pandemics are on the rise**, and we need to contain **the process** that drives them, **not just the individual diseases**.” “Plagues are not only part of our culture; they are caused by it.”

“These spillovers are increasing exponentially” he stats, [that is the “Eco” and “Health” connection] because “our ecological footprint brings us closer to wildlife in remote areas and the wildlife trade brings these animals into urban centers” aka the wet market in China!

February 27

Caution warranted for coronavirus vaccines for humans – the animals died!

On February 27, 2020, independent media, The Highwire, alerted [[@1:11:30](#)] the public to the potential dangers of a SARS vaccine, based on a 2012 SARS vaccine study in mice. Coronavirus vaccines appear to cause “**Pathogenic Priming**”, a Disease Enhancement otherwise referred to as **Antibody Dependent Enhancement** (ADE). What resulted in the animal studies was upon re-infection the mice experienced a cytokine storm followed by death. [[1](#), [2](#), [3](#)]
The paper concluded “**Caution** in proceeding to application of a SARS-CoV vaccine in humans is indicated.”

- The same effect has been shown in chickens.
- In addition, vasculitis or **blood clots** were identified in the coronavirus vaccine study in animals.

On March 5, 2020, Dr Peter Hotez warned the US government of “the unique potential safety problems of coronavirus vaccines”, such as with RSV vaccines in the 1960’s where “paradoxical immune enhancement phenomenon” can occur with respiratory virus vaccines, and “we don’t entirely understand the basis of it”! They were confronted with the same “immune pathology” problem with coronavirus vaccine tests done on laboratory animals. The FDA are aware of the problem, these types of vaccines can’t be rushed because of the long-term safety implications. [[@1:26:30](#)]

Yet Operation Warp Speed was officially announced 2 months later, .

February 28

Bill Gates: COVID-19 the “once-in-a-century pathogen we’ve been worried about”

On February 28, 2020, only eleven days after NIAID director Dr Fauci stated the risk is miniscule from this coronavirus, Bill Gates (who invests donates heavily to global health) warns in the NEJM perspective that:

*In the **past week**, Covid-19 has started behaving a lot like the once-in-a-century pathogen we’ve been worried about. I hope it’s not that bad, but we should assume it will be until we know otherwise.*

We need to save lives now while also improving the way we respond to outbreaks in general.

Gates provides “two reasons that Covid-19 is such a threat”:

1. “First, it can kill healthy adults in addition to elderly people with existing health problems”, with a current “case fatality risk around 1%” it is more severe than seasonal influenza (0.6%)
2. “Second, Covid-19 is transmitted quite efficiently. The average infected person spreads the disease to two or three others — an exponential rate of increase. There is also strong evidence that it can be transmitted by people who are just mildly ill or even presymptomatic.” **MERS and SARS was spread “only by symptomatic people.”**

“National, state, and local governments and public health agencies can take steps over the next few weeks to **slow the virus’s spread.**”

As well he called upon developed countries to help less wealthy nations prepare, as they have “health systems that are too weak to support a potential outbreak.”

“The world also needs to accelerate work on treatments and vaccines for COVID-19”

It seems his 2018 plans can now justify acceleration, government investment, and an instant market for a huge return on investment.

February 29

First confirmed US death from COVID-19

Washington state, USA, confirms first US death from novel coronavirus, a man in his 50’s with co-morbidities, no evidence he got the infection through travel.

Washington state had high influenza-like-illness week 51 & 52 of 2019 as reported by the CDC,

March 1

March 2020

March 1

32.9 million doses of HCQ donated for Australians

In early March, The Palmer Foundation acquired 32,900,000 doses of the off-patent and cheap drug hydroxychloroquine (HCQ), which was then donated to the Australian Government to be placed on the National Medical Stockpile so it may be made available free to all Australians.

The Palmer Foundation is tracking HCQ data points with their own timeline.

In April 2020, Canada’s pharma company Apotex donated 2 million doses to the Canadian Public Health Agency.

Clive Palmer interview WATCH

March 1

First Australian to die from COVID-19

A 78-year-old man, from Perth is the first Australian reported to “die from COVID-19”. He was a passenger on board the Diamond Princess, a cruise ship that was forced to quarantine in the Japanese port of Yokohama. “The Diamond Princess cruise ship had around 3,700 people on board, with 10 passengers confirmed to be infected with coronavirus.”

Australia’s deputy chief medical officer Paul Kelly told ABC radio that “over 80% of the people that get this infection, it’s relatively mild.”

At this point “87,508 people worldwide had been infected, and 2990 had died of COVID-19.

March 2

President Trump meets with Big Pharma to discuss expedited medical counter measures

On March 2, 2020, President Trump met with pharmaceutical executives at the White House “to discuss how the federal government can accelerate the development of vaccines and therapeutic treatments for the coronavirus.” Several members of The White House Coronavirus Task Force led by Vice President Mike Pence were also in attendance.

HHS Secretary Alex Azar stated

We’re here working with the pharmaceutical company leaders on three key issues: how do we speed vaccines, how do we speed therapeutics, and what are the supply chain challenges that we may be facing for pharmaceutical products here in the United States.

President Trump said:

...we’re working very hard to expedite the longer process of developing a vaccine...It’s likely that therapies will be available before a vaccine is actually ready, and we’ll seek to bring all effective treatments to market as soon as possible.

Since the start of the outbreak, my administration has taken the most aggressive action in history to protect our citizens, including closing our borders very early — a lot earlier than people wanted us to do.

So those are unheard of speeds...we have to be very safe.

Trump spoke about bringing drug manufacturing back to America...“which started about a year ago.”

VP Mike Pence addressed Dr. Deborah Birx as “one of the leading experts in infectious diseases in the world.” Dr Birx take away from the meeting ...“*there’s technology that can be used as an immediate bridge*”, therapeutics and monoclonals. “*while we work on the vaccines.*”

Birx also said: “*I think just to assure the American people that we have tried using our innovators to actually screen all of the **current drugs** for potential activity against this virus would be key.*”

At this meeting Moderna CEO Stéphane Bancel, told Trump they were already formulating Phase II vaccine, and that the “phase two would take a few months before going to phase three.”

*“And one thing I want to add, we keep talking about “for America,” but really, we’re looking at — for **a cure for the whole world** because this is a world cure, not just for the United States. We want to take care of the United States. But **whatever we do is going to inure to the benefit of the world.**”* said President Trump

The pharmaceutical heads and government health agency representatives sold President Trump on the potential for Warp Speed vaccines:

I came into the room not expecting to hear quite what I’ve heard, but a lot of work has already been done.

March 2

850 scientists write warning letter to the White House

850 scientists with expertise in public health, law, and human rights, and experience in previous pandemic responses, signed a [letter](#) to the White House warning against lockdowns, closures, and travel restrictions. It was sponsored by Yale University. [1]

March 2

Fauci believed forced separation of people would stop the virus

Retrospective: Dr Fauci’s emails obtained under FOIA, [reveals](#) on March 2, 2020 he was in communication with a Washington Post reporter, and he believed the point of **social distancing** is to suppress the disease so that it goes away, to “force” the R0 [R-naught] below 1. Fauci even says that with enough forced human separation “the epidemic will gradually decline and stop on its own without a vaccine.”

The plan to **lockdown** was already in place, and in his email communication there is no mention of preserving hospital capacity; that line was yet to be invented to justify lockdowns!

The big flaw here is that the **R-Naught [R0]** [in principle](#) reveals what a virus “is doing” but it does not “cause the virus to behave in a certain way”. It is not possible to simply reduce the infection rate through a **theory** that viruses only spread in crowds (irrespective of immunity), yet that is what was used in the months following to justify shutdowns, lockdowns, and small business closures.

March 3

The new virus is not an equal-opportunity killer

SARS-CoV-2 “ is not an equal-opportunity killer: Being elderly and having other illnesses, for instance, greatly increases the risk of dying from” COVID-19...“Youth, in contrast, seems to be protective”. The elderly with health problems are the vulnerable population. [1, 2]

March 3

New York’s Gov. Cuomo issues EO prohibiting off-label use of HCQ

Governor Cuomo of New York in an unprecedented and unscientific move, on March 3, 2020 issues an executive order (EO) prohibiting the off-label use of hydroxychloroquine (HCQ) to treat COVID-19, a seemingly direct attack on Dr Zelenko.

March 3

WHO claims COVID-19 fatality rate is 3.4% globally

On March 3, 2020, the WHO Director General Tedros, claimed in a press conference that the fatality rate for COVID-19 (3.4%) is higher than that of the common flu, “because no one has immunity”, on the back of the China Report. [1, 2] This figure could be calculated from February 25, 2020 WHO COVID-19 situation report with 80,239 confirmed cases globally and a total of 2,700 deaths, this amounts to 3.36% case fatality rate.

WHO fatality rate was based on faulty assumptions, and have simply assumed a “new” virus has no cross-immunity from previous coronavirus infections. Natural infection confers broad spectrum immunity. China concealed the true extent of the virus outbreak, thus the IFR was off by a “factor of 10” [3, 4]

Importantly, “WHO does not distinguish between people who died *with* the Covid-19 virus, rather than *because* of it.”

On March 26, 2020 US Dr Anthony Fauci et al published paper claiming the “[o]n the basis of a case definition **requiring a diagnosis of pneumonia**, the currently reported case fatality rate is approximately 2%”. They also state that if “one assumes that the number of asymptomatic or minimally symptomatic cases is several times as high as the number of reported cases, the **case fatality rate may be considerably less than 1%**. This suggests that 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%).

President Trump has a “hunch” the WHO’s number is “false”, which proved to be correct. The high estimated fatality rate was the figure that helped justify lockdowns.

March 4

CDC provides unprecedented new death certificate guidelines for COVID-19

On March 4, 2020 the CDC changed how to fill in a death certificate for COVID-19. Typically, a death certificate is filled in with the underlying cause of death on the bottom line in part 1, and this is what is reported to the Federal Registry of Disease.

This is not the case for COVID-19!

“COVID-19 should be reported on the death certificate for all decedents where the disease caused or is **ASSUMED** to have caused or contributed to death.” [emphasis added].

Any markings of uncertainty on the death certificates with words like suspected-, probably-, maybe- COVID-19, the US system would automatically default to COVID-19 as designated by ICD-10 codes.

March 8

Australian 60 Minutes: 45 million could die

60 Minutes Australia report on the **prediction** that “45 million” could die from SARS-CoV-2, instilling FEAR in many Australians. It is stressed that a virus **potentially** starting from a wet market in China could kill your grandma in Sydney.

March 9

Dr Fauci on the effectiveness of masks

March 8 USA – Dr Anthony Fauci, global health expert stated to US 60 Minutes: “right now there’s no reason people should be walking around with a mask...when you’re in the middle of an outbreak, wearing a mask might make people feel a little bit better, and it might even stop a droplet, but it’s not providing the perfect protection that people think that it is...[it] could lead to a shortage of masks for the people who **REALLY** need it.”

This was reinforced on Feb 5, 2020 in a FOI’ed email where Fauci stated “Masks are really for infected people to prevent them from spreading infection to people who are not infected”

The general population doesn’t need a mask as there is little benefit. For masks to work they need to be fitted and used correctly.

Watch >>> FOIAed emails from 2020 and Fauci’s flip-flop advice

March 9

Italy, first country to go into lockdown

On March 9, 2020 Italy became the “first country to attempt a nationwide lockdown to stop the spread of the highly infectious coronavirus”, the next day the streets were empty. At this stage 9,172 people had been infected by the virus, 1,598 more than the day before and 463 had died, the majority of whom are overwhelmingly elderly and sick people – the known high-risk group. [1, 2, 3] Italy’s Prime Minister Giuseppe Conte, announced the “stay at home” order for 60 million people, in an unscheduled news conference on Monday 9th March, he explained that “we are forced to impose sacrifices.” Could the inspiration have come from China’s draconian lockdown response allegedly “beating” the virus? Italy’s lockdown response opened up the argument for other European countries to do the same.

The northern region of Lombardy, with a high elderly population and poor air quality, recorded the highest death toll attributed to COVID-19 in Italy. By March 28, 2020, 88% of death certificates showed one or more pre-existing morbidities, add to this the “Hug-a-Chinese” campaign in February 2020 in northern Italy!

March 10

Australia registers 100 cases of COVID-19

On March 10, 2020 Australia reports 100 cases of COVID-19 (referred to all over the news by the family name of the group of viruses – “coronavirus” and not the disease name COVID-19).

“Of the total cases reported, 22 have recovered and 3 have died. Ten of the cases, including one death, are associated with the Diamond Princess cruise ship from Japan.” [1]

The global death toll attributed to COVID-19 has topped 4,000, of which 882 are outside of China. [2]

On March 9, 2020 CNN news media begins calling the novel coronavirus outbreak a PANDEMIC before the WHO has declared it so! [3]

March 11

SA opens Australia’s first drive-through COVID-19 testing clinic

SA Pathology assisted opening Australia’s first drive-through COVID-19 **test collection center** at The Repat site at Daw Park, which became a model for other states.[1, 2, 3]

The collection service was designed for patients who have been assessed and received a pathology request form from their GPs. In time, drive-through testing was

for anyone who suspected infection from SARS-CoV-2, whether they had symptoms or not.

March 11

WHO Declares the COVID-19 outbreak a Pandemic

On March 11, 2020 the World Health Organisation (WHO) Director-General, Tedros Adhanom Ghebreyesus declared the novel coronavirus 2019 (COVID-19) outbreak a **pandemic**. [2]

*"We are deeply concerned both by the alarming levels of spread and severity and by the alarming levels of inaction... We have therefore made the assessment that COVID-19 can be **characterized as a pandemic**."*

Though the declaration of a "pandemic is no longer a designation triggering a formal response" stated Tarik Jasarevic a WHO spokesperson, the PHEIC last month put all member states on alert !

The declaration of a PHEIC, not "pandemic" it would appear, gave the WHO Director-General overreaching global powers to member states who signed the International Health Regulations (IHR) (2005). The documents' purpose is for the "control of the international spread of disease" yet the word pandemic is only mentioned once, and epidemic twice, in the entire document!

The WHO definition of a pandemic colloquially refers to "an outbreak of a new pathogen that spreads easily from person to person across the globe". This has no consideration of the pathogen's lethality across the population! (see 2009) Though in the minds of the public who are not aware of this the mere declaration could instill fear.

As stated March 2019 by the HHS "***The very word 'pandemic' conjures images of global disease and death***", state the article responding to Global Influenza Strategy document released by WHO **EXACTLY**, one year prior on March 11, 2019. The cover looking more like a coronavirus that influenza! [1]

March 11

WEF & WHO partnership: COVID Action Platform

On the same day the pandemic was declared, the World Economic Forum (WEF), an independent, self-appointed, international private organization, formed a partnership with the United Nation's World Health Organization (WHO) and launch the "COVID Action Platform" to help 'protect lives and livelihoods" and help accelerate transformation.

In 2017 the WEF founded the **Transformation Maps** which according to IMD's Professor Vogel: "The WEF transformation maps are an interesting new and dynamic approach to visualizing global issues, industries and economies and shows how they inter-connect," which through "multi-stakeholder cooperation" is updated after curation.

There is a [COVID-19 transformation map.](#), which interestingly doesn't connect to a repurposed drugs option for "[treatments](#)", even by Nov 2021, the focus is on [vaccines](#).

March 12

Denmark rushes in COVID-19 law

On March 12, 2020, in Denmark, the Danish Prime Minister, Mette Frederiksen, informed the nation in a televised statement that the country was shutting down in response to COVID-19 – giving Danes 2 days to shut down. [1, 2]. The borders were closed on March 14, 2020. The [first](#) Danish COVID-19 patient was diagnosed on February 27, 2020, just 14 days earlier.

That same night the Danish Parliament unanimously passed major amendments to the **Epidemic Act**, which Denmark has had in force since 1915. Only 95 out of 179 Danish MPs were present to vote on the emergency law which then gave health authorities powers to force testing, treatment, and quarantine with the backing of the police. This amendment was temporary, due to expire March 2021.

Nordic countries are known for a high degree of [trust in authorities](#) and in each other, and [Norway](#) and [Denmark](#) are known as "[Hero](#)" countries for testing the United Nations Sustainable Development Goals, not so much [Sweden](#), who resisted locking down. [3]

The gradual reopening of Danish society began on April 15, 2020, when hospital capacity was [underused](#).

Then [around](#) November 7, 2020 thousands of Danes began [protesting](#) in the streets of Copenhagen, outside the Danish parliament, demonstrating against new proposed law, using **pots and pans** creating noise for **9 days**. The Danish government proposed of a [new](#), **permanent** Epidemic Act which would grant the Danish Health Authority the [power](#) to define groups of people who could be [forcibly vaccinated](#) "in order to contain and eliminate a "dangerous disease"." The media were [silent](#) about the 9-day protest. On November 16, 2020 it was announced the law [didn't pass](#), but [fact checkers](#) deny it was due to massive protest. [4, 5, 6, 7]

March 12

Black Thursday: Stock market takes first historic drop

On March 12, 2020 President Trump's scientific advisers were urging him to do more than just stop travel from China, to also stop travel from Europe, UK, and Australia. "He made the announcement in a prime-time address. In that brief speech, he **misread the teleprompter** and said "that the travel ban would include goods". He meant to say that it would not. The stock market tanked and the White House had to issue a clarification the next day". [1]

The comment triggering the first stockmarket fall, a day known now as [Black Thursday](#).

Over the following weekend, Jared Kushner, President Trump's son-in-law, called some buddies and a Pfizer board member, who together hashed out a (public health) guideline plan, which they presented to Birx and Fauci!

On Friday 13th March the Department of Health and Human Services (HHS) published a confidential edict, which later became public, that contained all the essential elements of a lockdown. This document that would have taken time to prepare.

"The March 13 edict from HHS called for "**home isolation strategies**" and "**limiting public gatherings** and **cancellation** of almost all sporting events, performances, and public and private meetings that cannot be convened by phone." It called on states to "consider **school closures**." It also said that "healthcare" facilities need to "**alter standards of care** from 'contingency' to 'crisis' standards to conserve resources." **Everything must stop**, said the document, except for "skeleton crews" related to "critical public services and infrastructure." "

Then on Monday March 16, 2020 Trump announced the lockdown plan which triggered the second **stock market fall**, a crash of 3,000 points, the largest point drop in history.

March 13

Bill Gates steps down from Microsoft board to focus on global health and climate change

On March 13, 2020 Bill Gates announced he has stepped down from the public board of directors of Microsoft to "dedicate more time to philanthropic priorities including **global health** and development, **education**, and **climate change**". He also stepped down from Warren Buffett's Berkshire Hathaway Inc. board where he has been since 2004 [1, 2]

On June 27, 2008, Gates transitioned out of a day-to-day role at Microsoft "to spend more time on his work at the Bill & Melinda Gates Foundation. He served as Microsoft's chairman of the board until February 4, 2014" [3]

March 13

A National Cabinet is created by Scott Morrison

Prime Minister Scott Morrison created a National Cabinet (NC) made up of himself, State Premiers and Ministers, with the intention of managing the COVID-19 response.

- On August 5, 2021 a judge finds the NC is not a 'legitimate' committee of federal Cabinet.

Many COVID-19 responses such as lockdowns, mask mandates and mandatory vaccination have been implemented as a direct result of decisions made by National Cabinet, which states then implement, with the help of their Health Ministers, under their separate emergency powers.

Each State and Territory of Australia are managing the "COVID-19 response" under their own emergency legislation, separate to The Commonwealth. This separates the legal measures away from The Constitution of Australia, and all international human rights treaties under which the federal government has signed, and not the states.

March 13

UK: Goal is to reach Herd Immunity

On March 13, 2020, the UK's chief scientific adviser Sir Patrick Vallance, said the government wants 60% of the population to catch coronavirus to try and create "**herd immunity**" to protect against the virus becoming an **annual crisis**. He "thought the coronavirus was likely to become an "annual virus" and that the strategy was to limit the impact on the NHS but not stop the virus completely."

Three days later Neil Ferguson's Imperial College London's model predictions were released, predicting 260,000 could die **if herd immunity was pursued**. Resulting in "541 scientists criticized Vallance's 'herd immunity' idea", allegedly upon the "fears for the NHS, who are already struggling to meet the demands of an increase in sick patients,". [1]

The Ferguson's computer model suggested that "the new tighter controls could limit deaths to around 20,000."

On May 5, 2020, Ferguson, thinking he was immune, broke his own lockdown rules by escaping to his mistress. He resigned shortly after from his position on the Scientific Advisory Group for Emergencies (SAGE), which Patrick Vallance heads up, along with Jeremy Farrar.

March 13

President Trump declares a National Emergency over COVID-19 pandemic

On Friday March 13, 2020 (US time) President Donald Trump declared a "National Emergency [6] "to combat the coronavirus pandemic, freeing up \$50bn in federal funding" and enacting emergency powers. [1, 2, 3, 4, 5]

March 14

Fear: any surface a source of infection!

There was a massive cleaning frenzy after it was announced the virus could remain on surfaces for 2-3 days and be a point of transmission. Though it is actually limited on most surfaces, is easily neutralized with typical household cleaners, and it's presence doesn't mean it's infectious. At this point it is unknown how much virus is needed to be infectious.

March 15

Spain goes into lockdown

On Saturday evening of March 14, 2020, Spain's Prime Minister Pedro Sánchez addressed the nation to announce a total lockdown effective the next day, for a duration of "15 days". The reason to "attempt to slow the spread of the virus" of which at this time there were 6,271 confirmed cases and 189 people reported to have died from COVID-19 in a population of around 46 million citizens. [1, 2, 3]

From Sunday **March 15, 2020**, 46 million Spanish citizen will be in **lockdown**, and can only leave their homes "to buy groceries and pharmaceutical products, go to the bank or hospital, or to take care of dependents."

Spain would be locked down for 7 weeks, before being locked down again and again.

March 15

Australian COVID-19 death toll reaches 5

National death toll for deaths attributed to COVID-19 hits five.

They were aged 90, 77, 95, 82 and 78.

March 15

Trump, CureVac and Gates

The Trump administration is reported by German paper, to have offered German mRNA vaccine manufacturer CureVac 1 billion euros to secure their work exclusively for the US. [1, 2, 3]

Richard Grenell, the US ambassador to Germany and the acting director of national intelligence, tweeted that the Welt am Sonntag report was "not true."

CureVac has partnered with GlaxoSmithKline and began development of mRNA-based COVID-19 vaccine candidates in January 2020.

The Gates Foundation is the second biggest shareholder of CureVac, the largest is a software tycoon, Dietmar Hopp!

March 15

CDC: PCR test is not fit for diagnosing COVID-19

US CDC released their own PCR test and in their EUA application on page 33 effectively say the test may not be measuring what it is supposed to be measuring! [1]

'Detection of viral RNA may not indicate the presence of infectious virus or that 2019-nCoV is the causative agent for clinical symptoms.'

March 16

France goes into lockdown

On March 16, 2020 French President Emmanuel Macron announced that France is to go into total lockdown. The country's borders closed and socialising outside is banned, people will only be permitted to leave their homes for necessary trips such as going to work or the supermarket.

He declared "we are at war" with coronavirus, "after the number of COVID-19 cases "doubled every three days" to more than 5,000 people", 127 people have died. Similar lockdowns are already in place in Italy (March 9) and Spain (March 15)

March 16

Erroneous "Imperial Model" is used to "justify" lockdowns

On March 16, 2020, the Imperial College's epidemiological modelling team led by Prof. Neil Ferguson, released their Report 9, which gave a "modelled" prediction for UK & US's expected death toll from SARS-CoV-2 infection with no pharma-intervention (aka vaccine) being available, predicting **40 million deaths**.

Unmitigated predicted deaths in 2020:

UK: 510,000

US: 2,200,000

Based on this "Imperial Model", isolation of "cases", home quarantine and social distancing was recommended to mitigate the predicted losses, but Imperial stressed it **did not consider** the wider social and economic costs of suppression, which will be high'.

Unlike Sweden who used a different model, instead partnered with their population and did not lockdown. [3, 4, 5,11]

US Health officials used this mathematical model to justify lockdowns, but a "cost-benefit calculation – a basic requirement for pretty much every public health intervention – was never made". [8]

Forced lockdowns and quarantining the healthy **has never before been done** in history, it is not based on science only a predicted model and inspired by the CCP. At this time there was no current scientific support for such NPIs, and early treatment options were being revealed by frontline doctors successfully treating patients.

Nine days later, after UK lockdowns were in place, an Oxford epidemiologist Sunetra Gupta and others [8] criticized the model, Ferguson then admits he was wrong [1, 2, 6, 9], or Not! Gupta made the assumption that the IFR was 0.1%, Ferguson assumed IFR was 0.9%! Others too have criticized the "totally unreliable" coding. UK death predicted at **510,000** if no action taken to slow the virus, the revised prediction was reduced to **20,000** of which most in elderly who likely will die any way, a huge difference. The stats are in line with a bad flu season!

Ferguson in May 2020, breaks his own lockdown rules and escapes home to visit his lover. He resigned from his SAGE position shortly after.

His fellow modelers call him "The Master of Disaster" [7]

Ferguson *et al* have a trail of failed predictions [10]:

- **2009**: The swine flu case fatality rate was est at 0.4%, predicting 65K deaths in UK. *Actual*: only 457 people died in UK
- **2005**: Predicted 200 million to die from bird flu. *Actual*: only 282 people died worldwide b/w 2003-09
- **2002**: Predicted 50-150,000 people could die from BSE (mad cow disease). *Actual*: 177 deaths in UK.
- **2001**: Suggested massive culling of non-infected animals for Foot & Mouth scare, leading to 6 million animals killed. Experts claimed his model was severely flawed!

March 16

US goes into lockdown for “15 days to slow the spread” , Stockmarket crashed

On March 16, 2020, after spending the weekend with his public health advisors, Dr Anthony Fauci and Dr Deborah Birx, with President Trump, in a press conference announced the US will go into lockdown for 15 days to get “people separated” to get the virus contained or to “flatten the curve”. The “**15 days to slow the spread**” communication [5]. Dr Birx referenced the UK Model of social distancing as justification for such extreme measures. [1, 2, 4, 6]

“This press conference is what unleashed the political panic. States all over the country locked down.”

Never before had healthy people been locked down or quarantined, but Birx pushed for this. There was no science to support this non-pharmaceutical measure to control a respiratory virus, as revealed in an October 2019 WHO report. [It failed]

On March 12, 2020 President Trump misread the teleprompter saying “that the travel ban would include goods” triggering the first stockmarket fall (Black Thursday), then on Monday March 16, 2020 following the announcement of the lockdown plan, the second **stock market fall** was triggered and the market crashed 3,000 points, the largest point drop in history.

[3 years later 2023 – 7, 8,]

March 16

WHO pushes “test, test, test”

On March 16, 2020 at a media briefing the WHO Director-General sent out a message that

was spread through headlines around the world. [1, 2, 3]

“We have a simple message for all countries: **test, test, test**. Test every suspected case.”

Testing reportedly is “the only way to really understand how much the coronavirus is spreading” because so many people, allegedly, do not experience symptoms.

Out of this testing frenzy, cases of COVID-19 positive people (not necessarily symptomatic) soared, and each test became a case statistic adding to the cumulative tally COVID-19 "CASES".

The PCR was the test used to determine a "case" and it was considered globally as the "gold standard" for diagnosing/determining a "case" statistic. [4]

Death rates did not follow the massive rise in "cases".

In students: "nobody is dying from these cases."

March 16

Big Tech release joint statement on censorship

Big Tech giants (Facebook, Google, LinkedIn, Microsoft, Reddit, Twitter and YouTube) released a joint industry statement aimed at "combating fraud and misinformation about the virus", elevating "authoritative" content (WHO, CDC, HHS) on their respective platforms, and the sharing of critical updates in coordination with government healthcare agencies around the world.

The "moderators" on these platforms deleted and censored many independent voices, no matter their career expertise. They claim to follow the science, but the scientific method actually requires open, transparent discourse, to throw ideas around! [1, 2]

As populations seek out free speech platforms, alternate social media and video sites have increased in popularity such as Gab, Gettr, Telegram, Bitchute and Rumble.

March 16

Worlds first antibody test for SARS-CoV-2 available

BioMedomics has developed and launched one of the world's first rapid point-of-care lateral flow immunoassays (antibody test) for the diagnosis of 2019-nCoV novel coronavirus infection, it could be used "for rapid screening of carriers of the virus that are symptomatic or asymptomatic". As mentioned by Dr James Lyons-Weiler this test has been available since February 2020 seemingly unbeknownst to Dr Fauci. This lateral flow combined antibody test rapidly detects both early marker and late marker, IgM/IgG antibodies in human finger-prick (capillary) or venous whole blood, serum, and plasma samples. It takes 15 minutes for a result compared to PCR test which are greater than 1 hour in a lab. It can be used for rapid screening of carriers of the virus that are symptomatic or asymptomatic, though on 16 March 2020 the FDA restricted it's use to lab and hospital settings only – forcing people to exit their home to test!

March 16

Moderna/NIH began Phase 1 vaccine trial

On March 16, 2020, the NIH announced the first participant in the Phase 1 study of Moderna's mRNA-1273 vaccine candidate was dosed. A total of 63 days from sequence selection to first human dosing.

In August 2020, a petition was filed to halt the trials and insist that adverse reactions are tracked, and another in November for the efficacy end-points. Also, a FOIA submitted in May 2020 eventually allowed the Phase 1 data to be released to the public with redactions. [1, 2]

NIH, the very group developing and promoting vaccines, NIAID and its employees will personally earn millions from the Moderna vaccines due to their patent ownership. Moderna's COVID-19 vaccine timeline, their very first product.

March 16

Study: Coronavirus spreads quickly and sometimes before people have symptoms – “justification” for extreme measures!

“Infectious disease researchers at The University of Texas at Austin studying the novel coronavirus were able to identify how quickly the virus can spread, a factor that may help public health officials in their efforts at containment. They found that time between cases in a chain of transmission is less than a week and that more than **10%** of patients are infected by somebody who has the virus but does not yet have symptoms.” [1] Or may not ever develop symptoms!

Professor Meyers and her team studied a total of 450 infection **reports from 93 Chinese cities** and “found more than one in 10 infections were from people who had contracted the virus but were not feeling sick.” [2]

The speed of an epidemic depends on two things:

1. how many people each case infects (the **reproduction number**, R0)
2. how long it takes for infection between people to spread (the **serial interval**). A short serial interval is harder to control.

“This provides evidence that extensive control measures including isolation, quarantine, school closures, travel restrictions and cancellation of mass gatherings **may be** warranted,” Meyers said. “Asymptomatic transmission definitely makes containment more difficult.”

The research was funded by the U.S. National Institutes of Health and the National Natural Science Foundation of China.

On April 2, 2020 – The CDC report on a study out of 243 cases in Singapore showing coronavirus transmission can occur 1 to 3 days before symptoms show. [3, 4]

March 17

Paper used to deflects discussion on Wuhan virus “lab leak” origin

Published March 17, 2020, Prof. Kristian Anderson lead author of Nature Medicine paper concludes

“it is improbable that SARS-CoV-2 emerged through laboratory manipulation of a related SARS-CoV-like coronavirus.”

The paper was co-authored by five virologists, four of whom joined Dr Fauci in a Feb. 1, 2020, teleconference.

From the moment the paper was published it was used by the media and platforms like Factcheck.org to “debunk” potential lab origins of the virus and were dubbed a “conspiracy theorist”!

Fast forward to June 2021, after Dr Fauci’s emails are released under FOIA, they reveal that on Jan 31, 2020, a couple weeks before per-print of the Nature paper, Andersen emailed Fauci, and wrote:

“Eddie, Bob, Mike and myself [we] all find the genome inconsistent with expectations from evolutionary theory”...“some of the features (potentially) look engineered.”

The names Bob and Eddie match up with the names who co-authored the paper, which state conclusions to the contrary!

Then add to this, on June 7, 2021, after the FOIA release, it

was reported that Andersen suddenly deleted his Twitter account! NY Times shortly after provided a platform for his defense.

Jeremy Farrar of Wellcome Trust is heavily involved with the virus-origin “misdirection”.

The authors of this “pivotal” virus origins paper “received over \$50 Million in NIAID funding in 2020–21” [1]

March 17

Pfizer & BioNTech announce vaccine collaboration

On March 17, 2020 Biopharmaceutical New Technologies (BioNTech) and Pfizer announced that the companies have agreed to a letter of intent regarding the co-development and distribution (excluding China due to BioNTech-FoSun Pharma agreement) of a potential mRNA-based coronavirus vaccine aimed at preventing COVID-19 infection. The collaboration “aims to accelerate global development of BNT162, leveraging expertise and resources of both companies” and “builds on a 2018 agreement to jointly develop an mRNA-based influenza vaccine”. “The two companies plan to jointly conduct clinical trials for the COVID-19 vaccine candidates initially in the United States and Europe across multiple sites. BioNTech and Pfizer intend to initiate the first clinical trials as early as the end of April 2020, assuming regulatory clearance.”

“On March 13, 2020, Pfizer issued a five-point plan calling on the biopharmaceutical industry to join the company in committing to unprecedented collaboration to combat COVID-19.”

On April 9, 2020 they disclosed additional details of their collaboration with the “aims to rapidly advance multiple COVID-19 vaccine candidates into human clinical testing based on **BioNTech’s proprietary mRNA vaccine platforms**, with the objective of ensuring rapid worldwide access to the vaccine, if approved.”

March 18

FDA Issues industry guidance for conducting vaccine clinical trials

On March 18, 2020 the FDA issued guidance for industry, investigators and institutional review boards conducting clinical trials during the coronavirus (COVID-19) pandemic.

March 18

Bill Gates calls for “digital certificate” to identify vaccination status

On March 18, 2020 on an “ask me anything” Reddit chat, Bill Gates’ states the intended introduction of digital certificates for tracking COVID-19 vaccination status, a suggestion that hits the 666 “mark of the beast” backlash. [1]

*“Eventually we will have some **digital certificates** to show who has recovered or been tested recently or when we have a **vaccine** who has received it.”* states Bill Gates

Three months prior, on December 18, 2019 Gates sponsored quantum dot tattoo technology was published – with the intent of tracking vaccination status, plus his involvement in ID2020.

March 18

Symptoms of COVID-19 infection

Coronaviruses typically causes the “common cold” or other mild respiratory viral illnesses, and historically are highly infectious and mutate regularly. SARS-CoV-2 has features different to normal coronaviruses and symptoms which may appear 2 to 14 days after exposure.

The disease caused by SARS-CoV-2 virus is called COVID-19, which can manifest in a wide range of symptoms from nothing through a broad range of flu-like issues. Four out of 5 had no symptoms, and about **1%** of the population are susceptible to escalated symptoms, generally those predisposed with a weakened immune system. [1]

As most people have no to mild symptoms (meaning their immune system is healthy), the world adopted a test (PCR) to determine if they were statistically “sick”. something never done before in history, especially using a test that is not “fit for purpose”.

US doctors were/are advise by the NIH protocol to do nothing until their patients symptoms have escalated to the point they require hospitalisation, something unprecedented in the any disease action. Independent doctors didn't heed this advice. WHO recommendation on home care and treatment guidelines. The WHO interim guidance document for management of COVID-19 was released 28 May 2020 (stating no early HCQ or corticosteroid treatments) and was in place until 25 January 2021.

Vaccines are already in development, and at this point the objective is to stop human to human transmission. By April 2020 it is known that 80% of people "infected with COVID-19" will experience mild symptoms, strange as they should be infected with SARS-CoV-2.

March 18

Australia declares a Biosecurity Emergency

On 18th March 2020, The Australian Governor-General declared that a human biosecurity emergency exists on the grounds of a threat to public health. The federal government is restricting travel for the purpose of "limiting the spread of the virus," Prime Minister Scott Morrison said. Australians can't exit the country and any people coming into the country are required to adhere to quarantine directions. The Biosecurity Act 2015, when declared, "gives the **Minister for Health expansive powers** to issue directions and set requirements in order to combat the outbreak", effectively "run the country".

"This is the first time these powers under the *Biosecurity Act* have been used."

The emergency has repeatedly been extended on the advice of the Minister for Health and Aged Care for 3 month periods.

In-country aspects of the pandemic control measures, including border control, has been hand-balled to the States. Each state has thus coordinated by enacted their own State of Emergency.

"*This is a **once-in-100 year type event**, we haven't seen this sort of thing in Australia since the end of the first World War, but together we are of course up to this challenge,*" states PM Scott Morrison

March 18

WHO launch their SOLIDARITY clinical trial initiative for therapeutics

On March 18, 2020 the WHO launch their SOLIDARITY initiative, a multi-arm, multi-country coordinated clinical trial effort for potential coronavirus therapies "to help find an effective treatment for COVID-19". It is one of the largest international randomised trials for COVID-19 treatments, enrolling almost 12,000 patients in 500 hospital sites in over 30 countries." [4, 5]

Global Randomised controlled clinical trials focused on hospitalised patients NOT those in an early outpatient setting which was the focus of frontline doctors who were successful in keeping their patients out of hospital.

The success that front line doctors are having [1, 2, 3] is NOT being explored by health authorities in their official trials.

March 19

FDA announces pursuit of drug treatments for COVID-19

On March 19, 2020 the FDA announced they will “Continue to Facilitate Development of Treatments” for COVID-19.

As directed by President Trump the FDA will “continue its work with the public and private sector to ensure the availability of potentially safe and effective life-saving drugs.”

“The FDA has been working closely with other government agencies and academic centers that are investigating the use of the drug **chloroquine**, which is already approved” for other conditions “to determine whether it can be used to treat patients with **mild-to-moderate COVID-19** to potentially reduce the duration of symptoms...[and] ... help prevent the spread of disease. Studies are underway to determine the efficacy in using chloroquine to treat COVID-19.”

“While there are no FDA-approved therapeutics or drugs to treat, cure or prevent COVID-19, there are several FDA-approved treatments that may help ease the symptoms from a supportive care perspective.”

There is no specific mention of out-patient early treatment studies – the focus was on hospitalized patients.

March 19

UK downgrades COVID-19 disease status

On January 10, 2020, “Wuhan novel coronavirus WN-CoV” (COVID-19) was assessed by **Public Health England (PHE)** to be a **high consequence infectious disease (HCID)**, at the time monkeypox, was also on the list. But then on **March 19, 2020** they downgraded COVID-19 to no longer being considered a HCID in the UK. They determined that since January 2020, several features have now changed; in particular, more information is available about mortality rates (overall low), greater clinical awareness and laboratory test being available. [1, 2]

This downgrade came just days after Neil Ferguson releases his “Imperial Model” predicting half a million deaths in the UK – a high mortality, contrary to PHE! Diseases on the HCID list include SARS & MERS.

“Was the quickest way for the government to take control of the coronavirus narrative to have PHE declassify SARS-CoV-2 from its HCID category? ...Was PHE in more control of advising on the pandemic and matters such as PPE while the bug remained classified a HCID?”

Australia classifies COVID-19 as a “quarantinable disease”.

March 19

Key Statements from Australia's CMO

Australia's Chief Medical Officer (CMO) Professor Paul Kelly addresses Australia just after Biosecurity Emergency announcement, to make some key remarks, which were **repeated** often throughout the coming months.

Curiously he opened with the slipped comment "COVID epidemic, or pandemic". He provided 5 practical steps to help stay safe:

1. Wash hands
2. Cough into elbow
3. Don't touch your face.
4. Socially distance 1.5m when possible
5. Stay home if you feel sick

other key statements:

- "very **fearful** moment for Australians".
- "**We're all in this together.**"
- "We are not closing schools"
- The goal is "to **flatten the curve**, to save lives through saving beds and taking the pressure off our healthcare system."
- "...**very few kids get the illness**. Those that get the illness are mainly mild, they don't appear to be transmitting between children – in fact, it's more likely that children will get it from their own parents and other people in their households"
- regarding panic buying: "please do not buy more than you need for anything."
- "We have a very good system of knowing about medicine shortages in Australia"
- "about **80 per cent of patients have a mild illness** and in children it's **almost all children have a mild illness.**"
- "every person that gets this virus will have a different reaction to it."
- At this stage toilet paper and hand sanitizer supplies in Australia are running short – people were bulk (panic) buying.
- "...the head of the World Health Organization made that statement in recent days about **test, test, test** and that's exactly what we're doing."
- "We're still on that trajectory to the best way to **decrease this curve of infection** is to find people that are sick, isolate them, and identify their contacts, close contacts, and isolate them." [so "sick" means a positive test]
- further measures "...people coming back from overseas and **14 days quarantine**... isolating, decreasing the infection that way"
- "...at the moment we're really focusing that testing on where we think the **most likely positives are.**"
- "We [AHPPC] recommended there should be limitations on mass gatherings"

- “ **four square meters per person**”
- “We deliberately over-ordered **flu vaccine** this year”
- To date: “We’ve had those six deaths unfortunately, all in older people. We’ve had some people in ICU, but it’s a very small number.”
- “...almost all of our cases still have come from overseas.”
- “...in the meantime, we’re looking to find our cases, get them to stay at home, to find their contacts, get them to stay at home, and to **flatten the curve**.”

March 19

WHO issues PCR testing guidance to determine a “case” of COVID-19

On March 19, 2020 the World Health Organisation (WHO) issued [1] global laboratory PCR (NAAT) testing guidance to detect suspected cases of COVID-19.

March 21

President Trump highlights HCQ treatment

Dr Zelenko from New York who was successfully treating patients with hydroxychloroquine (HCQ)+ zinc + azithromycin (AZ) wrote to President Trump. [1, 2]

On March 21, 2020, Trump tweeted that HCQ + AZ as a potential treatment and in response received huge media and “expert” backlash, including from Dr Anthony Fauci. [3]

This is a cheap and readily available drug is commonly promoted for malaria prevention even with it’s know potential side effect profile, and Arthritis Australia don’t even consider heart issues as important enough to list on their fact sheet even though the FDA believes it “could cause severe heart problems”.

At that time only 182 COVID-19 deaths were declared in USA.

Hydroxychloroquine has been “restricted” by Australia’s Therapeutics Goods Administration (TGA) since March 2020 on the basis of supply shortages, even though 32.9 million doses were donated.

March 22

State of Emergency Declared in SA

On March 22, 2020, Police Commissioner Grantly Stevens as State Coordinator for the State of South Australia, under the **Emergency**

Management Act (2004), declared a Major Emergency because of “the outbreak of

the Human Disease named COVID-19 within South Australia”, a declaration valid for 14 days.

The extension to this Declaration made on April 2, 2020, (and those there after), was declared valid for 28 days as approved by the Governor (see Section 23(2)(b)).

“When the Prime Minister (Scott Morrison) makes recommendations to the states about restriction guidelines relating to COVID-19, each state must then consider how those recommendations will be applied. They are not enforceable in South Australia until the State Coordinator, Commissioner Grant Stevens, enacts a Direction.

The South Australian Directions apply to everyone living in, and entering, South Australia.”

The Governor of South Australia approves the declaration and extensions every 28 days. (Originally Major Emergencies were 48 hours)

By end of 2020 South Australia had 4 deaths attributed to COVID-19, and 575 cases, and remained in a recurring State of Emergency justified by a “threat”.

March 23

UK goes into lockdown

On March 23, 2020 the UK Prime Minister Boris Johnson made an ‘historic’ announcement that the UK would go into a strict lockdown, a “stay-at-home” order in order to “slow the spread” of the virus. People they must “stay at home” and can only leave home for essential reasons such to shop for basic necessities like food, limits exercise to one form a day, restricts travel only to and from essential work. [1, 2, 3]

“*Without a huge national effort to halt the growth of this virus, there will come a moment when no health service **in the world** could possibly cope; because there won’t be enough ventilators, enough intensive care beds, enough doctors and nurses.*” said Boris Johnson.

As of this date, the BBC reported that there had been 83,945 tests to date, with 6,650 confirmed cases and 335 deaths attributed to COVID-19.

On March 19, 2020, four days earlier, the UK downgraded COVID-19 as no longer a high consequence infectious disease (HCID), yet MERS and SARS are still on the list!

March 23

The Zelenko Protocol announced

Dr Vladimir (Zev) Zelenko wrote “A Report on Successful Treatment of Coronavirus” to all medical professionals around the world.

“**Given the urgency of the situation**, I developed the following treatment protocol in the pre-hospital setting and have seen only positive results.” Dr Zelenko wrote.

With his early treatments he has had “ZERO deaths, ZERO hospitalizations, and ZERO intubations.”

Many Doctors want to collaborate and find solutions, but they are being heavily censored.

Dr Zelenko's fight in retrospect >>>

March 23

Immune Boost Protocol – Letter to President Trump

On March 23, 2020 Dr Shiva Ayyadurai who's PhD studied the modern day immune system, sent a letter to President Trump with an Immune Boost Protocol of a scientifically supported low risk and cost effective solution towards any viral infection – because the body has mechanisms to fight infection.

At this time US doctors were advised by the NIH to do nothing for their patients (except rest and paracetamol) until symptoms escalated, and hospitalisation was required!

Letter to President Trump >>>

March 23

Surprising evaluation of COVID-19 deaths in Italy

Italian health authorities find that “**only 12 per cent** of death certificates” have shown a **direct causality** from COVID-19, while 88% of patients who have died have **at least one pre-morbidity** – many had 2 or 3.

Important to note, Italy has the second oldest population in Europe, the cohort that is the most susceptible to complications from SARS-CoV-2 infection if not treated early.

March 23

British media watchdog warns against harmful coronavirus-related free-speech!

On March 23, 2020 the Office of Communications (Ofcom) who is the UK government broadcasting regulator, released a warning to broadcasters that “Ofcom will consider any breach arising from harmful **Coronavirus-related programming** to be potentially serious and will consider taking appropriate regulatory action, which could include the imposition of a statutory sanction.” [1]

In April 2020 it warned against broadcasting 5G-coronavirus conspiracies.

March 24

Australia's TGA bans Hydroxychloroquine use for COVID-19

TGA Secretary, John Skerritt amended the Poisons Standard to restrict hydroxychloroquine (HCQ) on the basis of “creating demand shortages” and to restrict its use because of “risk of significant adverse effects”.

HCQ is a historically safe, now off-patent, cheap medication, which has proven to be an effective tool for early treatment for COVID-19. [1, 2]

Since this time, global clinical trial conducted with HCQ for COVID-19 have used "lethal doses" of HCQ, timed in late stage illness and only in hospitalized patients compared to the timing, dose and combination with zinc, used successfully by frontline doctors globally. Alarming, health officials have not replicated the successful treatment protocols using HCQ.

The pursuit of a novel COVID-19 vaccine to solve the COVID-19 "health crisis" could NOT be financially justified or allowed to be provisionally registered in record time, if an already registered product and proven treatment protocol was available.

March 24

CDC: "probably" or "suspected" COVID-19 death will be marked COVID-19

On March 25, 2020 [US 24th] the WHO released new ICD-10 codes for COVID-19:

- - o **U07.1** for lab confirmed virus
 - o **U07.2** for suspected or probable virus.

The same day, March 24, 2020 for the US, the CDC sent out Alert 2: New ICD code introduced for COVID-19 deaths, a follow-up from their Alert 1 on March 4, 2020. This ICD document coached US doctors on how the ICD-10 code would be used. If a decedent's death certificate was marked **probably or suspected COVID-19**, any uncertainty will automatically be deemed COVID-19 and they stated "it is **not likely** that NCHS will follow up on these cases".

Thus the US would not use both international ICD-10 codes, their system would default to only U07.1!

WATCH @56:30, as Dr Jensen comments on this the US Death Certificates, plus the incentivizing of hospitals to:

- Influenza pneumonia – \$5,000
- COVID-19 pneumonia – \$13,000
- Ventilated – \$39,000
- [ed patients on remdesivir – 20% bonus on whole hospital bill]

How could this play out:

1. Use PCR to test all patients admitted to hospital.
2. Labs use PCR cycles amplification up to Ct of 45, thus providing a positive COVID-19 diagnosis.
3. Patients get treated using NIH protocol, with is remdesivir and ventilation.
4. Patient has a high chance of dying.
5. Doctor marks death certificate with confirmed or probable death by COVID-19, either way the system will default to COVID-19
6. The hospital is awarded accordingly for COVID-19 treatment.

US Department of health sent doctors a 7 page document on to coach doctors on how to fill in a death certificate!
WHO holds the copyright for IDC codes

March 25

NY Governor orders nursing homes to accept all patients, even COVID-19 positive!

On March 25, 2020 New York Governor Andrew Cuomo ordered **nursing homes** and other long-term care facilities to accept ALL patients from hospitals even if they test positive for COVID-19 – a “dangerous policy.” [1, 2, 7, 10] The elderly and frail residents are known to have the lowest survival rate from the virus.

“No resident shall be denied re-admission or admission to the NH [nursing home] solely based on a **confirmed or suspected** diagnosis of COVID-19.” the directive states [13]

The day after the memo went out hospitals immediately started to discharge patients sending them back into care facilities in order to open up beds for what Gov. Andrew m. Cuomo said “will be a surge in thousands more cases in the next few weeks.” Yet at the time NY had temporary hospitals built in New York (the Javits Centre) and the USNS Comfort medi-ship sat empty in the Hudson River – it remained unused! [8, 9] On April 2, 2020 Gov. Cuomo cried New York only has 2,200 ventilators in stockpile, only enough for about 6 days. [15, 16]

Shortly after on April 22, 2020 it was reported that nearly 9 in 10 patients who were placed on **ventilators** died, especially in patients with hypertension, obesity, and diabetes which were the most common comorbidities. Of the over 65 year age group 97% died if placed on a ventilator. [16]

Ventilator policy was revisited after this report, and possibly on the back of April 1, 2020 New York’s ER doctor Cameron Kyle-Sidell raised the alarm reporting in a viral video that ventilators were not what patients need,

On May 12, 2020 Gov. Cuomo then “unveiled a requirement for hospital patients to test negative for the coronavirus before they can be discharged to nursing homes”, reversing his March directive. This while NY has the highest COVID-19 death toll. [13, 14]

The Department of Health’s “unreasonable” mandate proved to have fatal consequences, nearly half of all COVID-19 deaths in the state occurred in long-term care facilities. [3, 5]

By May 28, 2020 the Dept Health’s directive was deleted from the New York government website following the launch of an investigation by Rep. Elise Stefanik. [4, 6, 11, 12]

By April 2023 new stats reveal the pandemic’s first-year toll at 36,337, was up 21% from what the state had admitted.

March 25

Australia changes death certificate guidelines

On March 25, 2020, the Australian Bureau of Statistics released "Guidance for Certifying Deaths due to COVID-19" for doctors on how to fill in **death certificates for COVID-19**.

They state COVID-19 "should be recorded on the medical cause of death certificate for ALL decedents where the disease caused or is **ASSUMED** to have caused, or contributed to death".[emphasis added]

How will this altered practice affect "death" numbers due to COVID-19 in Australia? Can we trust UK COVID-19 death statistics? Some doctors just put COVID-19 on all death certificates March onward!

March 25

WHO COVID-19 ICD-10 codes released

WHO released new ICD-10 codes for COVID-19 for cause of death surveillance.

- U07.1 COVID-19 – virus identified.
- U07.2 COVID-19 – virus probable or suspected.

March 26

FDA promotes International Regulatory Harmonisation

On March 26, 2020 the FDA encouraged **International Regulatory Harmonisation** "a process where[global] regulatory authorities align technical requirements for the development and marketing of pharmaceutical products....to support early access to medicinal products, promoting competition and efficiency, and reducing unnecessary duplication of clinical testing." Asking them to implement the ICH Guidelines.

The International **Conference** on Harmonisation (ICH) for the Technical Requirements for Registration of Pharmaceuticals for Human Use has been around since April 1990, the FDA is a founding member of ICH.

On October 23, 2015 formally became **The International Council for Harmonisation** establishing ICH as an international association with members, and a legal entity under Swiss law. They are "unique in bringing together the regulatory authorities and pharmaceutical industry to discuss scientific and technical aspects of drug registration...has gradually evolved, to respond to the increasingly global face of drug development, so that the benefits of international harmonization for better global health can be realized worldwide."

March 27

The TNI announce plans to tackle coronavirus "disinformation"

On March 27, 2020 the **Trusted News Initiative** (TNI), an global industry collaboration of major news and tech organizations, which formed in July 2019, announced plans to work “together to rapidly identify and stop the spread of harmful coronavirus disinformation,” using a “shared alert system”. [1, 2, 3, 4, 5]

March 27

US CARES Act – incentivising COVID-19 diagnosis, treatments and COD

On March 25, 2020 the 116th US Congress passed the **Coronavirus Aid, Relief, and Economic Security Act** know as the “CARES Act” which was signed into law on March 27, 2020. [1, 2]

“The CARES Act implemented a variety of programs to address issues related to the onset of the COVID-19 pandemic”, including healthcare waivers. [3]

Through the Centers for Medicare and Medicaid Services (CMS) it provided “incentives for hospitals to use treatments dictated solely by the federal government under the auspices of the NIH. These “bounties” must be paid back if not “earned” by making the **COVID-19 diagnosis** and **following the COVID-19 protocol.**” [4, 5]

The hospital “incentive” payments included:

- A “free” required **PCR test** in the Emergency Room or upon **admission** for every patient, with government-paid fee to hospital.
- Added **bonus payment** for each positive COVID-19 diagnosis [positive PCR test.
- Another bonus for a COVID-19 admission to the hospital.
- A 20% “boost” bonus payment from Medicare on the **entire hospital bill** for use of **remdesivir** instead of medicines such as Ivermectin.
- Another and larger bonus payment to the hospital if a COVID-19 patient is **mechanically ventilated**.
- More money to the hospital if cause of death is listed as COVID-19, even if patient did not die directly of COVID-19
- A COVID-19 diagnosis also provides extra payments to **coroners.**”

March 6, 2020 – the *Coronavirus Preparedness, and Response Supplemental Appropriations Act* of 2020 was signed into law – first piece of US legislation providing \$8.3 billion in funding for federal agencies to use in the response to the COVID-19 pandemic – vaccine development, equipment stockpiling and funding for state governments. [6]

March 18, 2020 the *Families First Coronavirus Response Act* (the FFCRA) was enacted – \$192 billion to small businesses, state and local governments for budget relief. Then came the CARES Act March 27, 2020. [6]

March 27

SA Direction: Aged Care Facilities

Five days previous South Australia declared a state of emergency because of a disease "outbreak" called COVID-19, and today the state coordinator handed down a Direction for Aged Care Facilities, of, amongst other things, a mandatory seasonal Influenza vaccine (that is only 10-60% effective) to be required by everyone before entering an Aged Care facility. Even if it is to visit a loved one.

March 28

WHO claim as "fact" COVID-19 is NOT airborne - stay 1 metre apart

On March 28, 2020 the World Health Organization claimed as "FACT" that the SARS-CoV-2 virus that causes COVID-19 is NOT airborne but "is mainly transmitted through droplets generated when an infected person coughs, sneezes or speaks." [1] "These droplets are too heavy to hang in the air. They quickly fall on the floors or surfaces. You can be infected by breathing in the virus if you are within **1 meter** of a person who has COVID-19, or by touching a contaminated surface and then touching your eyes, nose or mouth before washing your hands." [2]

March 28

FDA grants EUA for Hydroxychloroquine

Hydroxychloroquine is an FDA approved drug which doctors across America are legally able to prescribe registered drugs, off-label, which is different to off-label marketing. [2, @43:20]

On March 28, 2020, the FDA granted Emergency Use Authorization (EUA) to "allow hydroxychloroquine sulfate (HCQ) and chloroquine phosphate (CQ) products donated to the Strategic National Stockpile (SNS) to be distributed and used for certain **hospitalized** patients with COVID-19."

Around 6 weeks later on June 15, 2020, Chief Scientist at the FDA Denise Hinton, revoked the FDA's EUA for both CQ and HCQ curiously following the June 5th retraction of the fraudulent Lancet paper suggesting HCQ causes heart problems. [1, 3]

March 29

Bill Gates wants nationwide shutdown in US

Bill Gates, who is neither a doctor nor a scientist, but a huge financial contributor to global "health" with vested interests in vaccines, says a total nationwide shutdown is necessary to slow the spread of COVID-19 in the US. Until 2020, home lockdown of healthy persons has never been tried in human history to mitigate a disease, it is not backed by any science. Only those with symptoms have ever been quarantined.

March 30

Dr Fauci and Dr Rajeev Venkayya push for a vaccine-only solution

By March 30, 2020, Dr Anthony Fauci is focused on vaccines as the way out of the COVID-19 pandemic, and already alluding to this being an annual “cycle”.

Around this same time Dr. Rajeev Venkayya, who has a vast history with vaccines [2, 3, 4, 5, 6, 7, 8, 9, 10, 11], including with President Bush, was on the phone call with Jeffrey Tucker [12, 13, 14] when pressed about where the virus would go if lockdowns were implemented, he said “**there will be a vaccine.**” Tucker noted at the time that “it would be a medical miracle never before seen to have a shot for a coronavirus that was sterilizing against wild type and all inevitable mutations, and to do it in a reasonable time so that society and economy had not completely fallen apart.” [1]

Note Fauci also emphasizes that Randomized Control Trials (RCT) can “prove” drugs work as opposed to “maybe they’re going to work”. What happens if the experts use a sub-lethal dose of a drug in a RCT (compared to the dose used by frontline doctors), this doesn’t prove the drug is in effective, it just proves the drug has no mortality benefit at that dose!

Dr James Lyons-Weiler breaks down Fauci’s comments in this interview with Doctor Mike. CDC’s flawed test is why US is disproportionately affected compared to other nations!

March 31

Study: PCR tests >33-34 cycles do not have viable virus, person therefore not contagious.

On March 31, 2020, Dr Didier Rault and colleagues from France, published on a pre-print server the results of their PCR study, which showed any test greater than 33-34 cycles did not contain viable virus, and as such the patient would not be contagious. [1, 2]

“Correlation between successful isolation of virus in cell culture and Ct value of quantitative RT-PCR targeting E gene suggests that patients with Ct above 33–34 using our RT-PCR system are not contagious and thus can be discharged from hospital care or strict confinement for non-hospitalized patients.”

The Highwire drove home that PCR tests, amplified greater than 33 cycles, are a false positive result 80% of the time, meaning the test is only 20% accurate for “diagnosing” a potentially infectious person. The presence of viral RNA does not make a person contagious, they could have cleared the virus, have “dead nucleotide” in the sample or their sample could have been contaminated. How many “asymptomatic carriers” were falsely claimed to be a “superspreader”?

April 1

April 2020

April 1

New York Doctor pleads patients need oxygen not ventilators

On April 1, 2020, ER and critical care doctor from New York city, Dr Cameron Kyle-Sidell puts out a plea on YouTube to use oxygen not ventilators. [1]

"We're stressed not only over concern for our own health, but because we're watching people dying of a disease we do not understand. A disease we have never seen before..."

...We are putting breathing tubes in people and putting them on ventilators and dialing up the pressure to open their lungs...its becoming increasingly clear that the pressure we're providing maybe hurting their lungs...it is highly likely the pressure we are using is damaging the lungs of the patients we are putting the breathing tubes in. ...This is how we've treated ARDS for the last 20 years. 2 days ago the Italians came out with a letter stating the same thing, that we are running the ventilators in the wrong way...we can change those protocols. We need to change the protocols. COVID-19 positive patients need oxygen, they do not need pressure. They will need ventilators, but they must be programmed differently"... "The protocols in this country must change...please spread the message."

Dr Kyle-Sidell stepped down from his position a few days later. *"I could not morally, in a patient-doctor relationship, continue the current protocols..."* [1]

April 2

Second wave of COVID-19 across Asia, following restriction easing

On April 2, 2020 it was reported that a **second wave** of COVID-19 cases across Asia occurred following easing of initial early actions. Following the new wave they reimposed measures, which was reported as "a sign that fighting the disease will take much longer than anticipated."

The media report the "lethal threat" will likely remain until a fully tested vaccine arrives, spurring on the "race for a vaccine" with 125 organisations already in the race.

Respiratory viruses have never in human history been contained with the lockdown of healthy people, rebounding was always inevitable.

April 2

Aust. Health Minister approves HCQ

"Australia's Minister for Health, Greg Hunt announced hydroxychloroquine would be made available if doctors wish to use it to treat COVID-19 patients who are in Australian hospitals."

Clive Palmer donated 32.9M doses of HCQ to Australians.

April 3

Australia: Ivermectin shown to kill SARS-CoV-2 virus in vitro

Dr Kylie Wagstaff of Monash University has demonstrated that a single dose of ivermectin, an anti-parasitic drug, can kill SARS-CoV-2 virus within 48 hours in cell culture.

Ivermectin is a cheap, off-patent drug, that is listed on the WHO essential medicines. It has a long history proving its safety and is purchased over the counter in some countries.

An Aussies testimony re ivermectin – HERE

April 3

#FireFauci begins

Dr Shiva Ayyadurai (@va_shiva) started the #FireFauci hashtag in April 2020. Via his YT channel Dr Shiva addressed in videos how Dr Anthony Fauci, the director of NIAID, wasn't using science to support his pandemic measures, he has conflicts of interest and he has neglected to address immune health.

On April 3, 2020 Dr Shiva started a petition to "Fire Fauci" and in 10 days it had received 60K signatures.

The petition in short: "Dr. Fauci's policy, at best, is based on a 1950s outdated 'one-size-fits-all,' non-personalized approach to medicine and public health; and, at worst is derived from a 'fake science' understanding of the immune system..."

June 2021, after Dr Fauci's emails have been exposed, it reveals the truth that in fact the science relating to the virus origins, masks, and more wasn't being followed publicly by Fauci, and thus we see a resurgence into #FireFauci.

April 5

Immunity "badges" proposed by "the bank"!

On April 5, 2020 Edward Dowd heard James Bullard, the Federal Reserve president, state on Face the Nation:

"*due to technology we could have badges that could determine someone's immunity*".

Edward found it suspicious that a Fed president would have such a solution so quickly and about our health? A digital ID being justified by a banker, in the name of “health”!

April 9

WHO: Solidarity Vaccine Trial initiative begins

On April 9, 2020 WHO released their **Solidarity Vaccine Trial protocol** an “international randomized trial of candidate vaccines against COVID-19”, those candidates that meet the WHO’s criteria. To coordinate the evaluation of more than 70 vaccines which are currently in development, and 3 in clinical trial as of April 11, 2020.

This WHO vaccine acceleration initiative is headed by Andrew Witty, former CEO of GlaxoSmithKline. [2, 3]

It is unknown what will happen to global vaccine production and supply if the WHO prioritize the same vaccine candidates as the US Warp Speed initiative! [1]

April 9

NIH begin HCQ Clinical Trial

Only now on April 9, 2020, after pushed by President Trump and after cases peak in the US, does the NIH begin a hydroxychloroquine clinical trial, but they only target **hospitalized** COVID-19 patients.

To date success with HCQ has been shown by frontline doctors in very early treatment with zinc, plus in 2005 NIH trial on SARS virus showed early *in vitro* treatment was necessary for Chloroquine to be effective.

On April 5, 2020, “Vice President Pence announced that a 3,000-person study on the effectiveness of hydroxychloroquine as a COVID-19 treatment would take place at Henry Ford Hospital.” Which turned out to have a mortality benefit.

This is on the backlash over the promotion of HCQ.

April 9

World Health Alliance: Letter to G20

World Health Professions Alliance (WHPA) wrote open letter to G20 Leaders to secure supply of PPE fro frontline healthcare workers.

Following on from a press release March 2020, stating “This crisis should be a wake up call for politicians and societies to make the necessary investment in emergency preparedness.”

Yet Event 201 simulation in October 2019 should have begun to highlighted any issue.

April 9

COVID-19 Emergency Response Act 2020 passed

SA government passed the COVID-19 Emergency Response Act 2020, an “Act to make various **temporary** modifications of the law of the State in response to the COVID-19 pandemic, to make related amendments to the Emergency Management Act 2004, the Payroll Tax Act 2009 and the South Australian Public Health Act 2011 and for other purposes”.

The Act was extended in September 2020, and again in February 2021.

April 9

115 COVID-19 vaccine candidates in pipeline

Research by CEPI’s vaccine R&D team, published in Nature Reviews Drug Discovery, has identified 115 COVID-19 vaccines in development.

April 12

Bill Gates: a vaccine for 7 billion people is the only solution

Self proclaimed health expert, Bill Gates, who has no medical or scientific qualifications, but is a “global health” philanthropist, was interviewed [with seemingly scripted questions] on BBC Breakfast on April 12, 2020 and told us that:

“the thing that will get us back to the world that we had before coronavirus is the vaccine and getting that out to all 7 billion people”

Bill also claimed that “*we didn’t simulate this, we didn’t practice*” yet in October 2019 his foundation was a co-sponsor of a coronavirus pandemic simulation called Event 201!

Bill is pushing for “global cooperation” and more funding. According to Bill the “rich” countries are now experiencing the “second wave” of “very challenging epidemics”, though he predicted the “developing countries who yet don’t have a large number of cases” are likely to be worst hit because “their ability to isolate” and their health systems are far less than the rich countries. “***So the global cooperation is to help those counties***”. [1]

Other quotes by Bill:

“*And of course the vaccine is a protective, to **prevent** you from getting sick*”

“*...so we’re going to have to take something that usually takes 5 to 6 years [to develop] and get it done in **18 months**. There is **an approach called an RNA vaccine**...that looks quite promising...unfortunately the schedule for*

*the [conventional vaccine approach] will probably **not** be as quick as the **RNA platform**, that we’ve been funding directly and through CEPI **over the last decade**.”*

“*...this is such an **unprecedented**, very tough thing to deal with. The people like myself and Tony Fauci are saying 18 months [to develop a vaccine], if everything went perfectly we can do slightly better than that, but there will be a trade off, **we’ll***

*have less safety testing than we typically would have, and so governments would have to decide do they **indemnify the companies**... we just don't have the time to do what we would normally do"*

Safety testing: Gates compares rushed drug approval for HIV [someone who is sick or tests positive] to the safety trade-off of fast vaccine development given to healthy people! *"...this is a **public good**, so those [safety] trade-offs...the regulator says go ahead even though you haven't taken the normal time period"*

*"I do think now, because this has been so dramatic, ahhh, **we weren't ready for this pandemic but I do think we will be ready for the next pandemic**, and using **the new tools of science** [mRNA platform?] that's very very doable."*

The host prompts "...are you optimistic that now...there will be a **different mindset** around the **fears** around viruses and pandemics"

*"...we should be able to have a vaccine in less than a year if we're on standby with the **right** factories and the **right** science..."*

*"...a big missing piece is funding the research **for these type of vaccines**...[jumble!]"*

*"its shocking...how hard its going to be **to get back to normal** life that we had before"*

[Do you think things will go back to normal?] *"Once you have a **safe and effective vaccine** and get that out to all most **all of the people on the planet**, and build the preparatory systems for the **next pandemic**...we will go back to normal and economies will recover...**innovation** will help us not be at such a risk in the years after that."*

Its worth watching the 17 minute INTERVIEW which the "Trusted" BBC have "unlisted" on YouTube.

April 13

US scrap models, are now using real data to make "informed and intelligent decisions"

On April 13, 2020, US Surgeon General Jerome Adams in an interview with Alex Marlow, revealed [@13 min] that the Coronavirus Task Force is now working with **real-time data** about the country [1] They are no longer using predictive models, which are effectively projections based on assumptions when you don't have data. The data means they are looking at what is happening on the ground, so that informed and intelligent decisions can be made about when and where to reopen.

[2, 3, 4]

In addition, Adams admitted that it was a struggle to communicate with some in the establishment media who are frequently anti-Trump.

April 14

CDC case & death counts updated

As of April 14, 2020, CDC **case counts** and **death counts** updated to include both **confirmed and probable** cases and deaths. This change was made to reflect an interim COVID-19 position statement issued by the Council for State and Territorial Epidemiologists (CSTE) on April 5, 2020. The position statement included a case definition and made COVID-19 a nationally notifiable disease. [1, 2]

Allegedly no safeguards were put in place by the CDC “to ensure that the same individual would not be counted multiple times.”

Changes to definitions can cause data spikes which can create unwarranted fear and alarm. “Probable” cases and deaths statistics can inflate the actual issue. Probably means “assumed” [UK, US, Aust] and COVID-19 is still placed on the death certificates as the cause of death.

April 14

WHO: more than half the planet in lockdown, and a vaccine is needed to stop transmission

The WHO Director General, Tedros Adhanom Ghebreyesus, shares that more than half of the planet’s population is currently staying home as part of efforts to halt the virus. [1]

“We know that COVID-19 spreads fast, and we know that it is deadly, ten times deadlier than the 2009 flu pandemic.”

Coronavirus has so far killed 6.4 percent of people who have tested positive for it, including 12 percent of those in Britain.

Regardless of the mitigation efforts put in place, the WHO acknowledged that “ultimately, the development and delivery of a safe and effective **vaccine will be needed to fully interrupt transmission**”.

By May 2020 it is revealed that “early work on some of the vaccine candidates suggests they may not stop infection in the upper respiratory tract — and they may not stop an infected person from spreading virus by coughing or speaking.”

April 15

President Trump freezes US funding to WHO

On April 15, 2020, President Trump stated the US will freeze World Health Organisation (WHO) funding for 60-90 days, pending a formal investigation into the global health agency’s response to the global COVID-19 pandemic.

Trump repeatedly signaled the move after accusing the WHO of having a bias in favor of China.

On July 7, 2020 President Trump took the first formal step toward withdrawing the U.S. from the WHO by submitting a “notice of withdrawal” to the United Nations

secretary-general, making the parting effective July 6, 2021. Withdrawing from the organization requires a one-year notice before becoming final.

On September 2, 2020, Trump cancels \$62M of US funding for World Health Organization, "which was slated to receive \$120 million in the 2020 fiscal year from the United States." In 2019 the US contributed \$450 million, accounting for 15% of it's total budget.

In January 2021, Biden stopped this move and rejoined the US to the WHO.

April 18

One World Together at home virutal concert

WHO raised \$55 million with the 'One World: Together At Home' Global virtual concert. These funds have been designated to "buy lab diagnostics, personal protective equipment and to fund research and development including for vaccines", through the Solidarity Response Fund. [1, 2]

April 19

Peter Daszak thanks Fauci for his "public comments re COVID-19's origins"

Peter Daszak, Director of EcoHealth Alliance, who funded coronavirus research at the Wuhan Institute of Virology, on **April 19, 2020** sent an email to Anthony Fauci, thanking him for helping "dispel the myths" around the virus origins from Wuhan labs!

This information was discovered in June 2021 upon release of Fauci's emails under Freedom of Information.

April 21

UK updates Death Certificate guidelines for COVID-19

On April 21, 2020 the British Medical Association (BMA) changed their guidance to doctors in England and Wales, "on verification and certification of death and cremation for a temporary period during which emergency measures are in place to tackle the COVID-19 outbreak." As a result of the Coronavirus Act 2020, this also indemnified doctors.

Doctors no longer had to be that sure a patient died from COVID-19, "to write COVID-19 on a death certificate", which was "highly irregular".

Like Australian and US, now the UK doctors can "legally" write COVID-19 on the **Medical Certificates of Cause of Death** (MCCD) where it is **assumed** to be from COVID-19. Similarly, for Scotland. [3]

The guidance stated: "In those cases where the doctor is confident on medical grounds that a particular cause of death **is likely** then that should be entered on the

MCCD (Medical Certificates of Cause of Death). Covid-19 is an **acceptable direct or underlying cause of death** for the purposes of completing the MCCD, even without the results of a positive test, and it is important that **likely** Covid-19 deaths are reported as such via the registrar." [1]

This was revoked 2 years later on April 13, 2022, because the "Coronavirus Act 2020 ...was repealed on 24 March 2022". Except "the form Cremation 5, which was suspended during the pandemic, will not be re-introduced after the Coronavirus Act expires and has **now permanently been abolished**"

The removal of the Cremation 5 form, means, "basically if your loved one dies of or with Covid19 they can have their death certified and cremation certified by the same medical practitioner and sent for cremation within hours ...the government have removed your right to see or query that decision before the cremation takes place which in turn removes your right to request a coroner's report or second opinion." [2]

April 21

NIH COVID-19 treatment guidelines – "do nothing"

First archived April 21, 2020, the US National Institute of Health (**NIH**) publish their first set of **Treatment Guidelines** intended "to inform clinicians how to care for patients with COVID-19." The recommendations according to them are based on scientific evidence and expert opinion, based on the strength and quality of the evidence. [1]

The **COVID-19 Treatment Guidelines Panel** included members were appointed by the co-chairs, of which many disclosed affiliations with Gilead, the maker of failed Ebola anti-viral drug remdesivir, a clear conflict of interest.

- "The Panel **does not recommend** the use of any agents for post-exposure prophylaxis (PEP) against SARS-CoV-2 infection outside of the setting of a clinical trial".
- "The Panel recommends ...**no specific treatment** for persons with suspected or confirmed asymptomatic or presymptomatic SARS-CoV-2 infection"
- For management of all illness: "At present, no drug has been **proven** to be safe and effective for treating COVID-19. There are **insufficient data** to recommend either for or against the use of **any antiviral or immunomodulatory therapy** in patients with COVID-19 who have mild, moderate, severe, or critical illness." [2]
- As "evidence" came to hand therapeutics were added to the guidelines.

Frontline doctors believed that no early treatment was inhumane, so they searched the literature and began treating the patient symptoms using repurposed drugs, which have **known safety** profiles for dosages used. The early treatment approach was keeping patients out of hospital, and have held true through the pandemic.

This public health policy of "**no treatment, go home for 14 days, and come back when you couldn't breath**", caused a lot of mortality and morbidity, mostly because the public weren't aware of the early treatment.

Just in one location by May 2022 Dr Tyson's group had treated over 10,000 COVID-19 out-patients with a 99.998% survival rate.

April 23

BioNTech begin Phase I/II human trials

On 23 April 2020 the first 12 study subjects are vaccinated with the BioNTech mRNA vaccine candidate after Germany regulator approves Phase I/II clinical trial. [1]

April 23

Oxford Uni begin Phase I vaccine clinical trial

The first two volunteers, one control (meningitis vaccine) and the other the vaccine treatment, were injected on April 23, 2020 for the Oxford University Phase I human vaccine clinical trials. [1]

The Oxford researchers started screening healthy volunteers (aged 18-55) in March 2020 for their upcoming ChAdOx1 nCoV-19 vaccine trial in the Thames Valley Region. Seven days later on April 30, 2020 Oxford University announces partnership with AstraZeneca to help develop and distribute their COVID-19 vaccine.

April 23

Asymptomatic transmission mode of infection is pushed

As the testing statistics begin to "show" that more people have recovered from COVID-19 infection, and the case fatality rate (CFR), which is inline with a bad flu season, the authorities keep pushing testing [PCR at 40-45 cycles] and now assume that asymptomatic spread is a mode of infection [@25min].

Yet previous information from the CDC and the China Report suggests that non-symptomatic people are "not thought to be the main way the virus spreads."

April 24

FDA warns HCQ could cause severe heart problems in COVID-19 patients

In a press release on April 24, 2020, the FDA "warned providers not to use the anti-malaria drugs chloroquine and hydroxychloroquine to treat COVID-19 patients outside of a clinical trial or hospital setting because the drugs could cause patients to experience "serious heart rhythm problems." [1]

On March 28, 2020, the FDA has granted Emergency Use Authorization (EUA) for the use of "hydroxychloroquine and chloroquine products donated to the Strategic National Stockpile (SNS) to be distributed and used in limited circumstances, such as

for certain **hospitalized patients** with COVID-19.” Thus with this wording on the EUA for an already approved drug, doctors felt they could not prescribe it for out-patients. On Sunday April 5, 2020, “Vice President Pence announced that a 3,000-person study on the effectiveness of hydroxychloroquine as a COVID-19 treatment would take place at Henry Ford Hospital.” Which turned out to have a mortality benefit. By June 15, 2020 the FDA REVOKED the EUA for HCQ on the back of the fraudulent Lancet study (published May 22, 2020) alleging heart problems, but RETRACTED on June 4, 2020.

All official studies were done in hospitalized patients, including the WHO Solidarity trials with excessive dosages, where as success on the ground was in early treatment of COVID-19 in an out-patient setting.

April 24

WHO warns antibodies does not necessarily equal immunity from reinfection

On April 24, 2020 the World Health Organization released a Scientific Brief that warned “[t]here is currently no evidence that people who have recovered from COVID-19 and have antibodies are protected from a second infection.” This comes just as antibody testing kicks off in the US and as some “governments have suggested that the detection of antibodies to the SARS-CoV-2...could serve as the basis for an “immunity passport” or “risk-free certificate” that would enable individuals to travel or to return to work assuming that they are protected against re-infection.”[1, 2, 3]

A few days before it was reported that “Michael Ryan, executive director of the World Health Organization’s Emergencies Program was asked how long a recovered COVID-19 patient would have immunity, he said, “We do not have the answers to that — it’s an unknown,” and added, “We would expect that to be a reasonable period of protection, but it is very difficult to say with a new virus — we can only extrapolate from other coronaviruses, and even that data is quite limited.””

April 24

ACT-Accelerator initiative launched

On April 24, 2020 the WHO launched the **Access to COVID-19 Tools Accelerator** (ACT-A), which is a coalition initiated by CEPI and is structured to accelerate development, production and equitable access to COVID-19 diagnostics, treatments and vaccines. [6]

ACT-Accelerator has four pillars of action, COVAX is the vaccines pillar of the ACT Accelerator, the other three are diagnostics, therapeutics and health systems.

[1, 2, 3, 4, 5]

On September 10, 2020, the ACT-Accelerator Facilitation Council was formally launched. [6, 7]

April 25

SARS-CoV-2 more widespread than estimated

By April 25, 2020 many studies [1] and data observations revealed that SARS-CoV-2 infections amongst the US population was much higher than estimated. Many people tested PCR positive but had no symptoms.

The late 2019 "flu season" in the US was high in incidence and many tests came back negative for influenza. Is it possible SARS-CoV-2 was already circulating in the US population in late 2019, and the positive PCR's were the result of high test amplifications greater than 35 cycles which were just picking up "dead nucleotides", possibly left from a recent past infection?

April 26

Sweden who didn't lockdown, data shows 98-99% cases are very mild infection

On April 26, 2020 former Swedish State Epidemiologist Professor Johan Giesecke spoke with Sky News Australia and warned, like also Dr Kulldorff, that a major lockdown would simply destroy the economy and leave the population **without herd immunity** and permanently vulnerable to future COVID-19 outbreaks. [1, 2] Data out of Sweden, which didn't lockdown but put in place measures to protect the vulnerable – the elderly and frail, said:

*Most people will become infected by this and most people won't even notice. We have data now from Sweden that shows that between **98 and 99% of the cases have had a very mild infection or didn't even realise they were infected....The real outbreak is happening where we don't see it.***

When counties like Australia and New Zealand open up from lockdown you will have more cases. Dr Giesecke says real **infection fatality rate** is unknown but it is around **0.1%** – like maybe a "severe influenza" he says.

The Swedish model has two pillars he said, we only use measures that are evidence based (i.e. washing hands) and social distancing, and the third measure maybe "trust people".

April 27

PCR test with Ct >34 shows no viable virus

On April 27, 2020 a paper published by French Doctor Didier Raoult *et al*, showed that a PCR test resulting from amplifying **34 cycles** or more **does not** have viable virus, meaning the person is not infectious and the test is a false positive.

The paper determined:

- SARS-CoV-2 RNA positivity in patient samples was assessed by **real-time reverse transcription-PCR** [RT-PCR] targeting the E gene.
- We observed a **significant relationship between Ct value and culture positivity rate**
- **No culture was obtained from samples with Ct > 34**
- Our results show that in our system of RT-PCR, we can assess that patients with Ct equal or above 34 may be discharged.

Patients were only told if they were positive or negative, the lab did not report the Ct value. PCR tests had a cycle threshold of 40-45, meaning they did not cut off the cycling until that point, which resulted in many “false positives” COVID-19 “cases”. [1]

April 29

Australia partners with BGI for 10 million COVID-19 PCR tests

The Australian government announced April 29, 2020, that it had accepted 10 million COVID-19 PCR tests kits manufactured by the **Beijing Genomics Institute** (BGI), purchased in a \$200 million deal brokered by Andrew Forrest, the mining billionaire, and his philanthropic arm, the Minderoo Foundation.

Other countries rejected BGI products amid genome security concerns! In 2011, BGI processed 20% of the world’s genomic capacity [1]

April 30

Spike (S) protein has 14 mutations identified – consequential for vaccines

On April 30, 2020 a pre-print paper by Korber et al, (now peer reviewed) had identified 14 mutations in the Spike (S) protein of the SARS-CoV-2 virus. [1, 2] This is highly consequential as the Spike protein “mediates infection of human cells and is the target of most vaccine strategies and antibody-based therapeutics.” Mutations in this region of the virus “may confer selective advantages in transmission or resistance to interventions”

It was noted that this mutation of “Spike D614G is of urgent concern” They first identified G614 mutation in Italy sample on February 20, 2020 where it “began spreading in Europe” and found “when introduced to new regions it rapidly becomes the dominant form” indicating highly transmissible.

Noteworthy also is they found “evidence of recombination between locally circulating strains” in the S943P mutation, meaning an infected person is infected with multiple virus strains, not just one, and the strains can re-combine their genetic material to form new “recombinant” virus strains.

April 30

Bill Gates promotes a new technology, vaccine-only solution - 7 billion doses

On April 30, 2020 Bill Gates who has no scientific qualification, in a blog post, advised the world that a new technology mRNA or DNA vaccine for the entire world was the only solution to get us back to prepandemic normal. [1, 2, 3]

"Our foundation is the biggest funder of vaccines in the world, and this effort dwarfs anything we've ever worked on before. It's going to require a global cooperative effort like the world has never seen." It could be done in "as little as 9 months".

"**Safety** is exactly what it sounds like: is the vaccine safe to give to people? Some minor side effects (like a mild fever or injection site pain) can be acceptable, but you don't want to inoculate people with something that makes them sick."

"**Efficacy** measures how well the vaccine protects you **from getting sick**. Although you'd ideally want a vaccine to have 100 percent efficacy, many don't. For example, this year's flu vaccine is around 45 percent effective." [Well that failed, the vaccinated turned out more likely to get sick, any "protective" effects were short lived]

"... we might end up with [a vaccine] that only stops you from getting sick for a couple months (like the seasonal flu vaccine, which protects you for about six months)."

May 1

May 2020

May 1

Flu vaccine mandatory to enter aged care facilities in Australia

By May 1, 2020, it became mandatory for all aged care workers and visitors (>6mths) to enter an aged care facility in Australia to have received a flu vaccine, this prompted many workers to quit, and families became unable to visit their loved-ones. [1, 2]

The department of health stated that "COVID-19 is a health risk for older people", and the new restrictions are to protect them.

This is just in time to introduce the new flu vaccines grown in canine kidney cells [called **cell culture technology**] instead of the chicken embryos, which is more time consuming. Interestingly, canines are known to harbor coronaviruses [3, 4]

In the UK just months before the "new Flucelvax Tetra jab, from Maidenhead-based company Seqirus" was introduced it "dispenses with the need for eggs. Instead, the virus is grown in huge vats of [modified dog kidney] cells in a plant in North Carolina, in the U.S." Fluad Quad by Seqirus was approved by TGA on September 24, 2019. [product insert from FDA]

Fluad Quad and Fluad Tetra are same product, and in Australia the only market approved for this new product was those over 65 years – the age of those in nursing homes!

The flu vaccine itself results in 0.6% deaths according to manufacturer product inserts [[@47.50](#)].

May 1

SA: Mandatory flu vax to enter aged-care facilities

An national request, made legal in SA by a state of emergency direction required that all aged care workers and visitors to such facility, are to be vaccinated against seasonal influenza in order to enter an aged care facility as of May 1st 2020.

“Receiving a vaccination from April provides optimal protection in the peak period of influenza circulation, usually from June to September in most parts of Australia.” states Health Minister Greg Hunt.

The theory being contracting influenza may make people vulnerable should they also contract COVID-19.

Studies have shown that tri-valent influenza vaccines can increase the risk of contracting a coronavirus – a phenomenon known as virus interference.

May 1

Moderna & Lonza announce worldwide collaboration to manufacture COVID-19 vaccine

Moderna who have never produced a product before, announced on May 1, 2020 that it had signed a 10-year strategic worldwide manufacturing collaboration with Lonza, with US manufacturing to start in July 2020. They plan to co-produce 1 billion doses annually, assuming a 50µg dose administered twice, 28 days apart. [1]

“Under the terms of the agreement, the companies plan to establish manufacturing suites at Lonza’s facilities in the United States and Switzerland for the manufacture of mRNA-1273 at both sites.”

May 3

A Goat and Pawpaw test positive for COVID-19

On May 3, 2020, President John Magufuli of Tanzania said in order to evaluate the quality of imported PCR test kits, the Tanzanian security forces randomly obtained non-human samples, including from a pawpaw, a goat and a sheep and assigned human names. The labs reported the pawpaw and goat as testing positive for COVID-19. The faulty kits meant some people were testing positive for COVID-19 without actually being infected. [1, 2]

In late January 2021 President Magufuli rejected the COVID-19 vaccines, then by mid March dies of “heart complications”.

May 3

US taskforce underestimated the number of asymptomatic cases

On May 3, 2020, Dr. Debora Birx, a member of the US Coronavirus Taskforce, admitted they “underestimated very early on the number of **asymptomatic cases**...I think we’re really beginning to understand there are people that get infected that those symptoms are so low-grade that they don’t even know that they’re infected.” (Could asymptomatic be because in Oct-Nov-Dec 2019, the previous flu season they already were exposed to the coronavirus pathogen and had developed antibodies? [2, 3])

She also acknowledged that “many of those dying from coronavirus have other diseases, such as heart disease or problems with their immune systems,” something that was known for months. “Dr. Birx also reiterated her view that the most important way **to get rid of the virus is with a vaccine.**”

By this stage there had been at least five studies that found the coronavirus has a **fatality rate of less than 1%**, similar to a bad flu season and has never warranted lockdown of a healthy population.

By May 22, 2022 the CDC’s “current best estimate” is that 35% of infections are asymptomatic and the Symptomatic Case Fatality Ratio, is 0.004%. [1]

May 4

EU hosts Coronavirus Global Response pledging summit for vaccines

On 4 May 2020 a fund-raising teleconference conference event, organized by the European Union, brought in monetary pledges from countries around the world (except the US) raising 7.4 billion euros (\$8 billion) for the **Coronavirus Global Response** which went to CEPI, Gavi, The Global Fund, and Unitaid for coronavirus vaccine research, distribution and the newly formed ACT-Accelerator. [2, 3, 4]

The pledging summit was hosted by EU President Ursula Van de Leyen who said “none of this would have been possible” without her friend Victor Dzau of the GPMB (the organization who wrote the report that “started” Event 201). She also warned that it is just the start of an effort that must be sustained over time to beat the disease. [1]

For more than three hours, one by one, global leaders said a few words over video link all stated in some form the need for “**diagnostics, therapeutics and universal access to a safe and effective vaccines.**” [@2:20]

The commission then announced its joining with international advocacy organization **Global Citizen** to launch the ‘*Global Goal: Unite For Our Future*’ a **global pledging summit and concert** for Saturday 27 June, it was hosted by President von der Leyen and raised €15.9 billion. [1] Country leaders appeared to be reading from the same script.

Australian Prime Minister pledged \$352 million.

Notably on May 29, 2020 President Trump withdrew US funding from the WHO, at the same time the pledging summit and concert was announced and Trump was absent from this event.

May 5

FOIA proves SARS-CoV-2 virus has not been isolated

The Victorian Government was asked under the Freedom of Information Act (FOIA) to provide “a document that shows there is a test that 100% positively identifies the causal agent, SARS-CoV-2, and not other coronaviruses”. The government response was “no relevant documents have been located”.

A FOIA request in Canada asking for evidence that SARS-CoV-2 has been isolated, returned “no records responsive to your request were identified.” These null responses, and at least 165 from other global health organizations show that Koch’s Postulates seems to be no longer a requirement by the scientific community to prove that a pathogen (in its physical isolation) is the causal agent for a disease. Today a PCR test of a small fragment of virus genome, when amplified sufficiently, is all that is require to establish “infection” and a thus be a candidate for “transmission”. If the pathogen cannot be isolated, then Koch’s postulates cannot be fulfilled. Is it possible symptoms attributed by COVID-19 disease, could actually be due to other factors such as non-ionizing radiation sickness for example. “Conspiracy Theories” will prevail until the Koch’s Postulate’s shaming has been addressed.

May 9

The Lancet One Health Commission Framework is launched

On May 9, 2020 the article titled “*Reconnecting for our future: The Lancet One Health Commission*” was published by Amuasi *et al* in The Lancet to officially announce the commissions framworkd. The commission was formed a year earlier. At the core of the Commission’s work is the “recognition of several possible approaches to examining the *animal–environment–human interface*” which they “distill into three distinct but interrelated dimensions” [1, 3, 4]

EcoHealth Alliance’s (EHA) **Peter Daszak**, funder of Wuhan Institute of Virology’s coronavirus research is on The Lancet One Health Commission! EHA is stated to be “A leader in the One Health movement which began in 2004” [2]

- “One Health, One World™” movement traces back to 2004 before the rebranding of EcoHealth Alliance in 2010
- The commission members released in 2021 – *One Health as a Pillar for a Transformative Pandemic Treaty – Policy Brief*, by Arne Ruckert et al [5], which seems to have began with a Canadian Public Health paper by Ruckert!

The “One Health framework by Amuasi *et al* (shown in Figure 1) to inform the work of the Lancet Commission on One Health, depicts the systems at this interface in a more connected way. It describes three dimensions of One Health, including the

shared environment, food and food systems and interventions and medicines, each of which play a role in either the emergence of or response to zoonotic disease outbreaks.” [6]

May 13

Oxford monkey study fails to stop viral infection or transmission – but proceed to human trials

On May 13, 2020 Oxford and NIAID scientists published the pre-clinical animal study looking at vaccinated versus un-vaccinated rhesus macaques (monkeys). They “observed a significantly reduced viral load in bronchoalveolar lavage fluid and respiratory tract tissue of vaccinated animals challenged with SARS-CoV-2 compared with control animals, and no pneumonia was observed in vaccinated rhesus macaques.” [1]

But the Oxford/AstraZeneca vaccine in this animal challenge study, “did not provide sterilizing immunity” which is considered the “**gold standard for any vaccine.**” Vaccinated monkeys could still become infected and had viable virus in their nose which could be transmitted and infect others!

Even though “no evidence of immune-enhanced disease following viral challenge in vaccinated animals was observed”, experience with other vaccines tells us that is not a firm guarantee that such will be the case for humans, states William Haseltine Based on the observation that their vaccine could “moderate the disease” they proceeded into human clinical trials.

May 15

“Operation Warp Speed” announced

On May 15, 2020, following March 2, 2020 discussions with pharmaceutical executives, President Trump announced a U.S. public-private partnership, the **Operation Warp Speed** Vaccine Initiative (OWSVI), to accelerate the development, manufacture, and distribution of COVID-19 vaccines, therapeutics, and diagnostics collectively known as countermeasures. With the aim of delivering 300 million doses of a safe, effective vaccine for the entire population of the United States with an effective vaccine “before the end of the year.” [1, 2, 3, 4, 5, 6]

“President Trump’s vision for a vaccine by January 2021 will be one of the greatest scientific and humanitarian accomplishments in history, and this is the team that can get it done,” said HHS Secretary Alex Azar.

OWS is headed by ex GSK’s & ex Moderna’s director Dr Moncef Slaoui, [7] with projects led by:

- **Vaccines:** Peter Marks, M.D., Ph.D., Director of the FDA’s Center for Biologics Evaluation and Research.
- **Therapeutics:** Janet Woodcock, M.D., Director of the FDA’s Center for Drug Evaluation and Research.

- **Diagnostics:** Bruce Tromberg, Ph.D., Director of the NIH's National Institute of Biomedical Imaging and Bioengineering.

At this point Dr Anthony Fauci is not confident a vaccine will be effective. A warp speed vaccine could be deadly.

Eleven days earlier the EU hosted a global pledging event where the US abstained. The statistics are that only 1 in 15 vaccines that enter phase II trials is ever licensed, and the average development time for vaccines is usually measured in decades. [2] On June 5, 2020, OWSVI had chosen 5 vaccine candidates: Moderna, Oxford/AstraZeneca, Johnson & Johnson, Merck and Pfizer, the first three having already received \$2.2 billion in federal funding.

May 18

Australia's curve flattened

CMO Professor Paul Kelly made the statement:

"So, in terms of that flattened curve, it certainly is very flat at the moment".

But lets keep doing what we're doing.

- also "over 10 million telehealth consultations have occurred now in Australia." for 5.6 million patients. "So, a big change to the landscape..."
- "COVID-19 is not the only health problem we have in Australia..."
- comments on "social distancing measures and the 10-person rule"
- "...this is now the time to download the [COVID] app so that that can continue to assist our contact tracing efforts by our disease detectives."
- "...at the national level, **we've ...never suggested** that internal borders in Australia should be closed. That's been a decision by various states..."
- "We're lucky here in Australia that we do have a vaccine-making capability..."
- In terms of conscientious objection, **I'm not in favor of compulsory vaccination...**"
- "I've been very clear about my opposition to wearing masks in public if you're not in a high-risk setting...I don't necessarily support it."

May 18

73rd World Health Assembly – IA2030 endorsed

On May 18-19, 2020 the 73rd World Health Assembly was held where WHO Member States adopted global public health policies such as to "Strengthening global immunization efforts to leave no one behind" and a "Global strategy and plan of action on public health, innovation and intellectual property". [1]

The **Immunization Agenda 2030 (IA2030)** was endorsed. This "strategic proposal envisions a world where everyone, everywhere, at every age, fully benefits from vaccines to improve health and well-being."

Member States also “requested the Secretariat to continue its support for WHO’s *Global Influenza Strategy 2019–2030*” which was launched March 19, 2019. IA2030 is planned to roll out through 2021.

May 22

CDC: Infection Fatality Rate is 0.26%

On May 22, 2020 the CDC released pandemic planning data which reveals that they estimate the **fatality rate for COVID-19 at 0.26%**.

Here’s how it works. The CDC data estimates that 35% of coronavirus infections are **asymptomatic**, and their new “best estimate” for the case fatality rate amongst **symptomatic** patients is 0.4%, quite a bit different to the WHO’s 3.4% fatality rate estimated on March 4, 2020. [2, 3]

A PJ Media article does the math: “According to the CDC’s own current best estimate data the **case fatality rate (CFR)** of the coronavirus is **0.4%**. And that’s just amongst **symptomatic cases**, which, the CDC estimates, is 65% of all cases. This means the CDC estimates the **Infection Fatality Rate (IFR)**, that being the fatality rate for all infections across all age groups, symptomatic as well as asymptomatic, **is approximately 0.26%**.”

This is the “biggest reason to end the coronavirus lockdowns” and go back to normal. Swiss Policy Research shows the the global IFR statistics ranges from 0.20% to 0.68%, but in all **ages under 70 years of age the fatality estimate is 0.04%**. and compared to the Delta variant, the **Omicron variant** has a 90% lower death rate.” Also by Sep 2022 the data shows Australia’s median age of death is 86 yrs and US is 78 years.

May 22

Uni Oxford begin Phase II/III vaccine clinical trial

University of Oxford researchers have begun recruiting for the next phase in human trials of a COVID-19 vaccine 10,260 adults and children at partner institutions across the country.

Adult participants in both the Phase II and Phase III groups will be randomised to receive one or two doses of either the ChAdOx1 nCoV-19 vaccine or a licensed vaccine (MenACWY) that will be used as a ‘control’ for comparison.

May 22

PCR positive with Ct >24 do not have viable virus

In a study published May 22, 2020 by Bullard et al , in *Clinical Infectious Diseases*, it was found that out of 90 PCR positive samples, there was no viable viral growth in samples with a **Cycle Threshold (Ct) > 24**. [1]

All tests over Ct of 24 should have been disregarded according to this evidence. The tests can't tell the difference between active and inactive RNA matter. All laboratories should report the number of cycles they used to return all positive results, to gauge it's accuracy.

A few weeks after the Bullard study, on June 8, 2020, the Australian government first released their "Public Health Laboratory Network Guidance on Nucleic Acid Test Result Interpretation for SARS-CoV-2".

By July 13, 2020 they sent out an update "to clarify the terms '**false positives**' and '**inconclusive results**'", where they are fully aware that off-target (non-specific) material could potentially be amplified, and this type of false positive occurs with high Ct. Though "usually 35-45 cycles are undertaken", which anything over 40 (according to this guidance) is high!

It states, "To comply with **TGA requirements**, the laboratory must report the results according to the commercial manufacturer's recommendations." This means every person who had a PCR test, the lab should have recorded the Ct value,

May 22

Two HCQ scientific papers retracted from 2 peer review journals – UNPRECEDENTED!

The media promoted a Lancet study that purported to show that hydroxychloroquine (HCQ) or chloroquine were toxic to the hearth stating "each of these drug regimens was associated with decreased in-hospital survival and increased frequency of ventricular arrhythmias when used for treatment of COVID-19".

The fraudulent paper that discredited a potential early COVID-19 treatment (HCQ) was published on May 22, 2020 in The Lancet, a peer reviewed journal, and by June 5th it was **retracted!** [1, 2, 3, 4]

The WHO used this published paper to justifying halting their HCQ SOLIDARITY arm of their trials, and so did Australia's Department of Health, as FOI request revealed. Other papers still reference this fraudulent study.

The company Surgisphere, which provided the data for the now retracted paper was heavily scrutinized, including by Australia, resulting in another peer review journal, NEJM also retracting a paper that used this same company.

Surgisphere has since been removed from the traditional internet [5, 6]

but archives can be found. The doctor who started the company is suspect, and his trademarked product QuartzClinical referenced on the website was registered in only March 2020 and abandoned 9 month later!

How did all this escape the alleged internal peer review process of two medical journals?

May 22

COVID-19 vaccine developers have a problem – not enough sick people

As early as May 22, 2020 the lack of infectious cases of COVID-19 was identified by Adrien Hill from Oxford's Jenner institute when he said to Science mag "...we're beginning to run out of **good trial sites to do vaccine efficacy studies**—even the U.S. is plateauing," ...People are going to fight for that site to get the vaccine tested before it runs out." The disappearance of Ebola cases in November 2015 was a major problem for vaccine developers!

Then on June 10, 2020 the Washington Post reported that Oxford University officials who were rushing to "develop coronavirus vaccines are alerting governments, health officials and shareholders" that **declining numbers of new infections** may be getting too small to quickly determine whether vaccines work!

"Even as new cases are growing worldwide, **transmission rates are falling** in Britain, China and many of the hardest-hit regions in the United States — the three countries that have experimental vaccines ready to move into large-scale human testing in June, July and August."

Volunteers need to be exposed to someone infected with the virus to determine if the vaccine works.

May 26

Australia's first human vaccine trials begin

U.S. biotechnology company Novavax, via Nucleus Network, began injecting 6 Australian volunteers with their nanoparticle encapsulated "spike" protein recombinant coronavirus vaccine candidate (Novavax NVX-CoV2373) in Melbourne on Tuesday 26 May 2020. [1, 2, 3]
Novavax trials received funding support from CEPI.

May 27

NGO launched the "WHO Foundation"

WHO Foundation based in Geneva is an NGO founded by Prof. Dr Thomas Zeltner, who's launch was announced at the WHO Covid-19 press conference on May 27th, 2020.

www.who.foundation/en

At first glance you'd think this organization was part of the World Health Organization, but it is legally independent, though bound by an Affiliation Agreement. It is a non-governmental, not-for-profit, organization that was set up as a grant-making foundation to support and complement WHO's resource mobilization efforts to address the most critical global health issues.

The WHO Foundation jointly manages the COVID-19 Solidarity Response Fund (SRF) and the COVAX ACT Together Fund both with the UN Foundation (an NGO founded

by [CCN magnate](#)). The former fund was initially it was set up with the [Swiss Philanthropy Foundation](#).

The WHO Foundation appointed former Gates Foundation senior advisor, [Anil Soni](#) as its CEO effective January 1, 2021.

June 1

June 2020

June 1

TOGETHER trials started by Gates Foundation

The [TOGETHER trials](#) were initiated in June 2020 ([archives](#)), with the Bill & Melinda Gates Foundation provided seed funding. By September 21, 2020 Cytel had designed the “novel platform” to coordinate the **COVID-19 TOGETHER clinical trials** looking at outpatient treatments. As of September 2020, “only 6 of 2000 trials are focused on early stages” for treating COVID-19 for a disease where “only 5% of coronavirus cases are considered severe”! [4]

The protocol published in October 2020 stated “An Adaptive Randomized [Platform Trial](#) to Investigate the Efficacy of Novel Agents for Treatment of SARS-CoV-2 Infection Among High-Risk Outpatient Adults in Low and Middle Income Countries”, which was to be conducted in Brazil and South Africa. [1] Initially looking at four different treatments against a “**placebo**” of **vitamin C** [5, 6] (which should itself be a treatment!)

The Brazilian clinical trials were sponsored by cardiovascular “card” research, and started January 27, 2021. [9]

Protocol versions – [HERE](#)

Trial publications – [HERE](#)

The Cytel “platform” approach is designed to find effective treatments quickly but also to “eliminate poorly performing therapies” – as they did for hydroxychloroquine and ivermectin etc.

Cytel designed the trial tracking software [3], and the trials were funded by [FTX Foundation](#) [7, 8, 10], the Bill & Melinda Gates Foundation, the Rainwater Charitable Foundation, FastGrants, and UNITAID, [2] Both FTX (now bankrupt) and UNITAID sponsored the TOGETHER trials sometime after Dec. 3, 2021 and by March 2022.

June 2

Aust: No effective treatment for COVID-19

We are 4 months into a declared pandemic and Australia’s Health Minister Greg Hunt stated:

“There is currently no vaccine or proven and effective treatments for COVID-19.”

Yet American doctors are repurposing drugs, with known safety profiles for the doses use, to effectively treat COVID-19 symptoms to prevent hospitalization. This off-label use of registered drugs, used within their known dosage is a common practice by US doctors and supported by the FDA.

June 2

Fauci: coronavirus vaccines may not provide long-term immunity

When talking with JAMA Editor Howard Bauchner, Dr. Anthony Fauci says there's a chance the coronavirus vaccines may not provide long-term immunity, if COVID-19 acts like other coronaviruses, "it likely isn't going to be a long duration of immunity". [1]

At this point "scientists still don't fully understand key aspects of the virus, including how immune systems respond once a person is exposed."

At the same time member of the boards of Pfizer and former FDA commissioner, Dr Scott Gottlieb says expect COVID-19 vaccine to be seasonal like the flu shot.

June 3

Prince Charles & WEF launch "The Great Reset"

On June 3, 2020 The Prince of Wales' Sustainable Markets Initiative, in partnership with the World Economic Forum (WEF) launched a major global initiative, #TheGreatReset. Prince Charles and Klaus Schwab openly advertised and launched "The Great Reset". It is no conspiracy theory. Even Time Magazine, is helping it's promotion to reset global capitalism and establish a new world order. [1, 2, 3, 4, 5, 6, 7, 8, 9, 10]

"The pandemic has provided an **opportunity for a reset**" they claim. An opportunity to "**build back better**" they claim. [11, 12]

At Davos 2021 "The Great Reset" was the focus, "a commitment to jointly and urgently build the foundations of our economic and social system for a more fair, sustainable and resilient future" [1] Digital ID , vaccination passport featured in the 2021 Davos Agenda. [2]

June 4

Global Vaccine Summit – Launched IA2030

On June 4, 2020 the UK hosted the GAVI virtual Global Vaccine Summit 2020 where world leaders committed to “equitable immunization coverage and global health security in the face of the COVID-19 pandemic”.

- Australia pledged \$244 million to Gavi.

At the summit Immunization Agenda 2030 (IA2030) was launched, the new decade of vaccines, the “**utopia**” goal from 2015 , to achieve “a world where **everyone, everywhere, at every age**, fully benefits from **vaccines** for good health”.

June 5

Warp Speed chooses 5 vaccine candidates

On June 5, 2020, the **Operation Warp Speed** (OWSVI) had chosen 5 vaccine candidates: Moderna, Oxford/AstraZeneca, Johnson & Johnson, Merck and Pfizer, the first three having already received \$2.2 billion in federal funding. [1, 2]

Former FDA chief Scott Gottlieb, and Pfizer board member, pointed out Sanofi and Novavax were absent from the list. Paul Offit also questions “the lack of diversity in the five selected vaccines, which rely on just three different technologies.” An unnamed source connected to the selection process said “It’s been so chaotic, and it’s not even transparent to those of us who are trying to help out.”

“The move appeared to signal that Warp Speed had changed its initial plan of doing comparative studies of 14 vaccines it said last month that it had singled out from the more than 100 candidates in development at companies and universities.”

June 8

Australia PHLN guidance, up to 45 cycles for PCR tests

From June 8, 2020, the Australian Government’s **Public Health Laboratory Network** (PHLN) put out guidance on Nucleic Acid Test Result Interpretation for SARS-CoV-2 in the laboratory. They state that with PCR tests for SARS-CoV-2 “usually 35-45 cycles are undertaken”, and make the comment that over 40 can risk false positive.

June 9

WHO: Asymptomatic transmission “very rare” – then backtracks

On June 9, 2020 Dr Maria Van Kerkhove, head of the World Health Organization’s emerging diseases and zoonosis unit, said **transmission** of the coronavirus by people who aren’t showing symptoms (asymptomatic) is “**very rare**”, then backtracks, “much is still unknown”! [2]

Modelling studies estimate as many as 40% of “infections” could be transmitted by people “who have the virus [PCR positive!] but no symptoms”. [1]

June 15

Talk begins to lower the expectation of a COVID-19 vaccine end goal

Around mid June 15 (May to July 2020) as animal studies and Stage 1 & 2 COVID-19 vaccine trial results start to trickle in, talk begins to **lower the expectation of the COVID-19 vaccines**, from preventing infection or transmitting of the virus to protecting you from serious illness, hospitalization or death – a different end point. [1] All initially fueled the only solution to provide is a “preventive shot as the route to return to pre-pandemic life.” This is curious since most people have no symptoms and need to get a PCR test to determine if they a “positive” for the virus!

Traditionally vaccines create neutralizing immunity to stop the virus from infecting you, making you sick and your ability to transmit the pathogen. That is the reason health authorities call them “immunization programs” as they are meant to provide “sterilizing immunity”. Though influenza vaccines don’t meet that expectation so they begin comparing a COVID-19 vaccine to a flu shot.

“Experts say such a product [that only stops severe symptoms] would probably be widely used if approved, even if that’s as much as it contributes, until a more effective version comes to market.”...“Vaccines need to protect against disease, not necessarily infection, said Dennis Burton, an immunologist and vaccine researcher at **Scripps** Research in La Jolla, California.”

The public now needs to be re-trained as to what “protection” means!

A new gene technology product, categorized as “vaccines” began human trials in 2020, but as the data emerges the scientist realize it can’t deliver on the expectations of a traditional vaccine.

June 15

FDA revokes EUA for Hydroxychloroquine

Emergency Use Authorization (EUA) for hydroxychloroquine’s use for COVID-19 was revoked by the FDA “after trials showed it was ineffective and the FDA got reports of heart problems caused by the drug.” [1, 2] EUA was granted on March 28,2020.

The clinical trials used “potentially lethal” doses of hydroxychloroquine in hospitalised patients, contrary to use by frontline doctors who use the drug early, in combination with zinc and in normal, lower doses. [3]

The heart arrhythmia problems were reported in a fraudulent paper published in The Lancet on May 22, 2020 which was retracted just 14 days later.

June 30

ICAN demands the use of inert placebo control in COVID-19 vaccine trials

After a petition from ICAN to the FDA demanding the use of an inert placebo control in the COVID-19 vaccine safety trials, the FDA on 30th June issued emergency guidelines to the industry ensuring all safety trials use a placebo control.

The petition was sparked because AstraZeneca's safety trials did not use a placebo, but a meningococcal vaccine (Menveo) [1], so ICAN sued the FDA to supply the safety studies on the **Menveo vaccine**, in case they intended to approve it as an active control for US EUA products.

On July 17, 2020, ICAN sued the FDA in federal court demanding the entire clinical trial report for Menveo, just in case the agency was considering permitting this vaccine as a control in the AstraZeneca trial to be conducted in the United States. [1] "On July 20, 2020, ICAN also filed a forceful amended petition with the FDA thanking it for requiring a placebo control group but demanding, among other things, that it also require that these clinical trials track all adverse events during the entire duration of the trial – not just for a limited time period."

"Not long thereafter, in mid-September, in a highly unusual move, the full clinical trial protocols for the COVID-19 vaccines for which ICAN filed its petitions were released to the public." [1]

June 30

FDA sets a low efficacy requirement of 50% for COVID-19 vaccines, WHO sets 70%

In a press release on June 30, 2020 the US FDA issued guidance to manufacturers "help facilitate the timely development of safe and effective vaccines to prevent COVID-19" in order to win regulatory approval. [7]

"The guidance also discusses the importance of ensuring that the sizes of clinical trials are large enough to demonstrate the safety and effectiveness of a vaccine. It conveys that the FDA would **expect** that a COVID-19 vaccine would **prevent disease** or **decrease its severity** in **at least 50%** of people who are vaccinated."

Also, the vaccine companies would be required to monitor the vaccine's performance after approval for any emerging safety problems. [1, 2, 3]

"If you had a 60 or 70 percent effective vaccine and everybody took it, you might actually be reaching toward herd immunity and potentially then dampen down this pandemic," Dr George Poland of the Mayo Clinic said on Nov 3, 2020.

As a comparison the **flu vaccine effectiveness** which "can vary widely from year to year has been anywhere from 20% to 60% effective over the last decade.

According to GlobalData on April 9, 2020 the WHO sets two vaccine success benchmarks for vaccines. "Preferably, the vaccine should have at least a 70% efficacy on a population basis with durability for at least a year for reactive use in an outbreak and/or protection for those with a high ongoing risk. The lower success bar is about 50% efficacy with at least a six-month durability". [4]

They go on to state: "The 50% success bar, while low, is acceptable, as it would likely be enough to ease the pressure on frontline healthcare resources but it may not be high enough to reach herd immunity." [6]

FDA commissioner Dr Stephen Hahn in a JAMA interview on July 30, 2020, stated "We all want a vaccine tomorrow. That's unrealistic. And we all want a vaccine that's 100% effective. Again, unrealistic," Hahn said "we said **50%**, and the reason was because we felt that that was **a reasonable floor given the pandemic.**" [5]

A couple of days earlier, Dr Anthony Fauci said he would like 60% meaning on average the vaccine reduces a person's risk of SARS-CoV-2 **infection** by 60%.

June 30

ICAN demands FDA mandate inert placebo controls in COVID-19 vaccine clinical trials

Upon finding out **AstraZeneca** COVID-19 Vaccine clinical trials were not using a placebo control, but a meningococcal vaccine (Menveo) as a "control", the Informed Consent Action Network (**ICAN**) a non-profit organization, petitioned the FDA to mandate **inert placebo** control groups in US COVID-19 vaccine clinical trials, as well as track the safety for the long-term in properly sized trial groups. [1, 2]

Nine days after ICAN filed its initial petition, on June 30, 2020, the FDA changed course and issued emergency guidance to industry that all COVID-19 clinical trials must use a placebo control.

Later ICAN sued the FDA to supply the safety studies on the Menveo vaccine, in case they intended to approve it as an active control for US EUA products.

Many don't realise using another vaccine for the "control" group to assess "vaccine safety", is a common and accepted practice.

They don't use inert placebo controls. This is why post marketing surveillance is so important, but the authorities have failed in their duty.

July 1

July 2020

July 1

Africa: says no to being "guinea pigs"

Unknown to the western world is that African's has a history of being experimented on by the WHO without consent, and in July 2020 they stood up against the first COVID-19 vaccine trial in their country by burning their masks in protest. The University of Oxford vaccine trial began in Johannesburg in June 2020. [11:30] "The people chosen as volunteers for the vaccination, they look as if they're from poor backgrounds, not qualified enough to understand" protest organizer Phapano Phasha told The Associated Press ahead of the event. "We believe they are manipulating the vulnerable." [1]

Anti-vaccine sentiment in Africa is “the worst I’ve ever seen,” said Seth Berkley the CEO of the GAVI vaccine alliance.

“If you want to test, test in the areas which they call the epicenter of the world”

demonstrator Sean Goss said

“We not guinea pigs” and *“No safe vaccine”* was chanted.

July 3

Budesonide: Treating COVID-19 Symptoms

Emergency room doctor, Dr Richard Bartlett alerted the world to his success in treating breathing issues of COVID-19 suspected patients with nebulized budesonide – a known asthma drug that happens to be off-patent and as such cheap.

January 2021, clinical trials by Oxford University now proves the benefits and safety of budesonide.

Find out more >>>

July 10

International German Corona Investigation Committee begins

The Corona Investigative Committee comprising 4 lawyers led by German-American lawyer Reiner Fuellmich was initiated. Weekly hearings with international experts have taken place in order to document the scientific, political, psychological and economic connections surrounding the global COVID-19 pandemic events, capturing it in video testimony. [1, 2, 3]

July 14

WHO hires PR firm to influence opinion

WHO hires the PR firm Hill and Knowlton Strategies LLC to help ‘amplify’ the message. [1]

Soft power influence (through stealth):

- Celebrities from around the world to perform virtual “One World Concert”
- Celebrities used in ‘#PasstheMic to the experts” message.
- Religious leaders.

July 16

Fauci admits PCR amplified above 35 cycles is just “dead nucleotides”

On July 16, 2020 Dr Anthony Fauci is interviewed by This Week in Virology (TWiV) and states that high PCR cycle thresholds above 35 is just picking up “dead nucleotides” – meaning the person is not infectious. [1]

Around the world, labs were instructed to amplify PCR tests of nasal swabs for SARS-CoV-2 up to 45 cycles – proven to create masses of false positives or turning healthy people into “a ‘silent epidemic’ of asymptomatic infections” – except they’re not asymptomatic, nor infectious [2]

July 21

UK experts warn the virus is here to stay – endemic

On July 21, 2020, in an address to the House of Commons’ Health Committee, Wellcome Trust Director Sir Jeremy Farrar, stated that although progress has been made, there is no chance of this year’s holiday being like the last. [1]

“This infection is not going away, it’s now a human endemic infection,” ...“Even, actually, if we have a vaccine or very good treatments, humanity will still be living with this virus for very many, many years...[Even] decades to come,” said Jeremy Farrar

“The reality is that this pathogen is here forever, [and] it isn’t going anywhere,” said Sir **John Bell**, University of Oxford

July 29

CDC fails to conduct a vaxxed vs unvaxxed study

In 2013 the **Institute of Medicine** (IOM) issued a report stating that the CDC could and should perform a comparative health outcome study of vaccinated children compared to unvaccinated children using patient information in their Datalink database.

- On June 26, 2020, ICAN issued a FOI request demanding: “All documents in the CDC’s possession which compare the health outcomes of children that have received vaccines with children that have never received any vaccines.”
- On July 29, 2020 the CDC responded: “A search of **our records failed to reveal any documents** pertaining to your request.”

Concluding that the **CDC has not conducted** a study of health outcomes in **vaccinated vs unvaccinated** populations.

July 29

FDA reveal EUA criteria – “No adequate, approved, and available alternative”

Dr. Doran Fink from the FDA explains at the July 29, 2020 ACIP meeting the criteria necessary for the FDA to be able to issue a COVID-19 vaccine with **Emergency Use Authorization (EUA)**.

The key point being that there has to be “***No adequate, approved, and available alternative***”. [@2:57]

July 30

Poll: only 42% Americans would get the vaccine

A Yahoo/YouGov poll was conducted in America between **July 28-30, 2020** which showed that **only 42%** of adult Americans planned to get vaccinated for COVID-19, a number that is decreasing. [1, 2]

The article suggest that Democrats don't trust the safety of a “Warp Speed” vaccine and “Trump supporters” are skeptical of “medical authority and expertise”.

Harvard Global Health Institute director Ashish Jha said “*It's not a vaccine that will save us, It's vaccination.*”! The product allegedly won't work unless 60 – 80% of your neighbours take it.

“For a COVID-19 vaccine to actually **stop the pandemic**, scientists estimate that at least 60 percent of the population — and probably more like 75 or 80 percent — would need to be vaccinated, a number that depends on many factors, including the efficacy of the vaccine itself and how widely the virus has already spread.”

July 30

AstraZeneca becomes exempt of liability in most countries

On July 30, 2020 it was reported that AstraZeneca became exempt of liability “in most countries” for it's COVID-19 vaccine, stating that “[t]his is a unique situation where we as a company **simply cannot take the risk** if in ... **four years the vaccine is showing side effects...**” [@1:56:20]

But it's not actually “unique” as vaccine manufactures have been exempt of liability for all vaccines on the US childhood schedule since 1986.

The phase 3 mRNA COVID-19 vaccines safety trials ended after only 2-6 months – when participants were unblinded, so the saline placebo group had the opportunity to receive the “treatment”. Oxford/AstraZeneca never used a placebo, their “control” group was a meningococcal vaccine (which itself never had a placebo trial, so simply assumed inert!) – so safety would not truly be detectable.

July 30

FDA: COVID-19 vaccine effectiveness threshold 50%

FDA commissioner Dr. Stephen Hahn, in a July 30, 2020 interview with the Journal of the American Medical Association (JAMA) said the FDA would allow a COVID-19 vaccine to pass emergency authorization with an **minimum 50% efficacy**. The reason given the such low threshold was because they “felt that that was a reasonable floor given the pandemic” and they wanted to “give vaccine manufacturers guidance on how to design their clinical trials”, as Phase 3 trials for Pfizer and Moderna began this week. [1, 2]

Hahn said “It’s possible that the U.S. could end up with a vaccine that, on average, reduces a person’s risk of a Covid-19 **infection** by just 50%”

In a statement the “FDA would expect that a COVID-19 vaccine would prevent disease or decrease its severity in at least 50% of people who are vaccinated.”

On July 27, 2020 “Dr. Anthony Fauci has said he hopes the vaccine will have an efficacy rate of at least 60%, meaning on average the vaccine reduces a person’s risk of a Covid-19 **infection** by 60%” ... “**60% is the standard** that you do for the cutoff.” [4]

Experts were quick to point out that even though 50% effectiveness is low, “it could make a difference” just like “the flu vaccine effectiveness can vary widely from year to year, anywhere from 20 percent to 60 percent over the last decade” [3, 5]

Experts said a “vaccine that’s less than 100% effective will still lead to **herd immunity**”, which can only be achieved with neutralizing antibodies!

July 31

US hospitals have financial incentive to inflate COVID-19 deaths

At a government hearing on July 31, 2020 CDC director Dr. Robert Redfield confirmed that United States hospitals have a financial incentive to increase their count of COVID-19 attributed death numbers. [2]

...ultimately, it’s how the physician defines it in the death certificate and ... we review all of those death certificates.

said Dr Redfield

- An additional 20% is added to the hospital bill for COVID-19 diagnosis
- Admissions to hospital for non-COVID-19 reasons, including kids, then test positive for COVID-19 are then treated as a Covid patient and if they die are labelled a COVID-19 death.
- In first 6 mth of 2020 hospitals who reached 161 COVID-19 admissions would “receive \$77,000 per admission on top of what they are already paid” from the Cares Act, but hospitals in states with a late surge they missed out on the funds.
- COVID-19 pneumonia – \$13,000
- Ventilated – \$39,000

Overcoming month it is revealed that automobile accidents and gunshot to the head are classified as death due COVID-19. [2]

In December 2020 Minnesota lawmakers called for “a full audit of Minnesota’s COVID-19 death certificates” as they could be inflated by 40%, which Senator Scott Jensen MD has been aware of the issue for months. [1]

July 31

AstraZeneca promised “not to profit from COVID-19 vaccine”

Geoff Hsu a Biotech Growth fund manager says he isn’t banking on pharma companies making big profits from “emergency COVID-19 vaccines” and expects them to be priced “reasonably” because he believes “companies genuinely want to do the right thing”.

AstraZeneca promised “not to profit from a COVID-19 vaccine during the pandemic,” and others alleged to forgo profits, though Pfizer CEO intends to profit along with Moderna who’ve never before marketed any product.

AstraZeneca, by November 2021, within 9 month start to reap profits, from COVID-19 vaccines. By May 2021, “COVID vaccine profits minted 9 pharma billionaires.”

At this time the WHO estimate 150 COVID-19 vaccines and 200 treatments currently in development.

August 1

August 2020

August 1

Massive freedom rallies broke out in England and Germany

On August 1, 2020 massive rallies broke out in both England and Germany (in fact globally) protesting lockdowns, mask mandates, and the obvious corruption within their government and “trusted” news organizations – overreaching use of “emergency powers”. [@10:40]

“*We are the 99%*” they shout, knowing then that the data showed that COVID-19 was a disease affecting a small subset of the community – the frail and elderly and those with underlying health conditions, the rest get a bad flu at worst and recover. Those who watch the mainstream news likely didn’t hear about the protests or the numbers we massively under-estimated and were continued to be fed “fear”.

August 12

England: COVID-19 designated “cause of death” if a person dies with in 28-days of positive PCR test

On August 12, 2020 Public Health England (PHE) changed their definition of a COVID-19 death to include anyone who dies within 28 days of a positive PCR test. [1] PCR testing appears to be confined to select labs. With Potentially up to 93% may be false PCR positive rate, this change will create a synthetic "case-demic" spike. [2]

August 16

CDC report reveals PCR >33 cycles is likely a false positive

On August 16, 2020 a CDC report revealed their PCR tests amplified to 33 cycles, designated cycle threshold (Ct), detects virus that is **NOT replication competent**, meaning it can not infect or multiply. Over 33 cycles produces false positive "case" statistic.

The New York Times reported the US testing regime advised by the CDC returned a false positive rate over 85%. "Officials at some state labs said the C.D.C. had not asked them to note threshold values or to share them with contact-tracing organizations", labs simply supply a determination of "positive or negative"! [1] Scientists had been attempting to raise the alarm on this "case-demic" for many months prior.

August 18

Plandemic Documentaries launched

The professional documentaries **Plandemic** & **Plandemic Indoctrination** by Mikki Willis connects the dots between media, the pharma-medical industry, politics and the financial industry to unmask the major conflicts of interests with the decision makers who are currently managing the COVID-19 "crisis".

Beginning with the meticulous work of Dr. David E. Martin as he exposes the CDC's ownership of a patent on human coronaviruses, and the fact this is ironic (and illegal) since you can't patent nature.

August 19

CDC Quietly updates death statistics

According to the CDC, COVID-19 was the only cause mentioned on the death certificate for only 6% of deaths.

Of the 153,504 deaths, 94% had up to 4 comorbidities listed as cause of death, the majority were very advanced in age; 90% in nursing homes.

August 26

Warning to CDC's ACIP on Warp Speed

A 3 minute public comment at CDC's Advisory Committee on Immunization Practices (ACIP) in September 2020, warned about bringing a coronavirus vaccine to the market in a "Warp Speed" timeframe. Based on historical scientific data a coronavirus vaccine could potentially decimate the human species, or at least those who consent to taking it.

August 27

NIAID establishes CREID global network to investigate pandemic pathogens

On August 27, 2020 the US NIH announced that the NIAID has established the **Centers for Research in Emerging Infectious Diseases (CREID)**, justified by the "impact" of COVID-19 pandemic, they promise to set up worldwide surveillance architecture to identify the next pandemic pathogen before it moves from animal to human. [1, 2] Coronaviruses begin the pathogen list.

The CREID Coordinating Center is a partnership between the Duke Human Vaccine Institute (DHVI) partnered with non-profit RTI International. [3, 4, 6]

"The CREID network – comprised of 10 research centers and the coordinating center – is a network of centers in regions around the globe where emerging and re-emerging infectious disease outbreaks are likely to occur." The **global network** involving "multidisciplinary investigations" hope to find out "how and where viruses and other pathogens emerge from wildlife and spillover to cause disease in people."

DHVI just happen to be researching a a pan-coronavirus "super vaccine" for protection against future variants! [5]

NIH seed fund is approximately \$17 million in grant funding of \$82 million over 5 years. Peter Daszak's EcoHealth Alliance was awarded one of the first grants, and CREID is working with China.

August 27

CDC expected 40% of VAERS report to be serious

On August 27, 2020, approximately 4 months before the COVID-19 vaccines were rolled out in the USA, the CDC awarded **General Dynamics Information Technology Inc. (GDIT)** a contract for \$35.4 million to support the CDC & FDA with collecting and analyzing the Vaccine Adverse Events Reporting System (VAERS) data received post COVID-19 vaccine rollout. [1]

ICAN lawyers in 2023 received copies of the contract. It states that of the 45,500 average annual US reports received between 2014-2018, 5.0% were classified as serious...but in the contract the CDC expected to receive "1,000 reports per day, with up to **40%** of the reports serious in nature", around a 700% increase in the daily reports for the SARS-CoV-2 vaccine! What did the CDC know about the imminent jab?

On Oct 22, 2020 Tom Shimabukuro presented CDC's "plans for Vaccine Safety monitoring & evaluation during future EUA use and post-licensure, suggesting that processing reports which included reviewing, coding and incorporating into VAERS' database, was **expected** to take 1-5 business days – the fastest for death or serious reports. [2]

As part of their contract GDIT sends monthly reports to the CDC, which were received under FOIA in 2023. By January 2021 the report exceeded the maximum 1000/day, which was exceeded in the first 5 days of rollout! [3]

September 1

September 2020

September 1

"Byte burning" modern day book burning

Censorship, Shadow Banning, De-Listing YouTube Channels, Deleting videos, De-monetizing are all being used to censor free speech, and it has escalated in 2020. By the use of algorithms, back-end secret admin panels and AI recognition programs (audio, text, image), they all work to shadow and silence content and give a false illusion of content trends to the unsuspecting.

This modern day byte-burning is equivalent to book-burning of the past!

Big Tech platforms like **Google, YouTube, Twitter, Facebook & Amazon** have all actively censoring content that goes against the "authoritative narrative". Whistleblowers confirm how this is being executed.

- **Byte** = unit of data
- **Burning** = removed

Not everything is permanently deleted. Many people as well as bots are collecting a time capsule of web content using the WayBack Machine on sites like archive.org.

September 8

AstraZeneca Phase III trial halted over suspected serious vaccine reaction

On September 8, 2020, Oxford/AstraZeneca (A/Z) “voluntarily” halted their COVID-19 vaccine Phase III clinical trial after a previously healthy, UK trial participant, came down with an unexplained suspected vaccine reaction. [1]

The following day A/Z CEO announced the female trial participant had experienced neurological symptoms consistent with a rare but serious spinal inflammatory disorder called **transverse myelitis**, that can cause muscle weakness, paralysis, pain and bladder problems.

It was only a week earlier, on August 31, 2020 that the US began the AstraZeneca Phase III trials. [2]

On October 26, 2020 AstraZeneca resumed their US Phase III trials after an “independent safety board reviewed the incident and determined the participant’s illness was unrelated to AstraZeneca’s coronavirus vaccine candidate”, though in the UK they resumed earlier on September 15th.

September 10

CDC updates COVID-19 Infection Fatality Rate

On September 10, 2020 the US CDC updated estimated **infection fatality rates (IFR)** for COVID-19 by age group – over 70’s most at risk.

Age group – percent **survival rate** which is then expressed as a percent IFR

- 0-19 – 99.997% = 0.003% IFR
- 20-49 – 99.98% = 0.02% IFR
- 50-69 – 99.5% = 0.05% IFR
- 70+ – 94.6% = 5.4% IFR

On September 25, 2020 Florida’s governor Ron DeSantis shared [1] this new CDC revelation of **COVID-19 survival rates by age group** with the public and moved to reopen the US state, lifting all restrictions. [2]

September 10

A state in India used ivermectin to control COVID-19

The state of Uttar Pradesh in India, with a population of 241 million people, 33 districts, and under 6% vaccinated, has been declared COVID-free by it’s government. This sharp decline in COVID-19 cases followed the government’s early use and distribution of large-scale “prophylactic and therapeutic” use of ivermectin. [1, 2]

September 14

UK’s MHRA expects “high volume” of CV-19 vaccine side effects

On September 14, 2020 UK Medicines & Healthcare products Regulatory Agency (MHRA) via their MHRA Buyer Organization awarded a 1.5 million GBP contract to **Genpact** (UK) Ltd to “urgently” develop a “an Artificial Intelligence (AI) software tool to process **the expected high volume of Covid-19 vaccine Adverse Drug Reaction (ADRs)** and ensure that no details from the ADRs’ reaction text are missed.” [1, 2, 3, 4]

The “Contract award notice” which was published October 19, 2020 on Tenders Electronic Daily (TED) stated:

For reasons of extreme urgency under Regulation 32(2)(c) related to the release of a Covid-19 vaccine MHRA have accelerated the sourcing and implementation of a vaccine specific AI tool. ...[As] it is not possible to retrofit the MHRA’s legacy systems to handle the volume of ADRs that will be generated by a Covid-19 vaccine.

The contract was awarded “without prior publication”, suggesting MHRA had Genpact in mind to begin with? [5]

September 20

Ex Pfizer CSO exposes PCR pandemic

Dr Michael Yeadon, with 32 years’ experience as former CSO of Pfizer and independent bio-pharma entrepreneur, exposes the limitations and deception of the PCR tests which are used globally to “justify” the pandemic. His article is titled “Lies, Damned Lies and Health Statistics – The Deadly Dangers of False Positives”. His view is supported by tens of thousands of scientists, though many don’t speak out.

Yeadon continues to warn humanity in the coming months. [2]

September 22

CDC to use V-SAFE, a new app system to actively monitor COVID-19 vaccines outside clinical trial setting

On September 22, 2020 the CDC’s COVID-19 Vaccine Planning Unit (VPU) presented their plan, once the vaccines rolled out, to conduct active “enhanced safety monitoring for COVID-19 vaccines in early phase vaccination” through smartphone and email-based web surveys, in addition to VAERS.

The CDC introduced the **Vaccine Safety Assessment For Essential workers (V-SAFE)** phone app at vaccine roll-out, initially intended for health workers, though was made available to the general public to download and register. For the first week participants would get prompted to enter post vaccination information, then weekly up to [only] 6 weeks – this is called active surveillance. [2]

The purpose of the V-SAFE app “is to rapidly characterize the safety profile of COVID-19 vaccines when given **outside a clinical trial setting**.” Data submitted to V-SAFE is “collected, managed, and housed on a secure server by Oracle,” a private,

third-party computer technology company who receives the data in deidentified form. [3]

The US Vaccine Adverse Events Reporting System (VAERS) is “the US early warning safety monitoring system”, co-managed by the CDC and FDA, with an established baseline yearly reporting rate. [1] The management of vaccine safety has historical issues!

By December 2021 the CDC refuse, through FOIA, to release the deidentified V-SAFE data to the public which Oracle is allowed to manage!

September 25

WHO: release “post COVID-19 condition” ICD code

On September 25, 2020, the World Health Organisation (WHO) established new International Classification of Diseases (ICD) codes including “post COVID-19 condition”, soon called long covid syndrome. [1, 3]

Post COVID-19 condition is assigned ICD code U09.9: which is an “optional code” that “serves to allow the establishment of a link with COVID-19” [2, 4]

“This coding enables Australia and the international community to collect and compare data on people who have a history of SARS-CoV-2 infection, which is particularly important as the long-term health implications of an infection and [COVID-19] is [as of June 2022] poorly understood.”

It wasn’t until October 2021 that the clinical case definition of post COVID-19 condition was released by WHO, and for children Feb 2023. A search of both these case definition documents includes **no reference** to “spike” or “protein”, but does SARS-CoV-2!

Spike protein is the common link between SARS-CoV-2 viral infection and the COVID-19 vaccines...spike is not being considered by authorities as of early 2023.

October 1

October 2020

October 1

US begins reporting high “uptick” in COVID-19 cases mostly by “patients with no symptoms”

From early October 2020 the US COVID-19 health officials and the mainstream media began promoting the “up-tick” in COVID-19 cases and the “alarming spread” of the virus. This promoted more fear in the population. [1]

In July 2020 Dr Fauci warned that the daily cases of new “infections” could surpass 100,000 per day – which was when testing ramped up, by November 2020 that number was reached. [2, 3] Dr. Robert Redfield, the director for the US CDC said the “surge of cases appears to be **driven by patients with no symptoms.**”

COVID-19 death numbers did NOT follow the same trend!!! This can be explained by the PCR test alone was not fit for diagnosing a COVID-19 "case". When PCR tests are amplified greater than 34 cycles, it was already known that the person would not be infectious as the virus was unable to be cultured, i.e. was not viable and as such this would be a "false positive" result. Greater testing with high cycle thresholds (i.e. cut of points) meant anyone could be "positive" even with no symptoms, hence the term "**casedemic**" arose. The more you test with high Ct's the more "cases" you will find!!!

If COVID-19 is a DEADLY virus, would death numbers increase if case numbers increase? – WATCH

During this period the 2020 US Presidential election campaigning was underway.

October 1

WMA Urgent Resolution

World Medical Association (WMA): COVID-19 Medical Profession Urgent Resolution adopted October 2020

October 1

Gain-of-Function Hall of Shame

A document first published October 2020 contains a summary of "experts" who are connected to Gain of Function virus research.

Proof Fauci lied >>>

October 1

The Flu Vaccine associate with highest COVID-19 death rates

An October 2020 data analysis found "a positive association between COVID-19 deaths and influenza vaccination rates in elderly people worldwide. Areas with the highest vaccination rates also had the highest COVID-19 death rates."

Previous studies were unable to conclude a benefit for the elderly with respect to reduced hospitalization or death with a flu vaccination.

October 2

Drosten knew PCR test is "not fit for purpose"

A German article from October 2, 2020 reveals that Christian Drosten, the virologist responsible for the WHO PCR test parameters, has known since 2014 of the **inherent limitations** of the PCR test for "diagnosing an infection". (translated here).

- A positive PCR test result – designates a person as statistically ill – whether they have symptoms or not!
- PCR method is “so sensitive that it can detect a single genetic molecule of the virus.” That doesn’t mean one is infected or infectious.
- In 2014 Drosten considered “the panic surrounding MERS to be largely **media-made.**”
- The more people you test, the more positive cases are reported – yet they are mostly healthy people. This explains why when case numbers exploded, the death numbers did not follow.

October 4

The Great Barrington Declaration released

On October 4, 2020, **The Great Barrington Declaration** was authored by the world’s leading infectious disease specialists from Stanford, Harvard & Oxford and signed by independent global experts calling for an immediate withdrawal of lockdown strategy for healthy populations, and instead take a “**Focused Protection**” approach for our most vulnerable, to mitigate the “enormous cost” such as mental health damage, which the current measures are unnecessarily inflicting on populations across the globe. [1, 2, 3, 4, 5]

The Declaration was written by three eminent doctors:

- Dr. Jay Bhattacharya [7],
- Dr. Sunetra Gupta [8] and
- Dr. Martin Kulldorff [9].

Shortly after, Dr Fauci, Dr Collins *et al*, through email communications conspired to discredit these highly credentialed experts. It was an “outright war on top scientists” according to Dr Scott Atlas who witnessed this from his advisory role on the US Coronavirus Task Force.

Two years in, by March 2022 “we now know the measures didn’t do very much to slow down the spread” and it is coming to common light these scientists were right all along. [6]

October 5

WHO changes the definition of “Herd Immunity”

The WHO starts steering the definition of ‘**herd immunity**’ to be attributed ONLY to vaccinated populations and removing the [known] reference to immunity gained from **natural infection** of a pathogen. The WHO web page first archived this change on **October 15, 2020**. [2]

Then by December 31, 2020 the WHO updates the herd immunity definition to again include “natural infection”.

They also removed the reference to antibodies. This is important as binding antibodies vs neutralizing makes a big difference, especially for coronavirus vaccines, where immune enhancement has been an issue in previous animal studies.

Herd immunity is a known concept associated of disease spread in a population, such that if one person has the infection, they spread it to one or less other people, as Professor Bhattacharya explains.

Watch >>>

October 8

Australia indemnifies vaccine manufacturers from liability

On October 8, 2020, Australia's Morrison government gave COVID-19 vaccine manufactures **indemnity against liability** for "rare" side effects that experts say are "inevitable" when a vaccine is rolled out, and a statutory compensation scheme for "extremely rare" side effects will NOT be set up. [1, 2] Initially granting this to Oxford University and University of Queensland vaccines.

The Queensland university/Seqirus (CSL) vaccine we pulled in December 2020 as recipients tested positive for HIV! The Oxford/AstraZeneca vaccine made it to market. In June 2021 the Australian government indemnified GP's who administered the COVID-19 jabs, and stated it also covered recipients!.

October 12

Multiple Early Treatments available for COVID-19

Dr Peter McCullough, MD presented to the Association of American Physicians and Surgeons his paper on Early Outpatient Treatment of SARS-CoV-2 infection, and discusses the unprecedented resistance he has come up against.

The authorities deny early treatment options.

October 13

J&J halt Phase III clinical trial

On October 13, 2020, Johnson & Johnson became the second vaccine maker to halt phase III clinical trials while investigators probe whether a participant's stroke may be linked to the vaccine.. AstraZeneca paused their trials a month earlier.

On October 23, 2020, J&J announced it will resume it's clinical trails. "After a thorough evaluation of a serious medical event experienced by one study participant, no clear cause has been identified...the Company has found no evidence that the vaccine candidate caused the event."

October 14

WHO updates COVID-19 IFR to 0.27%

On October 14, 2020 the Bulletin of the World Health Organization published Professor John Ioannidis' paper looking at the **infection fatality rate (IFR)** for COVID-19 based on how many people already had antibodies to SARS-CoV-2 (seroprevalence data) which revealed that the **median COVID-19 IFR was 0.27%** – “much lower than estimates made earlier in the pandemic”.

“In people younger than 70 years, infection fatality rates ranged from 0.00% to 0.31% with crude and corrected medians of 0.05%.” Those over 70 years of age are disproportionately at risk.

On March 3, 2020 the WHO claimed the IFR for COVID-19 was 3.4%, and now with this WHO bulletin publication acknowledge it is only 0.27%, equivalent to a bad flu season.

Ioannidis submitted the pre-print six months earlier on May 13, 2020.

October 15

Scientific consensus to counter The Great Barrington Declaration

On October 15, 2020 The Lancet published correspondence from 31 scientists (with alleged funding ties to the Gates Foundation) titled “*Scientific consensus on the COVID-19 pandemic: we need to act now*”. This document became known as the **John Snow Memorandum** [1], which their declaration against “mass infection” [i.e. for vaccine only] has every signature said to be vetted! [They can then ‘justify’ their low numbers!]

The John Snow Memorandum is a counter to The Great Barrington Declaration which was released on October 4, 2020 – scientific consensus vs scientific consensus!

Professional signatories on declaration as of September 27, 2022:

- John Snow have 6900
- Great Barrington has 63,135

October 20

WHO introduces a new concept: “Vaccines are Immunity”

WHO's Strategic Advisory Group of Experts (SAGE) on immunization release a document [v1, v1.1] that starts to introduce the idea that “vaccines are immunity”, ignoring the science of natural immunity.

The World Bank: promotes the End of the pandemic March 2022 by reaching herd immunity through vaccinating 60% global population.

October 21

CDC exaggerates deaths by COVID-19

It was reported that from the CDC's October 21, 2020 report revealed that hospitals had been counting patients who died from serious preexisting conditions as COVID-19 deaths. The CDC counted 51,000 patients who actually died from heart attacks as dying from COVID-19 – exaggerating the actual deaths from COVID-19, and not distinguishing deaths with COVID-19.

"For 6% of the deaths, COVID-19 was the only cause mentioned".

October 21

BMJ: COVID-19 vaccine trials are not designed to test whether they stop transmission

On October 21, 2020 The British Medical Journal publishes an article by its associate editor Peter Doshi where he states: "None of the [COVID-19 vaccine] trials currently under way are designed to detect a reduction in any serious outcome such as hospital admissions, use of intensive care, or deaths. Nor are the vaccines being studied to determine whether they can **interrupt transmission of the virus.**" [1]

October 22

FDA reveals possible adverse event outcomes for the COVID-19 vaccines

On October 22, 2020 the FDA's Vaccines and Related Biological Products Advisory Committee (VRBPAC) member revealed in the public meeting on slide 16 entitled 'Draft working list of possible **adverse event outcomes**', the potential risks associated with these COVID-19 vaccines, including a completely new category of disease "multi-symptom inflammatory syndrome in children". [1]

The presenter dismissed and skipped this slide [@2:33:00], but videos can be paused, and this is a public document. Before the vaccines were authorized the FDA knew that the COVID-19 vaccines could potentially cause heart damage, blood clots, harm to children and even death.

October 22

Time Magazine highlights "The Great Reset"

Time Magazine dedicates their edition to The World Economic Forum's (WEF) Great Reset. The UN agrees that the pandemic presents a unique opportunity to accelerate Agenda 2030's Sustainable Development Goals. The non-elected rich and powerful are influencing and directing society. Reimagine – Owning nothing and being happy

November 1

November 2020

November 1

17 million farmed mink culled due to virus variant

In response to the outbreak in mink of a SARS-CoV-2 variant and to stop the spread of the 'Cluster 5' variant, 17 million mink were culled in Denmark. Only 12 human cases were identified. [1]

November 3

US Presidential Election 2020

In the "heat" of the pandemic on November 3, 2020 the United States held their presidential election between President Donald Trump (R) and Joe Biden (D). Five states coincidentally stopped vote counting on election night, which delayed the result. The media announced Joe Biden as the "projected" winner before it was official. Biden allegedly received more votes than any president before, and both exceeded President Obama's historical high. Trump won all but one bellwether county, adding further credence that a Biden's win is a "statistical anomaly". This is just a few, amongst many anomalies that occurred in the 2020 election, yet officially it is stated by the Cyber & Infrastructure Security Agency (CISA) that the election was the "most secure in American history".

In the US it is not compulsory to vote (unlike in Australia), no ID needs to be shown and proprietary, privately-owned and vulnerable computer systems "count" the votes, not to mention as a consequence of the pandemic, Vote by Mail was scaled up across the country and encouraged. [2, 3, 4]

Prior to the election Biden did minimal campaigning [1], compared to President Trump who drew huge crowds at every location across the country - LIST
Election "integrity and fraud" evidence and documentaries is being aggregated - HERE

On June 3, 2022, CISA (finally) admit to voting machines are vulnerable to tampering and hacking after 2 years of denials. [5, 6]

November 3

COVID-19 vaccine clinical trial protocols

The full clinical trial protocols for the COVID-19 vaccines for which ICAN filed its petitions were released to the public.

See copies for manufacturer's vaccines:

- AstraZeneca
- Pfizer

- [Moderna](#)
- [Johnson & Johnson](#)

Those protocols revealed that some of ICAN's demands regarding the duration for tracking vaccine safety had been met.

November 9

Pfizer-BioNTech phase 3 interim results – 90% effective

On November 9, 2020 [Pfizer](#) and [BioNTech](#), together with [Acuitas Therapeutics](#) (the lipid nano-particle component) all announce their COVID-19 vaccine candidate had "achieved success". They claimed the "first interim analysis of Phase 3 study" showed "more than 90% effective in preventing COVID-19". Science by press release! Pfizer's CEO Dr. Albert Bourla stated: *"I believe this is likely the most significant medical advance in the last 100 years, if you count the impact this will have in public health, global economy."*

"Dr. Scott Gottlieb, a former FDA commissioner and a member of Pfizer's board, told CNBC the vaccine could be available in limited use as early as late December and widely available by the third quarter of 2021."

The press went wild promoting the "stunning" 90% efficacy: [[1](#), [2](#), [3](#), [4](#), [5](#)]

November 10

Pfizer vaccine batch integrity issues known to regulators

From leaked emails and reports to [Trial Site News](#) in June 2022, it indicates that as early as November 10, 2020, the European regulatory agency (EMA) staff, who oversees the evaluation of medicinal products for the European Union, had reason to be concerned about the rushed speed of the regulatory process with respect to robustness of assessment, plus they were aware of potential issues with Pfizer-BioNTech's vaccine **batch integrity**.

The emails reveal that regulatory bodies like the FDA, MHRA, EMA and Health Canada knew of the differences in batches, regarding % mRNA integrity and the presence of uncharacterized fragments of RNA in batches ("impurities"), making the 'safety and efficacy' of the COVID-19 vaccine an unknown and could account for the variation in adverse reactions to batch/lot numbers.

Knowing these issues the regulators granted various designations of emergency use authorization a few weeks to months later – which would not pass normal regulation.

November 11

Portuguese court rules PCR tests are unreliable & unlawful

The Appeals Court in Portugal rules PCR tests as unreliable for diagnosing SARS-CoV-2 infection and quarantine based solely on a PCR test is unlawful.

One study showed that “when running PCR tests with 35 cycles or more – the accuracy dropped to 3%, meaning up to **97% of positive results could be false positives**”

Globally a COVID-19 “Case” = Positive PCR test (with or without symptoms).

November 13

Australia’s COVID-19 Vaccination Policy endorsed

The National Cabinet endorsed the Australian Government’s COVID-19 Vaccination Policy outlining how vaccines will be provided in Australia. [1]

November 16

Moderna: COVID-19 vaccine has 94.5% efficacy

In a press release on November 16, 2020, Moderna announced their intended to submission to the FDA for Emergency Use Authorization of their COVID-19 vaccine, on the back of their Phase 3 trial returning 94.5% efficacy. [1]

A fuller analysis was released on November 30, 2020, which showed a 94.1% efficacy.

November 18

Pfizer claim their vaccine is 95% effective

In a press release on November 9, 2020, Pfizer-BioNTech announce their preliminary phase 3 clinical trial data suggests their COVID-19 vaccine is more than 90% effective. [1, 2]

From a final analysis, released November 18, 2020, they said it was **95% effective** stating: “Primary efficacy analysis demonstrates BNT162b2 to be 95% effective against COVID-19 beginning 28 days after the first dose;170 confirmed cases of COVID-19 were evaluated, with 162 observed in the placebo group versus 8 in the vaccine group”. Those results had yet to be peer reviewed, but the media ran with the claim.

November 18

Danish RCT mask study concludes no statistical difference

Published: Danish randomized controlled trial (RCT) (originally 18 Nov 2020) looking specifically at the effectiveness of wearing surgical masks to protect against SARS-CoV-2 infection.

“Our results suggests that the recommendation to wear a surgical mask when outside the home among others **did not** reduce, at conventional levels of statistical significance, the incidence of SARS-CoV-2 infection in mask wearers.” [1]

In the October 2019 WHO non-pharmaceutical measures report for Influenza, they too concluded that masks were not recommended for healthy people. [2]
Additional mask info found >> AAPS, HART, OSHA, Dr Rancourt [2], SPR
Yet the health authorities of the world continue to make their people wear masks even in light of the science.

November 18

Pfizer-BioNTech announce their vaccine is 95% effective

On November 18, 2020 Pfizer and BioNTech announced the final analysis of their COVID-19 vaccine Phase III clinical trial data shows it is 95% effective with no safety concerns. Pfizer filed for emergency use authorization with the FDA “within days” of this announcement.

“Efficacy was consistent across age, race and ethnicity demographics. The observed efficacy in adults over 65 years of age was over 94%,” Pfizer and its German partner BioNTech said in a joint statement. [1]

November 19

South Australia goes into Lockdown

State Coordinator, Commissioner Grantley Stevens enacted a Stay at Home Direction to lockdown a million South Australians for a 6 days “circuit breaker” on the back of an alleged new “pizza box” transmission as claimed by Chief Public Health Officer Professor Spurrier. [1, 2, 3]

The Direction was revoked on 22nd November, 3 days later, allowing South Australians out of home lockdown.

November 20

WHO advises against remdesivir in COVID-19 patients

On November 20, 2020, the World Health Organisation (WHO) issued a conditional recommendation **against** the use of remdesivir in hospitalized patients, regardless of disease severity, as there is “currently” no evidence that remdesivir improves survival and other outcomes in these patients. [1, 2]

November 20

Study: asymptomatic cases NOT the driver of SARS-CoV-2 spread

A study published November 20, 2020 of a city-wide, 19 day, mass PCR screening program of nearly 10 million residents in Wuhan, China in the post-lockdown period from May 14, 2020 (Alpha variant), shows there “were no positive tests amongst 1,174 close contacts of [the 300] asymptomatic cases.”

Meaning those who have no symptoms but return a positive PCR result (**asymptomatic**) **did not** spread virus to close contacts.

Wuhan was under strict lockdown measures from January 23, 2020, until April 8, 2020. Lockdown was used to stop the virus spread, but mostly because “on of China’s top expert” there were “**super spreaders**”. Following lockdown, “the COVID-19 epidemic was generally under control in China, and the whole country has progressed into a post-lockdown phase.”

A systematic review published December 2020 showed **asymptomatic spread was not a driver of the pandemic**. [2]

In May 2022 published a systematic review of nearly 30,000 people over 42 countries has found asymptomatic carriers are about 68% less likely to pass the virus on compared to those with symptoms. [1]

The “symptoms” that can be classified as COVID-19 have undergone several changes over the course of the pandemic, initially being “a high temperature, a cough and a loss of taste or smell, but then simply feeling tired and a headache were added. So a healthy person with a headache that returns a [false] positive PCR result can be labelled “statistically sick” with COVID-19 i.e. a “case”. The more you “tests” the more “cases” will be found.

The risk of asymptomatic spread of SARS-CoV-2 was/is the reason governments around the world pushed for the testing and lockdown of healthy people. Quarantine of the sick has traditionally been the public health measure.

November 22

Vaxxed vs Unvaxxed children’s health study published

Published: “A retrospective analysis spanning ten years of pediatric practice focused on patients with variable vaccination born into a practice, presenting a unique opportunity” to study the health outcomes of vaccinated children versus unvaccinated.

“The implications of these results for the net public health effects of **whole-population vaccination** and with respect for informed consent on human health are compelling.”

The CDC has never done such a health outcome study – see July above.

November 23

CDC publish baseline mRNA COVID-19 vaccine information – vaccine stays in the arm muscle, and spike is “harmless”

On November 23, 2020 the US CDC published information on the expected to be authorised new technology mRNA COVID-19 vaccines. [1, 2]

Stating “facts” that emerging science showed, turned out to be misinformation.

- The “immune response” that “produces antibodies, is what protects us from getting infected if the real virus enters our bodies”.
- The protein which the COVID-19 mRNA vaccines instructs the human cells to make was advertised as “**a harmless piece** of what is called the “spike protein.””
- The “vaccines are given in the **upper arm muscle**. Once the instructions (mRNA) are inside the muscle cells, the cells use them to make the protein piece. **After** the protein piece is made, the **cell breaks down the instructions and gets rid of them.**” Which the media then spread the world, quoting CDC. [5] – It was soon discovered the LNP carrying mRNA dosnt stay in the arm.
- “At the end of the process, our bodies have learned how to **protect against future infection**. The benefit of mRNA vaccines, like all vaccines, is those vaccinated gain this protection without ever having to risk the serious consequences **of getting sick with COVID-19.**”
- “mRNA **never enters the nucleus** of the cell, which is where our DNA (genetic material) is kept.” – (No evidence to support this statement) [3]
- “mRNA COVID-19 vaccines cannot give someone COVID-19” – [COVID-19 is a collection of symptoms, the SARS-CoV-2 spike protein is demonstrating to cause COVID-19 like symptoms]

The only COVID-19 vaccines theFDA will grant emergency use authorization are those that meet the “ rigorous safety and effectiveness standards” guidelines, of amongst other things, >50% with placebo controlled trials.

Researchers have been studying and working with mRNA vaccines “for decades” even though there “are currently no licensed mRNA vaccines”.

“Interest has grown in these vaccines because they can be developed in a laboratory using readily available materials. This means the process can be standardized and scaled up, **making [ALL] vaccine development faster** than traditional methods of making vaccines.”

“Future mRNA vaccine technology may allow for one vaccine to provide protection for multiple diseases, thus decreasing the number of shots needed for protection against common vaccine-preventable diseases.”

The CDC later quietly removed from website, their claim that the “**mRNA and the spike protein do not last long in the body**”, which follows is later edited after the science shows it can remain in blood for at least 28 days, let alone the arm muscle.

November 27

TGA assure rigorous assessment before COVID-19 vaccines approved

On November 27, 2020 Australia's Therapeutics Goods Administration (TGA) state on their [website](#) that they "will **rigorously assess** any COVID-19 vaccine for **safety, quality and effectiveness** before it can be supplied in Australia."

On [March 29, 2018](#) the Therapeutics Goods Act was amended to include a **Provisional Registration** clause to allow products to be provisionally approved upon limited data being assessed.

November 27

PCR tests flawed – excessive false positives

On November 27, 2020, twenty-two international [consortium](#) scientists submitted a [request to retract](#) the [Drosten paper](#) from the journal Eurosurveillance due to fatal [flaws](#) and conflicts of interest. Upon reviewing the paper the came to a damning [verdict](#): the study contains **nine serious scientific errors** and **three minor inaccuracies**. Such as:

- The primer design is inadequate
- The binding temperature used is too high, allowing for non-specific binding
- The number of cycles in paper is 45; greater than 30 is known to be problematic
- no positive or negative controls were performed
- There is a risk of false positive results due to the imprecise test design
- Two of the authors (Prof. Drosten and Chantal Reusken) are members of the editorial board of Eurosurveillance!

This external peer review analysis of the Drosten-led [pivotal](#) PCR paper, revealed that the PCR test protocol used worldwide as the "gold standard" for "diagnosing" COVID-19, is likely producing excessive [false positives](#), which "has led to worldwide [misdiagnosis](#) of infections attributed to SARS-CoV-2 and associated with the disease COVID-19." The exaggerated PCR-driven case numbers led to a "[casedemic](#)". [2, 4]

Among the reviewers is geneticist [Kevin McKernan](#), the main initiator of the [Human Genome Project](#), who holds several patents in the field of PCR diagnostics. [5]

A few weeks later, on [December 14, 2020](#), the [WHO](#) acknowledges this PCR cycle threshold testing flaw, just as vaccines are about to be rolled out. [3]

December 1

December 2020

December 1

Doctors petition EMA to stop vax trials – serous concerns

On December 1, 2020 the International Consortium of Scientists in Life Sciences ([ICSLS](#)), led by ex-Pfizer scientists [Dr Michael Yeadon](#) and German public health expert [Dr Wolfgang Wodarg](#), filed an [application](#) with the European Medicine Agency

(EMA), the body responsible for EU-wide drug approval, requesting the immediate suspension of all SARS-CoV-2 vaccine studies. [1]

In their 43 page document they lay out their reasons for the urgent request to halt the trials, which include:

- **Possible Infertility issues:** Syncytin-1 is a prerequisite for a successful human pregnancy and is also found in “homologous form in the spike proteins of SARS viruses”, it could be possible anti-spike antibodies could also act as anti-Syncytin-1 antibodies thus a vaccinated woman could be rendered infertile for an unknown duration.
- **Likely ADE:** The formation of “non-neutralizing antibodies” could lead to an exaggerated immune reaction, known as antibody-dependent enhancement (ADE) phenomenon; when a vaccinated person is exposed to a “wild” coronavirus they could die, as was demonstrated in animal studies. The vaccine induced “immune response” rendered them vulnerable when re-infected.
- **PEG anaphylaxis:** The mRNA vaccines contain polyethylene glycol (PEG) which 70% of people develop antibodies against, as such exposing them to potentially fatal allergic reactions upon vaccination.
- **Unknown long-term side effects:** It simply cannot be determined what long term health issues could result when only short-term clinical trials are conducted, as was the case with narcolepsy experienced post-2009 swine flu vaccination, thus an emergency approval could expose an unsuspecting population of hundreds of millions of people to unacceptable risks.

December 1

Pfizer documents show they knew their vaccine had limited efficacy

For first 3 months post FDA authorization Pfizer received multiple reports of both **vaccine failure** and **vaccine ineffectiveness** according to FOIA documents. Pfizer’s internal documents that were released by court order in 2022 under FOIA revealed that **beginning on December 1, 2020**, Pfizer was aware by **February 28, 2021** that their vaccine had limited efficacy and that 136 people **died** following injection!

December 2

UK the first country to authorise a COVID-19 vaccine

On December 2, 2020, the **Pfizer-BioNTech** COVID-19 vaccine was “temporarily authorised”, by UK’s Medicines and Healthcare products Regulatory Agency (MHRA), becoming the **first** COVID-19 vaccine to be authorised anywhere in the world, “paving the way for mass vaccination”. [1, 2]

The vaccine was reported to offer “up to 95% protection against Covid-19 illness”. Pfizer’s CEO stated on December 3, 2020 that Pfizer **don’t know** if the vaccine will **prevent transmission** – the entire purpose of a mass vaccination campaign. The governments authorization “follows months of rigorous clinical trials and a thorough analysis of the data by experts at the MHRA who have concluded that the vaccine has met its strict standards of safety, quality and effectiveness”, contradictory to Pfizer FOIA documents.

On 30 December “the cheaper and easier-to-distribute **Oxford-AstraZeneca** COVID-19 vaccine” was approved. A third vaccine, produced by **Moderna**, was approved for use in the UK in January 2021. Finally, **Janssen’s** single-dose vaccine was approved in May 2021, although it is yet to be used. [1,2]

December 3

Florida mandates testing labs report PCR “cycle threshold values”

On December 3, 2020, the US state of Florida, headed by Governor Ron deSantis, mandated that all COVID-19 testing labs to report the “cycle threshold values” for very PCR test they perform – in an attempt to rule out the high rate of false positive results. [1, 2]

Governor deSantis is guided by Florida’s Surgeon General Dr Joseph Ladapo, who is trained in public health and is following the scientific evidence.

December 3

US COVID-19 vaccination cards released

The US Department of Defense (DoD) released the first images of a **COVID-19 vaccination record card** and vaccination kits on December 3, 2020, prior to anticipated EUA of COVID-19 vaccines. [3]

“Vaccination cards will be used as the “simplest” way to keep track of Covid-19 shots, said Dr. Kelly Moore, associate director of the Immunization Action Coalition, which is supporting frontline workers who will administer Covid-19 vaccinations.” [1, 2]

The 100 million DoD **vaccine kits** “include a card, a needle and syringe, alcohol wipes and a mask.

The card for the 2-shot vaccines already has additional spaces for 2 booster shots – as though it was planned! The vaccination clinics are to also report the data electronically to their state immunization registries and the CDC – making a card redundant unless they planned ahead of time to use it as “proof of vaccination” to be eligible to move in society

December 3

Pfizer CEO 'not certain' if their vaccine will prevent transmission

On December 3, 2020, just one day after the UK became the first country to grant emergency use authorization for Pfizer-BioNTech's COVID-19 vaccine, it was reported that Pfizer's CEO Albert Bourla said in an interview with NBC that the company is "**not certain**" if their vaccine will prevent transmission, "*I think this is something that needs to be examined*" he said. [1, 2]

December 7

WHO finally acknowledges PCR test flaw

On December 14, 2020, the World Health Organization (WHO) released a guidance memo (dated December 7, 2020), warning that high cycles on PCR tests could result in false positives. [1]

During the pandemic positive PCR is a positive "diagnosis" for COVID-19, rendering the person a COVID-19 "case" when in fact the asymptomatic person is highly likely negative, because HIGH CYCLES of 40-45 have been used throughout 2020 to create large number of false cases.

Traditionally PCR tests are use as a confirmatory test to help a doctor determine a disease diagnosis in someone who has symptoms.

But from March 2020 when the WHO declared "test, test, test", millions of people who were designated a "close contact" received a test whether they had symptoms or not. If the PCR test returned a positive result, they were diagnosed as having COVID-19 (the disease), labelled asymptomatic if they were healthy, and became a "case" statistic. If the test was amplified over 35 cycles, 97% of "positive" results would be a "false positive". PCR cycling was commonly run up to 40 to 45 cycles! Australia up to 40 cycles.

A few weeks before, on November 27, 2020 the European consortium of scientists requested the pivotal PCR test publication be retracted.

December 7

First COVID-19 vaccine administered in UK, which is the first western country to rollout the vaccine

As planned, on 7 December, 2020 the UK is the first western country to roll out it's emergency use COVID-19 vaccine, of which 90 year old Margaret Keenan publicly received the first dose of Pfizer-BioNTech COVID-19 vaccine (she gets second dose on Dec 30) and William Shakespeare was the first man to receive the vaccine outside of clinical trials. [1]

"On 2 December 2020, the Pfizer-BioNTech Covid-19 vaccine was approved for use in the UK, becoming the first to be authorized anywhere in the world. This was followed on 30 December by the cheaper and easier-to-distribute Oxford-AstraZeneca vaccine." [2]

The US administered their first COVID-19 vaccine on December 14, 2020

December 9

Hacked EMA data reveals potential significant CV19 mRNA batch integrity issues

On December 9, 2020 the European Medical Agency (EMA) was the subject of a cyberattack which was revealed that “COVID-19 medicines and vaccines” [1] data was stolen. This included “email screenshots, EMA peer review comments, Word documents, PDFs, and PowerPoint presentations”, of which some of those documents related to “the regulatory submission for Pfizer and BioNTech’s COVID-19 vaccine candidate, BNT162b2.” [2]

Nineteen days after the hack, on December 21, 2020, the EMA granted Conditional Marketing Authorization (CMA) to Pfizer-BioNTech, for the very vaccine in question – which the hack reveals that the EMA regulators had at the time over 100 regulatory objections.

One of the biggest objections was reported by a BMJ investigation published on March 10, 2021, that revealed by November 23, 2020 the EMA “regulators had major concerns over unexpectedly low quantities of intact mRNA” ...“between the clinical batches and proposed commercial batches—from around 78% to 55%.” Revealing concerning batch integrity instability. [3, 4, 5, 6]

December 11

Australia cancels 51 million doses of Uni Qld vaccine due to HIV scare

Australian government drops Uni Qld, CSL, CEPI COVID-19 vaccine after volunteers in early clinical trials “falsely” tested positive for HIV. A pre-order for 51 million vaccine doses was cancelled. \$750 million investment. Trials began on July 13, 2020 with the involvement of CSIRO.

Health Minister Greg Hunt said that while the HIV test results were false, “the scientific advice is that the risk to vaccine confidence was the principal issue here.” [1]

This vaccine generates antibodies for the “Molecluar Clamp” that is “critical for driving membrane fusion and cell entry”. The HIV-1 coat protein – GP41 is known to be neurotoxic. [2]

Australian Sky news reports. The Highwire reports.

December 11

FDA issues first COVID-19 vaccine EUA – no data on “preventing transmission”

On December 11, 2020, the US Food and Drug Administration (FDA) granted the first **Emergency Use Authorization** (EUA) for a brand new technology product, the Pfizer-BioNTech COVID-19 mRNA vaccine, just 9 months after phase I trials began, and after only 108 days of regulatory safety review. In their press release they stated: "The FDA has determined that Pfizer-BioNTech COVID-19 Vaccine has met the statutory criteria for issuance of an EUA". The FDA stated the vaccine "may be effective in preventing COVID-19", then state it is 95% effective in "preventing" COVID-19, that 95% is based on "a 2 month study of a couple hundred people. That's it!". [3]

The day before, on December 10, 2020, the **Vaccines and Related Biological Products Advisory Committee** (VRBPAC) met to assess the Pfizer-BioNTech COVID-19 Vaccine and prepare a Briefing Document for the FDA. [6]

The FDA stated "[t]he vaccine was 95% effective in preventing COVID-19 disease among these clinical trial participants with **eight** COVID-19 cases in the vaccine group and **162** in the placebo group." 8 plus 162 equals **170 trial participants was all that were used to determined the relative risk of "95% effective"**, where as the **absolute risk** (of all 36,523 trial participants) works out to less than 1% effective. [4]

"At this time, data are **not available** to make a determination about how long the vaccine will provide protection, **nor is there evidence** that the vaccine prevents **transmission** of SARS-CoV-2 from person to person."

President Trump announced this as a "medical miracle" and vaccines would be available within 24 hours. [1, 2]

The rush to market was the result of President Trumps' Operation Warp Speed, where he allocated "\$14 billion to accelerate vaccine development and to manufacture all of the top candidates in advance".

- 11 Dec 2020 – EUA* for Pfizer CV19 vax – 30ug/dose
- 18 Dec 2020 – EUA for Moderna CV19 vax [5] – 100ug/dose

*EUA for an unapproved product

Under EUA these new products referred to as 'vaccines' are still undergoing data collection and thus are experimental. American frontline doctors have raised many concerns in a white paper, which includes:

- No vaccine based on messenger RNA (mRNA) has ever been approved for any disease, or even entered final-stage trials until now, so there's no peer-reviewed published human data to compare how mRNA stacks up against older technologies.
- Previous coronavirus vaccine projects triggered re-challenge immune responses so strong that the test animals died, and the vaccine trials were halted. Scientists have never been able to create a successful coronavirus vaccine.

Is this new technology a "vaccine" or "medical device"?

The vaccines start rolling out across the US on Monday December 14, 2020.

December 14

Pfizer unblinds placebo control arm of trial group

On December 14, 2020 Pfizer/BioNTech removes the saline placebo control arm (unblinds) of their Phase 3 clinical trial, just 3 days after FDA issues Emergency Use Authorization (EUA) for Pfizer-BioNTech COVID-19 vaccine. This **unblinding** of the control group by offering the trial participants the option to take the treatment product (the vaccine) **eliminates** the true ability to conduct legitimate **long term safety** studies.

- Dec 14, 2020 – Pfizer eliminates the placebo control clinical trial group
- Jan 14, 2021 – Moderna eliminates the placebo control clinical trial group

Under EUA these new products referred to as 'vaccines' are still undergoing data collection and thus are experimental. Placebo control safety data has now been compromised as the control group get the treatment. [1]

By March 2021 FOIA documents show 90% of placebo group had received at least one mRNA shot – i.e. "Pfizer stopped collecting useful data long before the planned end date of the clinical trial."

December 14

First COVID-19 vaccine administered in US

The first COVID-19 vaccine administered in America was to Sandra Lindsey, an ICU nurse, in New York City on December 14, 2020.

After months of vaccine development, two companies, Pfizer-BioNTech and Moderna applied to the FDA for **Emergency Use Authorization (EUA)**. To receive approval, the companies' data had to be reviewed by the Centers for Disease Control and Prevention (CDC) and its **Advisory Committee on Immunization Practices (ACIP)**, which determined that health care workers and long-term care residents should be the first groups to receive the vaccine. [1, 2, 3, 4]

In a press release on December 10, 2020 the FDA assured the public that they would proceed "without sacrificing our rigorous scientific standards for safety and effectiveness." "The FDA recognizes that transparency and dialogue are critical to building public confidence in COVID-19 vaccines." "The FDA is considered the **"gold standard" regulator** of medical products. The process that the FDA uses to review is **respected worldwide**..."

On December 10, 2020 The FDA's Center for Biologics Evaluation and Research's **Vaccines and Related Biological Products Advisory Committee (VRBPAC)**, "made up of independent scientific and public health experts from around the country", met in open session to discuss the request for EUA of a "COVID-19 vaccine from Pfizer, Inc. in partnership with BioNTech Manufacturing GmbH" (Pfizer-BioNTech) "for the prevention of COVID-19 in individuals **16 years of age and older**." Which they approved on December 11, 2020..

ACIP met December 11& 13, 2020 "to review the **Pfizer-BioNTech** vaccine and recommended moving forward with its distribution to anyone over age 16. The FDA issued an EUA on Saturday 12th following the meeting and notified the CDC and Operation Warp Speed to coordinate distribution plans."

On December 17, 2020 VRBPAC met again to discuss the EUA of the **Moderna** COVID-19 Vaccine “for the prevention of COVID-19 in individuals **18 years and older.**” The following day on December 18, 2020 the FDA grants EUA to Moderna. [5]

Americans were assured by **Operation Warp Speed** that “Vaccines will help prevent the spread of COVID-19 and bring this pandemic to an end”

The CDC state that “Clinical trials provide data and information about how well a vaccine **prevents** an infectious disease and about **how safe it is.** The FDA evaluates these data, as well as manufacturing information, to assess the safety and effectiveness of vaccines. FDA then decides whether to approve a vaccine or authorize it for emergency use in the United States.”

December 14

WHO (finally) admits PCR tests cause false positives

Dated December 7, 2020, the WHO finally admits PCR tests cause false positive, and that it is a “predictive” tool to be used in conjunction with clinical signs and symptoms, in order to form a diagnosis..

After months of “user feedback” challenging PCR stand-alone validity, the WHO officially alerts the world of the issue of high PCR cycle thresholds (Ct) creating false positive cases.

The quality of the information from a PCR test drops as the Cycle threshold (Ct) increases, because there is less likely something there to be detected!

Using PCR on healthy people (no symptoms) give meaningless results. It does not prove infection; it does not prove an “asymptomatic carrier”. Yet this test has been used to determine a “case of COVID-19” which implies infection and being infectious and has led to lockdowns and the push for global vaccines.

Dr Anthony Fauci warned that Cycle thresholds (Ct) >37 is just detecting “dead nucleotides”, meaning not infectious virus. Many PCR tests for COVID-19 were set at Ct of 40-45 in 2020.

Experts have been highlighting this issue with the limitations of PCR for much of 2020.

This information around these tests has been suppressed.

December 14

UK Alpha Variant: SARS-CoV-2 variant has 17 spike protein mutations

On December 14, 2020, Matt Hancock informs UK Parliament of a new variant. The variant is referred to as SARS-CoV-2 VOC 202012/01 (Variant of Concern, year 2020, month 12, **variant 01**). [2]

The UK reported on December 21, 2020 that new SARS-CoV-2 variant had 17 mutations in the spike protein (23 overall), the target region for the COVID-19

vaccines and this may affect vaccine efficacy. [1, 3] The technical briefing stated “This is an unusually large number of mutations in a single cluster.”

By Jan 24, 2021 greater than 60 countries have detected this “UK variant” which has increased transmissibility.

In time this variant of concern (VOC) “variant 01” will be known as the Alpha variant. Virus mutations and variants are monitored with genetic sequencing and tracked by GISAID. Depending on where and how much the virus mutates can affect its transmissibility, infectivity, **vaccine effectiveness** and whether it becomes a Variant of Concern.

The release of “*The Lockdown Files*” on March 1, 2023, revealed that health minister Matt Hancock secretly wanted to ‘frighten the pants off’ the public to ensure compliance with lockdown measures by deploying this “new variant” narrative. [4]

December 15

CDC has limited data on safety of COVID-19 vaccine for pregnancy

As of December 15, 2020 the CDC recommends “healthcare personnel who are pregnant” to discuss getting the COVID-19 vaccine “with a healthcare provider” as this “might help them make an informed decision”.

Currently there is “limited data about the safety of COVID-19 vaccines for people who are pregnant”, this population was excluded from clinical trials.

“While studies **have not yet been done**, based on how mRNA vaccines work [what about LNP], experts believe they are **unlikely** to pose a risk for people who are pregnant.”!!!

“Animal developmental and reproductive toxicity (DART) studies are ongoing and studies in people who are pregnant are planned. CDC and the Food and Drug Administration (FDA) have safety monitoring systems in place to capture information about vaccination during pregnancy and will closely monitor reports.”

December 15

COVAX AMC

COVID-19 Vaccines Advance Market Commitment (COVAX AMC) is a UN backed scheme, a partnership between WHO, Gavi and CEPI. COVAX is the vaccines pillar of the ACT Accelerator collaboration and is a financing instrument for the vaccine rollout to 92 low- and middle-income economies. Meetings started November 2020 in Geneva. [1]

Based on the claim that “no one is safe, unless everyone is safe”, and making vaccines that savior.

Australia’s Jane Halton, who is the Chair of CEPI is also the co-chair of COVAX.

Australia has signed agreements. “In early 2020, CEPI raised US\$2b to expand the

number of vaccine candidates to increase the chances of success, and fund the clinical trials”.

On top of 2020 funding, more pledges were made to COVAX initiative at 2021 G7 summit.

December 18

WHO designates 2 new strains of SARS-CoV-2 as VOC (Alpha & Beta)

A new SARS-CoV-2 variant **B.1.1.7** emerged in the UK (reported Dec 14, 2020 [4]), which is more transmissible than original Wuhan virus, but there is no evidence to its severity. On December 18, 2020 the WHO designated B.1.1.7 as a Variant of Concern (VOC) and later labelled this the **Alpha** variant.

On the same day, December 18, 2020, the WHO designated **B.1.351**, first detected in South Africa, also as a VOC which later is labelled **Beta**. Both strains are found in the UK. [2]

“Concern” of these more transmissible variant has caused other European countries to cut UK off from travel as “its neighbors tried desperately to stop a fast-spreading variant of the coronavirus from leaping across the English Channel”. [3]

On December 7, 2020 the UK was the first country to begin administering the spike protein COVID-19 vaccines, 7 days later Alpha is first detected. [1] Though earliest B.1.1.7 were traced back to September 2020. [5]

On December 14, 2020 the US begins administering the COVID-19 vaccine, 15 days later on December 29, 2020 the CDC reports Alpha in the US.

Highwire – Watch >>>

December 18

FDA grants EUA for Moderna’s COVID-19 vaccine

On December 18, 2020 the U.S. Food and Drug Administration (FDA) announced they have “issued an emergency use authorization (EUA) for the second vaccine for the prevention of coronavirus disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The emergency use authorization allows the **Moderna** COVID-19 Vaccine to be distributed in the U.S. for use in individuals **18 years of age and older.**” The FDA stated the “vaccine was **94.1% effective** in preventing COVID-19 disease among these clinical trial participants with 11 cases of COVID-19 in the vaccine group and 185 in the placebo group.”

This comes the day after the December 17, 2020 VRBPAC meeting where they discussed the EUA of the **Moderna** COVID-19 Vaccine “for the prevention of COVID-19 in individuals **18 years and older.**”

This EUA is granted 4 days after the first Pfizer-BioNTech vaccines was administered in the US and 10 days before the WHO declares the virus endemic the vaccines likely not to stop transmission!

December 18

UK Alpha variant is designated

On December 18, 2020 the SARS-CoV-2 B.1.1.7 lineage (Alpha) is designated a new variant in the UK, and has been increasing in proportion of cases in parts of England since September 20, 2020, and is growing in prevalence.

"B.1.1.7 has an unusually large number of genetic changes, particularly in the spike protein. Three of these mutations have potential biological effects...As of 15th December, there are 1623 genomes in the B.1.1.7 lineage."

Mutations in spike position **501** can increase ACE2 receptor affinity thus could increase infectivity and virulence, and position **P681H** associated with the S1/S2 furin cleavage site of SARS-CoV-2, which is not found in closely related coronaviruses and has been shown to promote entry into respiratory epithelial cells and transmission in animal model – REF

Just as the vaccine rolls out in the UK, the SARS-CoV-2 spike protein mutates away from the Wuhan genomic sequence; that which the genetic vaccines code for.

December 18

South African variant reported

South African authorities announced the detection of a new variant (501Y.V2) rapidly spreading in three of their provinces, to become the main circulating strain [slide 11].

With increased transmissibility, variants may spread more easily and infect more people which could then put pressure on healthcare systems.

More studies needed to determine if mutations will affect COVID-19 vaccines.

December 18

Foreign defense forces become immune to prosecution on Australian soil

While Australian's were preparing for Christmas, the parliament passed an amendment to Australia's Defense Act 1903 that now makes foreign military and foreign police immune to prosecution when acting on Australian soil.

December 18

Study: Vaccine-induced antibody actually increases infectivity of SARS-CoV-2

Japanese paper first published December 18, 2020, shows when antibodies were made to the N-terminal domain (NTD) of the SARS-CoV-2 **spike protein**, it changed it's structure and in doing so enhanced SARS-CoV-2 infectivity. Instead of "neutralizing" the virus, the vaccine-induced antibodies made the virus more lethal. Meaning production of this antibody enhances the infectivity, a phenomenon referred to as **Antibody Dependent Enhancement (ADE)** or **pathogenic priming**. [peer reviewed version]

The spike protein is made up of different epitopes or binding domains. If antibodies were made to the receptor binding domain (RBD) it's been shown to prevent SARS-CoV-2 infection. This paper shows that antibodies made to the NTD epitope increases infectivity.

People who were hospitalized with severe COVID-19 had antibodies to this infectivity-enhancing NTD site.

All vaccines that have been approved by regulatory bodies code for this NTD region, something this paper warns should not be present in a new technology vaccines!

December 19

2.79% of first dose recipients experienced a "Health Impact Event"

At a December 19, 2020 ACIP meeting, the CDC's advisory board, Dr Thomas Clark presented slides which showed that more than 2 in 100 vaccinated were experiencing an adverse reaction. [1, 2] At this time "272,001 doses of vaccine have been administered" in the US, of which some healthcare workers have experienced serious reactions. [4, 5]

The CDC's V-safe Active Surveillance for COVID-19 Vaccines data slide showed of 112,807 registrants with a recorded 1st dose, 3,150 of these experienced a "Health Impact Event" which means they were "unable to perform normal daily activities, unable to work, required care from doctor or health care professional". That is 2.79% of vaccinated actively surveilled were adversely affected post injection of just the first dose. [3]

December 19

Israel begins it's Pfizer COVID-19 vaccine rollout

On December 19, 2020, Israel begins it's COVID-19 vaccine roll-out, the day after Hanukkah – "after paying a premium for supplies of the Pfizer/BioNTech vaccine" The first shot began with Prime Minister Netanyahu.

"If everyone cooperates, keeps the rules and goes to get vaccinated, we'll get out of this and we could well be the first country in the world to emerge from this [pandemic]. Let's do it together" said Netanyahu

By January 1, 2021, more than 10% of Israel's population is said to have received their first dose of Pfizer's vaccine. According to Pfizer executive Israel is 'a sort of laboratory' for Pfizer COVID vaccines. [1]

Four days after roll out, "the more contagious U.K. variant [later called Alpha] was detected in four people, and by February 10, 2021 "while the vaccine is preventing illness in older people, the variant now makes up about 80 percent of new cases."

December 21

EMA grants first CMA for Pfizer COVID-19 vaccine

On December 21, 2020 the European Medicines Agency (EMA) granted **Conditional Marketing Authorization (CMA)** for the Pfizer-BioNTech COVID-19 vaccine (Comirnaty) following European Medicines Agency (EMA) "positive opinion, to BNT162b2 for active immunization of individuals aged 16 years and older **to prevent COVID-19**, which is caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)" in people from 16 years of age. [1, 2]

They stating that "EMA's human medicines committee (CHMP) has completed its rigorous evaluation of Comirnaty" concluding by consensus that sufficiently robust data on the quality, safety and efficacy of the vaccine are now available to recommend a formal conditional marketing authorization."

In 2022, leaked emails would reveal that there was "concern over accelerated timelines to ensure they would meet the 'deadline' for vaccine authorization at the expense of a robust assessment", and there was great pressure placed on the EMA staff by the European Commissioner, Ursula von der Leyen, who had known close ties with Pfizer CEO. [1]

December 28

WHO: the virus will become endemic, its not the "big one", expect more "threats".

At the end of year WHO media briefing on December 28, 2020, one year into the pandemic, Dr Mike Ryan, the head of the WHO emergencies program, said: "The likely scenario is the **virus will become another endemic** virus that will remain somewhat of a threat, but a very low-level threat in the context of an effective global vaccination program. [1, 2, 3]

Dr Ryan warned that this pandemic "is not necessarily the big one", the next may be more severe. "This is a wake-up call..." "We live in an increasingly complex global society. **These threats will continue.**"

WHO chief scientist Dr Soumya Swaminathan said "**I don't believe we have the evidence** on any of the vaccines to be confident that it's going to **prevent** people from actually getting the **infection** and therefore being able to pass it on [**transmission**]..."

Director General, Tedros said “Going forward, **investing** in health will be a priority for all countries.” He said, “I think the world is understanding the **centrality** of health the hard way.”

December 28

WHO announced COVID-19 is here to stay and vaccines won't stop transmission

At a WHO press briefing Professor Heymann proclaimed “it appears at present that the destiny of SARS Coronavirus 2 is to become endemic...[we will] learn to live with COVID-19.”

On page 17 of the transcript, officials warned there is no guarantee that COVID-19 vaccines will prevent people from becoming infected with the SARS-CoV-2 virus or transmitting it to other people. [1]

With the continued use of the flawed PCR test, there is no end in sight.

December 30

Paper published on how to treat COVID-19

On December 20, 2020, Dr Peter McCullough and a huge list of co-authors, publish a paper on how to treat COVID-19 titled “Multifaceted highly targeted sequential multidrug treatment of early ambulatory high-risk SARS-CoV-2 infection (COVID-19)”. “An urgent immediate pivot from single drug to SMDT regimens should be employed as a critical strategy to deal with the large numbers of acute COVID-19 patients with the aim of reducing the intensity and duration of symptoms and avoiding hospitalization and death.”

The paper offered immediate solutions for a pandemic virus that was affecting lives and livelihoods which proved to prevent hospitalization and death in all age groups, but especially to subgroup most vulnerable to SARS-CoV-2 infection.

December 31

Australia: All cause mortality

In 2020 there were a total of 141,116 deaths in Australia, compared to 169,301 deaths registered in 2019. In 2020, 909 (0.64%) of the deaths were COVID-19 related. [1]

- Australia has a population of approximately 25,806,000, and
- the average life expectancy is 82.8 years old.
- In 2019 66% of deaths occurred in 75 years or more.

As at October 2020 the average age of death from COVID-19 in Australia was approximately 85 and the median age at death approximately 86.

Approximately 66% (700 out of 1053) of COVID-19 deaths in Australia (as at 7 September 2021) have occurred in aged care.

January 2021

January 1

Vaccine Adverse Event reports exceeds CDC's expected daily maximum

By **January 1, 2021** daily Vaccine Adverse Event Reporting System (VAERS) reports received by CDC's contractor General Dynamics Information Technology (GDIT) exceeded the expected worst case scenario of 1,000/day, this actually happened within 6 days of US roll out. [1]

On August 27, 2020 the CDC awarded GDIT a \$35.4 million contract to manage the incoming VAERS reports. The FOIA'd "contract states that they were expecting up to 1,000 VAERS reports to be filed *per day*, with up to 40% of the reports being serious in nature", up from the historical 5%. Reports exceeded 4,500/day on January 11, 2021.

Stories of vaccine injury were flooding social media in early January...but these were censored by Facebook and Twitter!

A month later on February 12, 2021 The New York Times reported that 34 million Americans had received a COVID-19 vaccine, but that "numerous federal health officials" had told them the FDA safety monitoring system "won't be capable of analyzing safety data for weeks or months"! The Times also stated that "few serious problems have been reported through" VAERS and "no deaths have conclusively been linked to the vaccines."

In February GDIT was asking for a 7 digit ID code to cope with the huge influx, as well as additional symptom codes, they reported processing a "record high" of over 40,000 VAERS reports in February, but have a backlog of 115,000 reports, and by March GDIT renegotiated their contract to accommodate a "minimum" of 25,000 reports/week which approximates to 3570/day! In March they processed 60,200 reports, but were still "unable to keep up with the increased surge in reports". They employed "over 90" backlog staffing positions – which continued every month for 2021. [2]

Meanwhile Fauci and Biden et al were claiming safe and effective!

January 4

New VOC (Beta) escapes vaccine "immune protection", starts talk of booster shots

As early as January 4, 2021, within weeks of the COVID-19 vaccine roll-out in the UK, their scientists expressed concerns that the new South African virus variant (501.V2)

may render the new vaccines totally ineffective due to the spike protein mutations and “escape from immune protection”. [2]

The South African variant (B.1.351), later referred to as the **Beta** variant of concern (VOC), is thought to escape vaccine induced immunity. The virus mutations in the spike protein region, the target site for all COVID-19 vaccines, is a concern and has already **prompted talk about developing booster shots**. [1, 3]

“Developing” implies the manufactures are looking to “tweak” the spike protein mRNA code, which technically would require more clinical trials. They didn’t do this initially, boosters initially meant more jabs of the same Wuhan variant.

January 6

EU grants CMA for Moderna COVID-19 vaccine

On January 6, 2021, Moderna’s COVID-19 mRNA vaccine received Conditional Marketing Approval (CMA) by the European Medicines Agency (EMA), meeting their criteria, stating after clinical trial evidence showed efficacy (94.1%) and safety. This is the second CMA, following Pfizer. [1, 2, 3]

January 7

Australian government announces COVID-19 vaccine roll-out strategy

On January 7, 2021, Prime Minister Scott Morrison, joined by the Minister for Health, the Secretary of the Health Department and the Chief Medical Officer, together announced Australia’s national COVID-19 vaccine roll-out strategy.

January 8

US: Thawed vaccine shots going to waste

From as early January 8, 2021 [1] reports began to emerge across the US, that health facilities were throwing out unused and spoiled COVID-19 vaccines.

“If a clinic has a no-show for a vaccine appointment that extra dose cannot be saved for the following day. Doses expire quickly after they’re **thawed**.” [1, 2, 3]

On January 4, 2021 the first US pharmacies start to administer the vaccines include Walgreens, CVS, & Walmart.

January 11

WHO declare a new VOC from Brazil (Gamma)

New variant from Brazil called P.1 (Gamma) which emerged November 2020 in Manaus, Brazil was labelled a Variant of Concern (VOC) by the WHO on January 11,

2021. By mid-January it had “caused a massive resurgence in cases across the city of 2 million people”. [1]

January 12

US remove vaccine allocation for states

On January 12, 2021 The US government reversed course and is now releasing its entire cache of COVID-19 vaccines to states — including doses previously reserved for second shots, Health and Human Services (HHS) czar Alex Azar, reasoned this to be because they “now believe that our manufacturing is predictable”.

The two vaccines currently authorized, Pfizer & Moderna, require a second doses, 21-28 days following the first dose. “The Trump administration had been holding back millions of doses to ensure that those who received the first shot would get their second.”

States are now encouraged “to immediately open up immunizations to everyone age 65 and older.”

January 13

Sinovac vaccine 50.4% efficacy

Sinovac is a Beijing-based bio-pharmaceutical company developing the SARS-CoV-2 vaccine called CoronaVac, an inactivated virus particle vaccine.

On January 13, 2021 the Brazilian clinical trial results were announced and found the vaccine to have 50.4% efficacy, BARELY over the 50% needed for regulatory approval.

- April 2020 monkey trials showed efficacy
- Sinovac trials have yielded different results across different countries.
- By the end of 2021, booster doses are needed.

January 14

Norway: 23 Elderly die following vaccine

As of January 14, 2021, 23 reports of deaths following COVID-19 vaccination had been reported to the Norwegian adverse reaction register. The Norwegian Medicines Agency have linked 13 of these deaths to “common” vaccine side effects – these were elderly nursing home patients, the very risk group we are trying to help. [1, 2] 13 of these deaths are in nursing home patients and “the reports may indicate that common side effects from mRNA vaccines, such as fever and nausea, may have led to deaths in some frail patients,” says Sigurd Hortemo, chief medical officer at the Norwegian Medicines Agency (NMA).

The NMA noted that the vaccine clinical trials “on which the temporary approval of the vaccine is based included **very few people over the age of 85**. We therefore know little about how any side effects will affect the very elderly.”

A week earlier, on January 7, 2021, 2 nursing home residents died a few days after receiving their Pfizer vaccine. Then two days after this report the post-vaccination death count rises to 29, but the age group affected is lowered to 75 years.

The UK watchdog says vaccine reactions are “normal”, following “33 elderly people living in nursing homes [who] died shortly after being immunized.”

January 14

Stories of vaccine injury and death floods social media

By January 14, 2021, just a few weeks after vaccine roll-out in the UK, US & Israel, reports of serious injuries and death following COVID-19 vaccinations have been flooding social media.

Drive-through vaccine “super-stations” were set up across the world to vaccinate as many people as possible, healthcare workers first, to get to “herd immunity”. [1, 2, 3] A collection of allergic reactions were thought to come from a particular batch of 33,000 Moderna vials distributed across the US, providers were asked to “delay” administering that batch.

Injury and death reports have continued since this time.

January 15

US Fact Sheet on WIV – risky research and military ties

On January 15, 2021 the US the State Department released a fact sheet on the *Activity at the Wuhan Institute of Virology* (WIV) which disclosed that the United States was aware that the lab had been conducting risky research on coronaviruses since 2016 and was conducting Secret CCP military research at the lab. A fact that the NIH, NIAID and their head the HHS were all aware of. [1, 2]

January 15

WHO Emergency Committee continue PHEIC

On January 15, 2021 the WHO Emergency Committee decided to continue the Public Health Emergency of International Concern (PHEIC) due to the “threat” of virus “variants”. The PHEIC is a necessary declaration to justify “emergency use” of vaccines.

At this point “the impact of vaccines in reducing transmission is yet unknown.”

January 18

The Fauci/COVID-19 Dossier released

Dr David Martin with his company M-CAM have since 1999 monitored patent activity in the arena of 'health' and compiled the comprehensive 205 page public document titled "The Fauci/COVID-19 Dossier" highlighting numerous breaches and violations of international law by the "experts" and agencies funded by taxpayers, and supplying all links to source material.

Martin states that the Dossier is

"one place to tell the story of corruption" and

"Crimes go unpunished if law enforcement don't do their job."

January 20

WHO releases PCR Medical Product Alert for PCR

Just one hour after US Presidential Inauguration of Joe Biden, the WHO released a "**Medical Product Alert**" for PCR tests to "clarify" the previous Jan 13, 2021 notification, reiterating that **false positive cases** will occur if the PCR cycle threshold (Ct) is set too high. In short they now advise labs/physicians to be mindful of the need for clinical symptoms and to not use high amplification cycles (Ct 40 to 45), but to dial it back (Ct 30) and "manual adjustment" may be necessary. [1, 2]

On December 14, 2020 the WHO already warned about PCR cycle thresholds being too high, just as the vaccine roll out began!

No longer is PCR the gold standard for diagnosis, they refer to it now as "an aid for diagnosis", meaning used in conjunction with other factors before declaring a diagnosis! Exactly what the alleged "skeptics" have been warning for months as the test is done on healthy people and a positive result renders them statistically ill or "asymptomatic".

Compare this to the WHO's criteria for accepting a case of MERS in 2014, a positive antibody test was needed – proof of infection.

Throughout 2020 many global experts have been calling out the high false positive rates from the PCR test, which when used on masses of healthy people caused high numbers of "cases", especially just before the November 3rd, 2020 US Presidential Election.

Each time PCR goes through a cycle, it doubles its reproduction, called amplification. The high number of cycles are known to return a high level of "false positives". Any positive result was considered a "case" statistic and that person was "diagnosed", often solely on the test, as infected, which is why the term "casedemic" emerged globally.

January 24

WHO Advice to healthcare professionals re COVID-19 vaccines

As per WHO Regulatory Update on COVID-19 they provide guidance to healthcare providers on how to answer COVID-19 vaccine related questions. Their first claim is "there are still few effective anti-viral medicines for treatment of COVID-19 infection", thereby justifying a vaccine. This is contrary to the experience of many frontline doctors.

January 25

TGA grants first COVID-19 vaccine Provisional Registration – Pfizer-BioNTech

On January 25, 2021 Australia's TGA grants **Provisional Registration** for Pfizer Australia Pty Ltd's mRNA COVID-19 Vaccine for 16 years and older, the first vaccine for COVID-19 to receive "provisional approval" in Australia and the **first** new gene technology vaccine ever used. [1, 2, 3]

COMIRNATY (BNT162b2 [mRNA]) COVID-19 Vaccine has provisional approval for the indication below:

- Active immunization to **prevent** coronavirus disease 2019 (COVID-19) caused by SARS-CoV-2
- The use of this vaccine should be in accordance with official recommendations.
- The decision has been made on the basis of **short-term efficacy and safety data**. [clinical trial]
- Continued approval **depends** on the evidence of longer-term efficacy and safety from ongoing clinical trials and post-market assessment.

This product, like **all** provisionally registered products, falls under the TGA **black triangle** safety monitoring scheme.

January 25

Moderna begins vaccine booster trials as evidence of "waning immunity" emerges

In a January 25, 2021 press release Moderna announce the "**waning immunity**" potential of their COVID-19 vaccine against mutating SARS-CoV-2 variants, in particular to the South African variant B.1.351 which is later called **Beta**. [1]

*"Out of an **abundance of caution** and **leveraging the flexibility of our mRNA platform**, we are advancing an emerging **variant booster candidate** against the variant first identified in the Republic of South Africa into the clinic to determine if it will be more effective to boost titers against this and potentially future variants."* said Stéphane Bancel, Chief Executive Officer of Moderna, confirming talk from earlier in the month about boosters.

Moderna announced they will:

- **First**, “test an additional booster dose “of its **current** COVID-19 Vaccine (mRNA-1273) to study the ability to further increase neutralizing titers against emerging strains beyond the existing primary vaccination series.
- **Second**, they would begin “an emerging **variant booster candidate** (mRNA-1273.351) against the B.1.351 variant...into preclinical studies and a Phase 1 study in the U.S. to evaluate the immunological benefit of boosting with strain-specific spike proteins.
- Moderna expects either one will “further boost neutralizing titers in combination with all of the leading vaccine candidates.”

January 26

COVID-19 vaccines won't stop infection or transmission of SARS-CoV-2

By January 26, 2021, it was already being talked about by public health experts, that the newly rolled-out COVID-19 vaccines will likely **NOT prevent infection** but more importantly they don't know if it will **stop community transmission** of the SARS-CoV-2 virus, the exact justification for mandating vaccines!

The vaccine trials were only designed to assess clinical disease (COVID-19) not prevention of infection or assessing their ability to stop transmission.

The argument supporting vaccination becomes that the vaccine will reduce viral load, and thus assumed to reduce community transmission. But “asymptomatic” individuals already have reduced viral load, if anything viable virus at all, and the already infected produce natural, long-lasting protection.

January 27

CDC begins defining a “vaccine breakthrough case” as “vaccine failure” becomes obvious

On **January 27, 2021** the CDC (in an email obtained under Freedom of Information) defined a COVID-19 “**vaccine breakthrough case**” as “a patient who has SARS-CoV-2 RNA or antigen detected on a respiratory specimen collected [greater than or equal to] **7 days** after completing the primary series of an FDA-authorized SARS-CoV-2 vaccine” [1, 2]

Though in retrospect, we learn CDC's Dr Fisher as early as **December 21, 2020**, only 7 days after rollout begins, he was directed by a superior “to start working on a protocol to evaluate COVID vaccine failures or breakthrough cases.” Also on **January 30, 2021**, CDC Director, Dr. Rochelle Walensky, began planting concern about virus variants being a “growing threat” of escaping the protection of vaccines.

On **January 27, 2021** at the CDC a 1-page internal document about “**vaccine failure**” was being distributed by CDC medical officer Dr. Thomas Clark the Epoch Times reveals, but under FOIA it is fully redacted.

On **February 2, 2021**, in an email, the CDC's Vaccine Breakthrough Case Investigation Team, led by Dr Fisher and part of the COVID-19 Vaccine Taskforce, **alters the definition of a breakthrough case** to be least **14 days** post the completion of a primary dose series of injections. This instantly eliminates cases and provides an inflated and misleading view of vaccine effectiveness. [3]

*"A US. resident who has SARS-CoV-2 RNA or antigen detected on a respiratory specimen collected [greater than or equal to] **14 days** after completing the primary series of an FDA-authorized COVID-19 Vaccine."*

On **February 4, 2021** the CDC communicated with US States on how to count vaccine breakthrough cases and which to exclude!

It wasn't until **April 15, 2021** that the CDC began reporting vaccine Breakthrough Cases, which included some who were hospitalized and died. [4, 5]

On May 1, 2021 the " CDC transitioned from monitoring all reported vaccine breakthrough cases to focus on identifying and investigating only hospitalized or fatal cases due to any cause". [6, 7]

In an email to the Epoch Times it was claimed the "CDC made the change to the definition of a breakthrough infection time period due to the most current data that showed that the 14-day period **was required** for an effective **antibody response** to the vaccines." At this point the CDC are **assuming** antibody production is equivalent to "preventing infection", a theory. They claimed to have wanted to "eliminate cases where exposure [to the virus] happened before the vaccination response [antibody production] would be effective."

As Dr Harvey Risch points out to Epoch Times, "If the vaccines don't work for the first 7 or 14 days or **increase risk of getting COVID-19 during that period**, that is part of what happens when they [the mass vaccination program] are deployed in a population."

Dr Jay Bhattacharya told The Epoch Times in an email, the CDC should have warned "recently vaccinated vulnerable older people that they were at higher risk for being infected during that period."

January 28

WHO launch a team to investigate SARS-CoV-2 origin

Upon the back of new evidence, the US Secretary of State ,Mike Pompeo, demanded the WHO to launch an investigation into the possibility that the virus was a "accidental" lab leak.

On **January 28, 2021**, after 2 weeks of quarantine the WHO probe team begin their investigation in Wuhan, China tasked to learn the origins of SARS-CoV-2, this is a little over one year after the virus was discovered in humans.

Part of the investigation team is Peter Daszak from EcoHealth Alliance, whos organisation provides funding to the Wuhan lab for work on bat coronavirus research, a man who is clearly conflicted.

Shi Zhengli-Li who receives funding from EcoHealth Alliance and claimed no lab staff were infected, is the deputy director of the Wuhan Institute of Virology. The Wuhan lab deleted their data.

A cluster of COVID-19 case was found at the Huanan wet market, where bats were not sold, according to a paper cited by US officials in February 2020.

Lab origin is not ruled out!

February 1

February 2021

February 5

WHO: the vaccine may not stop transmission of SARS-CoV-2

On February 5, 2021 the WHO's released their interim position paper and stated "there are still critical unknowns regarding the efficacy of vaccination in reducing transmission", and that "people who are vaccinated should not be exempt from complying with other travel risk-reduction measures." [1]

Current "scientific unknowns... concerning the effectiveness of COVID-19 vaccines":

- efficacy in preventing disease.
- ability of limiting transmission including for new variants
- duration of protection
- timing of booster doses
- whether vaccination offers protection against asymptomatic infection
- age and population groups that should be prioritized for vaccination.
- how long before travel vaccines should be offered.
- possible exemption of people who have antibodies against SARS-CoV-2

For vaccines that were sold as 95% effective (Pfizer), 94.1% effective (Moderna), 2 doses 90% effective (AstraZeneca) – But what does "effective" mean?

February 9

Australia's TGA release COVID-19 Vaccine Safety Monitoring Plan

On February 9, 2021 Australia's TGA release their **COVID-19 vaccine safety monitoring plan** outlining "five key strategies to strengthen Australia's vaccine vigilance system" to assess vaccine safety. TGA's **Advisory Committee on Vaccines** (ACV) provided input to the plan. [1, 2]

February 14

Japan approves first COVID-19 vaccine – Pfizer-BioNTech

Japan's Ministry of Health, Labor and Welfare gave the first "fast-track approval" to Pfizer-BioNTech COVID-19 vaccine on Sunday **February 14, 2021** in ages 16 years and older. Stated as "95 percent effective at preventing symptoms of COVID-19". [1, 2]

On Wednesday February 17, 2021 it began rollout first with 40,000 healthcare workers who will receive two shots to be administered three weeks apart. "Of the initial group of health workers, 20,000 will participate in a study to track side effects potentially caused by the vaccine."

"A further 3.7 million front-line health workers are to begin receiving the vaccine in March, followed by 36 million people aged 65 or older from April" 2021. " People with pre-existing conditions such as diabetes or heart disease and those working at elderly care facilities will come next, and then finally the general population."

- COVID-19 vaccinations began 6 months out from the start of the 2021 Tokyo Olympics and Paralympics
- In 2020 Japan had no excess death above expected.
- By April 21, 2021 – Japan PM discussed receiving 50 M additional Pfizer doses, on top of existing agreements for 144 M doses – total 194 M doses, enough for 97 M people.
- By May 2023 Japan's CV19 vaccine dose orders totaled: Pfizer 194M, Moderna 100M, Oxford/AstraZeneca 120M, Novavax 150M, of that 564M total, 10.24M doses were donated to other countries. This includes booster shots. With Japan's population in 2021 as 125.6M, the remaining doses equate to 4.4 shots for every single person.

February 16

TGA grants Provisional Registration for AstraZeneca COVID-19 Vaccine

On February 16, 2021 the Australian TGA grants Provisional Registration for the AstraZeneca COVID-19 Vaccine, the second gene-based vaccine approved for use in Australia.

COVID-19 Vaccine AstraZeneca has provisional approval for the indication:

- Active immunization of individuals \geq 18 years old **for the prevention** of coronavirus disease 2019(COVID-19) caused by SARS-CoV-2.
- The use of this vaccine should be in accordance with official recommendations.
- The decision has been made on the basis of **short-term** efficacy and safety data. [Clinical Trial]
- Continued approval is **dependent** upon the evidence of longer-term efficacy and safety from ongoing clinical trials and post-market assessment.

"As a provisionally registered product, this medicine will remain in the Black Triangle Scheme for the duration of its provisional registration."

The TGA made a safety assessment based on clinical trials that used a meningococcal vaccine (MenACWY) as a control, and not an inert, saline placebo.

February 21

“The world is engaged in the largest clinical trial, the largest global vaccination trial ever”

On February 21, 2021, in an ABC interview with David Speers, the Australian Health Minister, Greg Hunt noted, [1, 2]

“The world is engaged in the largest clinical trial, the largest global vaccination trial ever, and we will have enormous amounts of data.” said The Hon Greg Hunt MP [3]

Hunt also said:

“One of the things that is absolutely fundamental to confidence is the **belief** in safety. And the essence of safety is a full and thorough assessment. We know from all of our research that in order to increase confidence, you need a **strong belief** in safety. “

This [HERE](#) is the Pfizer document FOIA assessment. Did Australia’s TGA do a “full and thorough assessment”?

How do you instill “belief”? explore controlling the narrative via censorship – [HERE](#)

February 22

COVID-19 vaccine roll-out begins in Australia

The Prime Minister, the Chief Medical Officer, and the Chief Nursing and Midwifery Officer, officially launched Australia’s COVID-19 vaccination program for groups at higher risk of death due to COVID-19.

February 25

FDA authorises higher storage and transport temp. for Pfizer vaccine

On February 25, 2021 in a press release the FDA authorized “alternative” storage and transport temperatures for Pfizer-BioNTech’s COVID-19 vaccine vials, to now allow the undiluted vials to be stored at “conventional temperatures commonly found in pharmaceutical freezers” for up to 2 weeks. This move makes the vaccine more widely available.

This follows Pfizer’s Feb. 19 press release stating they have data to support higher temperatures, other than the sub-zero (-80°C to -60°C (-112°F to -76°F)) that was required upon launch. These ultra-low temperatures, to keep the mRNA stable, caused transport and storage logistical issues, plus many vaccines were being thrown before used up as they fell outside of the usage guidelines.

Since November 2020, Moderna's vaccine, which also uses mRNA technology, only required a normal freezer temperature of " 2° to 8°C (36° to 46°F) for 30 days".

February 27

Johnson & Johnson Vaccine receives US EUA, Australia rejects it's use.

On February 27, 2021, following VRBPAC's green light, the US FDA granted the Johnson & Johnson (J&J) COVID-19 Vaccine **Emergency Use Authorization** (EUA) for 18 years and older. To following day, Feb 28, the CDC's ACIP committee voted unanimously to recommend the vaccine in the US population. [1]

The Janssen/J&J COVID-19 Vaccine is an adenovirus vector-based vaccine which carries the DNA code of a stabilized SARS-CoV-2 spike into the human cell. It is the first COVID-19 vaccine approved as a single dose.

In Australia, in early April it was announced that "Johnson & Johnson's one-dose vaccine will not be part of Australia's vaccine rollout...Health Minister Greg Hunt said that "similarities" to AstraZeneca's vaccine "were the reason the federal government had **decided against** pursuing the option any further." [1]

By April 2021 enough recipients of AstraZeneca's vaccine was experiencing blood-clotting issues in the under 50 age group, to steer authorities to recommend Pfizer's mRNA vaccine instead.

By May 5, 2022, the U.S. FDA limited the authorized use as the vaccine a is may cause "thrombosis with thrombocytopenia syndrome (TTS) which may be life-threatening."

February 28

Switzerland: 16 Elderly die following mRNA vaccine

At least 16 people in Switzerland, died after receiving Pfizer or Moderna COVID-19 vaccine.

"In 16 serious cases, the people concerned died at differing intervals after receiving the vaccine. Their average age was 86, and the majority of them had serious pre-existing conditions," Swissmedic said in a statement.

"According to the agency, ... fatalities had not been caused by the vaccination" – which given these are new technology "vaccines" and that the elderly weren't part of the clinical trials, how can they be so sure? [1]

The Global Times found that major Western media outlets have been downplaying the deaths following the new vaccines.

March 1

March 2021

March 2

Australia's Biosecurity Act extended

The human Biosecurity Emergency period under the Biosecurity Act (2015) was extended from 17 March 2021 for an additional **three months** until 17 June 2021, on the grounds that "the COVID-19 situation overseas continues to pose an unacceptable public health risk to Australia, including the emergence of more highly transmissible variants".

March 5

TGA Access Consortium: Changing the mRNA code is not a new product!

On March 5, 2021 Australian TGA's Access Consortium are considering changing the COVID-19 vaccine's mRNA code during the pandemic, in a provisionally registered vaccine, and compare that to what is done with seasonal influenza – yet they are completely different technologies.

"On public health and scientific considerations, Regulatory Authorities **do not consider** an updated coronavirus vaccine **to be an entirely novel product** with the resulting requirement for lengthy full-blown clinical studies."

"a regulatory approach like for seasonal updates for influenza vaccines can be taken"

"Since an updated vaccine variant will build on a previously authorized parent version with established quality, safety and efficacy; from a public health perspective, **it may be justifiable** to roll out the **new vaccine candidate** already in parallel with the previous version **in absence of** clinical immunogenicity and safety data while these studies are ongoing."

It appears that since a "booster" has been granted TGA provisional approval, changing the mRNA code may not require much regulatory oversight!!! Yet a different protein could have profound cytotoxic implications.

It appears the regulatory agency is authorizing the "vaccine platform" and not the "active ingredient" which mRNA code will force the body to manufacture. The body makes the "active ingredient", that is unique for each vaccine, but apparently not according to the regulators.

March 6

Expert warns against mass COVID-19 vaccination

Geert Vanden Bossche, DMV, PhD, an independent virologist, vaccine expert and evolutionary biologist from Belgium sent a warning to the world against mass COVID-19 vaccination in the middle of a pandemic with the wrong type of vaccines.

[1]

March 8

CDC adds the term “fully vaccinated”

On March 8, 2021 the CDC added the term “fully vaccinated” to their website specifically relating to COVID-19 vaccines, as being administered a dose of vaccine is no longer considered “vaccinated”.

“**People are considered fully vaccinated:**

- 2 weeks after their second dose in a 2-dose series, like the Pfizer or Moderna vaccines, or
- 2 weeks after a single-dose vaccine, like Johnson & Johnson’s Janssen vaccine

If it has been less than 2 weeks since your shot, or if you still need to get your second dose, you are NOT fully protected.”

They also state “COVID-19 vaccines are effective at protecting you from **getting sick** [not protected from becoming infected or prevented from transmitting the virus]. Based on what we know about COVID-19 vaccines, people who have been fully vaccinated can start to do some things that they had stopped doing because of the pandemic.” “[But] keep taking precautions in public places like **wearing a mask**, staying 6 feet apart from others, and avoiding crowds and poorly ventilated spaces” By January 5, 2022, when 3 monthly boosters caused confusion, “*Fully Vaccinnated*” speech was replaced with “*Stay up to Date*” with your vaccines!

Manipulation of definitions

March 9

AHPRA: “gag-order” placed on Australian health professionals

On March 9, 2021, Australian registered health practitioners and students were informed by their regulatory agency, the Australian Health Practitioner Regulation Agency (AHPRA) [2, 3], that they are obliged to **only** follow the COVID-19 vaccination narrative. Any objective opinion counter-narrative (anti-vaccination) to AHPRA’s “may” see them being investigated and potentially have their medical license revoked. Australian doctors are under a “gag order”. Australian doctors are fearful and some even resigned. [2]

This seems contrary to TGA’s guidance to doctors in June 2021 on promotion of COVID-19 vaccines, but to clarify, regulatory changes were made June 4, 2021, with updates designated No. 2, No. 3, No. 4. [1]

The flow-on effect of this “threat” means any vaccine exemptions and post-vaccine reaction reports may likely result in an investigation [including anonymous social media complaints! [3]]. So will doctors now actively deny adverse events following COVID-19 vaccines, event though provisionally registered products require reporting? Prime minister, at the time, Scott Morrison’s brother Alan Morrison co-chairs the AHPRA “Accreditation Committee”, the body who sets the “standards” and was established February 4, 2021, previously the 2018 established Advisory Committee.

On November 10, 2022 Senator Alex Antic asks AHPRA representative Mr Martin Fletcher whether this “position statement” has damaged the doctor-patient relationship.

March 9

CDC: ‘Vaccinated People Do Not Carry the Virus’

On March 9, 2021 The Centers for Disease Control and Prevention (CDC) Director Dr. Rochelle Walensky said those vaccinated against Covid-19 are unlikely to carry the virus, eliminating the risk that they would be contagious to others. [1]

“We’re vaccinating so very fast, our data from the CDC today suggests that vaccinated people do not carry the virus, don’t get sick — and it’s not just in the clinical trials, but it’s also in real world data,” said Walensky to MSNBC’s Rachel Maddow

According to Walensky, 93 million Americans have received at least one vaccine dose, and 51 million have received both doses, yet cases/infections are increasing and around 1,000 people per day are dying with COVID-19

In less than a month, on April 1, 2021 the CDC “walks back” Walensky’s controversial claim, stating “the evidence isn’t clear” and that she was “speaking broadly”! [2] The CDC spokesperson told the NY Times *“It’s possible that some people who are fully vaccinated could get Covid-19. The evidence isn’t clear whether they can spread the virus to others. We are continuing to evaluate the evidence.”*

March 17

Monkeypox table top simulation event

On March 17, 2021 at the Munich Security Conference (MSC) and in conjunction with the Nuclear Threats Institute (NTI) and sponsored by Open Philanthropy a tabletop simulation exercise was held which “focused on reducing high-consequence biological threats with potentially catastrophic consequences.”

The pathogen of choice for this event was an engineered, vaccine-resistant strain of **monkeypox**. [5]

This is the 3rd annual tabletop exercise organized by NTI’s Global Biological Policy and Programs team (NTI | bio) in conjunction with the MSC. [8]

This time the “fictional exercise scenario unfolded gradually through a series of short videos that participants reacted to during a facilitated discussion.” Similar to Event 201 in October 2019, which also was sponsored by facebook’s co-founder, Dustin Moskovitz of Open Philanthropy, who has investments in technologies that propose the solution for such a scenario and have benefited in this pandemic. [3, 4, 6]

From the simulation a report was produced which among other things stress that the “Scientific and political leaders must take bold action to safeguard the global bioscience and biotechnology research and development enterprise to ensure that

catastrophic accidents or deliberate misuse do not lead to the next global pandemic.” [1, 2]

The simulation report the release date for the monkeypox was May 15, 2022 which “coincidentally” was accurate for the real event! [7]

March 18

Billionaire wealth doubles during the pandemic

In the 12 months since a pandemic was declared, global billionaires have at least doubled their wealth, 13 saw their wealth increase over 500%. [list]

Many billionaires financially benefit from the pandemic, including through the shutting down of their small to medium sized competitors.

The pandemic “counter measures” caused the global economy to shrink by 3.5 percent in 2020.

March 20

Pfizer add booster assessment to ClinicalTrials.gov

Just over 3 months into the vaccine roll out in the U.S., on March 20, 2021, Pfizer updated their original clinical trial mRNA vaccine protocol to include a new assessment criteria for a third dose (**booster**). “In order to describe the boost stability of BNT162... against emerging SARS-CoV-2 VOCs, an additional dose of BNT162b2 will be given to Phase 1 participants approximately 6 to 12 months after their second dose...” [1, 2]

The mRNA vaccines were only assessed for reducing symptoms to COVID-19, and many vaccinated individuals are getting COVID-19, including severe symptoms – meaning the vaccines are “leaky”. The COVID-19 vaccines do not stop transmission or infection, and were never assessed for this, they were assessed on symptoms. On April 1st, 2021 Pfizer then added “and potentially a **fourth dose** of prototype BNT162b2VOC (BNT162b2s01, based upon the South African variant and hereafter referred to as BNT162b2SA).”

Are the mRNA synthetic codes in these “vaccines” being altered? Is that what the “b1”, “b2” “b2SA” etc. mean? This appears to be setting the stage for boosters every 6 months with a “new” synthetic mRNA code.

March 24

New “authority” pens “The Disinformation Dozen” report

From out of nowhere on January 11, 2021 the **Center for Countering Digital Hate** (CCDH) pops up, an alleged non-profit, NGO, started by Imran Ahmed, who in **just 3 months** of first appearing on the internet, were quoted by many mainstream media and health platforms, to be some alleged independent authority. [1, 2, 3, 4] The platform is ran by Imran Ahmed a “British Labor Party operative”. [5]

On **March 24, 2021** in a one-off press release they produced announced the production of their “report” called “**The Disinformation Dozen**”, which was the tool used by the media to discredit 12 prominent people, many of them highly qualified professionals, claiming they were spreading “disinformation” about vaccines, even though, most often they quoted the scientific literature.

The 12 were listed without their credentialed titles.

1. Dr Joseph Mercola
2. Robert F. Kennedy Jr. [1]
3. Ty & Charlene Bollinger
4. Sherri Tenpenny
5. Rizza Islam
6. Rashid Buttar
7. Erin Elizabeth
8. Sayer Ji
9. Kelly Brogan
10. Christiane Northrup
11. Ben Tapper
12. Kevin Jenkins

March 31

The spike protein is cytotoxic

Paper published in Circulation Research on March 31, 2021, shows how the spike protein damages cells (cytotoxic), **confirming COVID-19 is a vascular disease** [1, 2, 3] and **not** a respiratory disease.

The spike protein was thought only to play a role in attaching to the ACE-2 cell receptor, for the virus to gain entry into the cell (conferring infectivity), it is now clear from this study that spike protein is a fundamental part of the COVID-19 disease, it is pathogenic.

The new technology, gene-based COVID-19 vaccines, that have never before been used in humans and are all based on the SARS-CoV-2 spike protein genetic code (Wuhan code) as the target. While the paper focuses strictly on Covid-related issues, it unavoidably raises questions about the new vaccines based on spike proteins. Salk Institute has since updated their page stating the vaccine spike proteins that the vaccines are based around, “behave very differently”, but how do they know? [4, 5]

April 1

April 2021

April 16

First postmortem autopsy study on vaccinated.

The “first case of postmortem study in a patient vaccinated against SARS-CoV-2” was granted peer review publication. The autopsy was conducted on an 86-year-old man post vaccination. [1]

April 19

Biden administration launch their \$1B vaccine “Propaganda Plan”

Through February & March 2021 it was reported President Joe Biden was starting to talk about his \$1 billion “public awareness campaign” to “sell Americans on getting a coronavirus vaccine” to “build enthusiasm for shots” – but at that time vaccines were in short supply, so the campaign was on hold. [1, 2]

The Trump administration had already ordered 550 million doses, but Biden seems’ to want to lay claim “ordering more” according to Levin.

Documents obtained by Judicial Watch through FOIA, reveal that by April 19, 2021 through to May 31, 2021 the Biden administration set upon a **Public Education Campaign (PEC) plan** to pay for and use all means such as media, celebrities and Evangelical leaders to create and push **vaccine engagement packages**. The \$1 billion campaign pushed “only positive coverage about Covid vaccines. [3]

“These records show a disturbing and massive campaign by the Biden administration to propagandize and politicize the controversial COVID vaccine,” said Judicial Watch President Tom Fitton. “It seems as if the entire entertainment industry was an agent for the government!”

Upon the rollout of the vaccines in December 2020, \$250 million was spent targeting not the so-called “anti-vaxxers”(2 in 10 people) but on “swaying” those who were “simply unsure” about the new vaccines. Dr Fauci wanted 75-80% of the US to get vaccinated so the country “could” reach herd immunity – [for which there was no knowledge at that time whether the jabs would stop transmission – as the companies didn’t test for it]

April 20

WHO: mRNA is now a vaccine platform technology

On April 20, 2021 the WHO held an informal consultation virtual meeting on regulatory considerations for “evaluation of the quality, safety and efficacy of RNA-based prophylactic vaccines for infectious diseases” – using mRNA/LNP as the vaccine platform technology. [1]

The WHO opening statement reads:

“The global research and development of **mRNA vaccines** have progressed **rapidly** in the past few years, with a substantial impetus and major accomplishments **occurring** following the onset of the **COVID-19 pandemic**. The authorization/approval of COVID-19 mRNA vaccines and their deployment during the current pandemic have provided remarkable **proof of concept** of the capabilities and feasibilities of mRNA vaccines for human protection. The **potential of mRNA vaccine as a technology** to rapidly respond to public health emergencies of infectious diseases, in addition to application for prophylactic vaccines for additional infectious diseases, have underscored the need for **international regulatory convergence** for RNA vaccines.”

In 2018-2019 there was “considerably less clinical experience with mRNA technologies” in humans and they know see the need to develop “a document on regulatory considerations for the evaluation of mRNA vaccines”, separate to other genetic vaccines.

April 23

Israel: Myocarditis in young men potentially caused by Pfizer vaccine

On April 23, 2021 the Times of Israel article of leaked report, authored by senior ministry officials led by Prof. Dror Mevorach, revealed they were investigating a potential link between the Pfizer-BioNTech vaccine and cases of myocarditis particularly in men under 30. At the time there were 62 cases found out of 5 million vaccinated — most after their second dose and two resulted in death. [1, 2, 3] In the following weeks, social media reports of heart problems in young men seems higher than the alleged “rare” that officials would have you believe, and this is from Moderna and J&J vaccines too.

Then on May 27, 2021 the CDC report (following a May 17 VaST meeting [7]) they are investigating ‘mild’ reports of potential heart problems following COVID-19 vaccination – in young adults and adolescents following COVID-19 vaccination. They said there have been “relatively few” reports of myocarditis and “most cases appear to be **mild**,” [4, 5]

The CDC noted that mRNA vaccines, which are made by Moderna and Pfizer-BioNTech, are potentially causing the problem.

The NIH state the background “incidence of myocarditis is approximately 1.5 million cases worldwide per year. Incidence is usually estimated between 10 to 20 cases per 100,000 persons.” [6]

April 30

CDC publishes “breakthrough infections” data

“Breakthrough Infections” data collected between Jan 1, 2021 to **April 30, 2021**, was published by the CDC on May 25, 2021 which revealed during this time over 10,000 **breakthrough cases** (those who are fully vaccinated still get COVID-19) were passively reported, of which the number likely represents an under count. [1] Of the breakthrough reports: 27% were asymptomatic, 10% were hospitalized and 2% died. [2]

On May 1, 2020 the CDC transitioned to ONLY investigating breakthrough infection cases where the patients are hospitalized or die, they were no longer tracking any mild vaccine failure cases. This is called **asymmetric reporting**, where the CDC is intentionally and willfully “blind” to breakthrough cases for COVID-19 vaccination, which creates false and fraudulent talking points – claiming “cases” are “unvaccinated”. About half the cases are **vaccine failures** say’s Dr McCullough. [3] Those said to have the “highest clinical and public health significance.” They state that “breakthrough cases are expected, especially before population immunity reaches sufficient levels to further decrease transmission.... the number of COVID-19 cases, hospitalizations, and deaths that will be prevented among vaccinated persons will far exceed the number of vaccine breakthrough cases.” But they just changed how they are going to collect breakthrough case numbers! The vaccines were failing before the Delta variant was declared a variant of concern!

May 1

May 2021

May 1

CDC changes how they will report breakthrough cases

CDC transitioned from monitoring ALL reported vaccine breakthrough cases to now **only** identifying and investigating those fully vaccinated who become so sick they are **hospitalized** or **die**. This means the number of reported COVID-19 “cases” will be lower than cases representative to how testing was conducted previously.

The CDC now admit that the COVID-19 vaccines do not stop infection or transmission, and “so-called breakthrough infections after coronavirus vaccination are rare and unlikely to lead to serious illness.” [1, 2]

May 1

Transmission phenomenon experienced in the unvaccinated

In May 2021 a new phenomenon occurred in unvaccinated women who spent time around the COVID-19 vaccinated, and afterwards experienced unusual bleeding symptoms, including very young children. [2]

Pfizer clinical trial documented warned about “occupational exposure”, [1] and it appears that the US research institutes were aware of the potential for “shedding” since 2015.

As these vaccines are brand new technology, there are still many unknowns that need investigating.

May 1

Magnets stick to arms post-COVID jab!

In May 2021 videos began to appear on social media showing magnets sticking to injection sites after receiving a COVID vaccine – a strange and seemingly unlikely phenomenon.

In June 2021, a survey was conducted to explore this further, and demonstrated magnets did in fact stick to the injection sites for 29 out of 30 random volunteers in a shopping mall who had received at least one COVID jab, compared to zero out of 30 unvaccinated volunteers.

Magnetism following vaccination appears to be real, but why, how and why not everyone?

May 5

“Vaccine Regret”

Dr Zelenko says he has many patients suffering from “vaccine regret” has begun to emerge as people begin to experience or know someone with a potential vaccine side effects that the authorities say are rare or not related. [1, 2, 3]

Why did people line up to be “shot” in the first place:

- The threat of requiring a “Vaccine Passport” to move about “freely.”
- It’s promoted as a “community duty”
- Fear from dying of COVID-19
- Trusting the authorities who say it’s proven to be “safe and effective.”
- Simply follow the crowd!
- Doctor’s advice

This continues into 2022 as more vaccine injuries are experienced first-hand by many.

May 11

WHO declares Delta a new Variant of Concern (VOC)

On May 11, 2021, the WHO classified the variant (B.1.617.2), first identified in India in October 2020, as a Variant of Concern (VOC), after 6 weeks of being a Variant of Interest (VOI). [2]

From May 31, this VOC was referred to by the Greek letter “Delta”, and is said to be “the current dominant variant circulating globally”, that spreads more easily than earlier strains of the SARS-CoV-2 virus and “is responsible for more cases and deaths worldwide” according to WHO. [1]

Determined from genomic sequencing, the lineage B.1.617 contained three sublineages of B.1.617.1, B.1.617.2, and B.1.617.3, and sublineage B.1.617.2 was designated as VOC because its transmissibility was assessed to be at least equivalent to that of the Alpha variant. [3, 4]

May 11

Fauci questioned under oath about Gain of Function funding

At a US inquiry of research funding of the Wuhan Lab, Senator Rand Paul questions Dr Anthony Fauci about Gain of Function (GOF) research grant funding approved by the NIH.

Fifteen days later the senate unanimously passes an amendment banning US funding of GOF research in China.

Mounting evidence is pointing to the SARS-CoV-2 being of lab origin as after extensive searching no evidence can be found to support an animal origin. [1, 2]

May 13

UK/German – Human Augmentation program

The “Human Augmentation – The Dawn of a New Paradigm” a report published jointly by the UK Ministry of Defense, and German Federal Ministry of Defense is a “think-piece designed to set the foundation for more detailed research and development on human augmentation.” [1, 2]

“Future wars will be won, not by those with the most advanced technology, but by those who can most effectively integrate the unique capabilities of both people and machines.”

“Brain interfaces linked to machine learning algorithms have the potential to rapidly accelerate the speed and quality of decision-making.”

“six million years of evolution to where we are today and now we have the tools in our hands to decide how our continued evolution should be shaped.”

It “will require access to, and analysis of, personal data: whether it is psychophysiological variables, collection of personal reference data, analysis of medical markers, or supervision of training routines.”

This is Transhumanism!

May 16

Fauci: the vaccinated stop viral transmission, no need for masks

On May 16, 2021 the CDC relaxed mask mandates for fully vaccinated individuals, saying they “can safely choose not to wear a mask.” Contrary to a few days before! [2]

"If you are vaccinated, we are saying you are safe, you can take off your mask, and you are not at risk of severe disease or hospitalization from COVID-19. If you are not vaccinated, you are not safe" said CDC's Director Walensky.

Dr Anthony Fauci, chief medical adviser to President Biden, said that vaccinated people become "dead ends" for COVID-19.

The "fully vaccinated people can go without masks even if they have an asymptomatic case of COVID-19 because the level of virus is much lower in their nasopharynx...than it is in someone who is unvaccinated." [1]

"So even though there are breakthrough infections with vaccinated people, almost always the people are asymptomatic, and the level of virus is so low it makes it extremely unlikely – not impossible but very, very low likelihood – that they're going to transmit it," Fauci said.

The vaccinated people essentially become "dead ends" for the virus to spread within their communities. [This was soon proven untrue].

"When you get vaccinated, you not only protect your own health and that of the family but also you contribute to the community health by preventing the spread of the virus throughout the community," Fauci said. *"In other words, you become a dead end to the virus. And when there are a lot of dead ends around, the virus is not going to go anywhere. And that's when you get a point that you have a markedly diminished rate of infection in the community."*

May 19

US pediatric hospitalisations for COVID-19 overestimated

On May 19, 2021 a paper published in *Hospital Pediatrics* revealed that "universal screening" upon entry to a university pediatric hospital in California, led to an overestimation of the true number for children who are hospitalized because of COVID-19 – asymptomatic SARS-CoV-2 infections (positive test) were not distinguished from children with symptoms, and hospitalized because of COVID-19 disease.

Any pediatric patient, a child under the age of 18, when admitted to hospital in the US is tested for SARS-CoV-2, and if PCR positive they are automatically "diagnosed" as having COVID-19, but the study found that nearly half of the children NEVER developed symptoms – but were still counted as a COVID-19 admission and a COVID-19 "case".

The study looked at all admissions "between May 10, 2020 (when universal screening of all admissions began) and February 10, 2021 and found "reported hospitalization rates likely lead to overestimation of the true disease burden" in children.

Dr Scott Jensen shared that least 40% of the pediatric admissions to hospital were not "COVID-19 admissions", they were for cancer, surgeries, psychiatric episodes, suicide potential, drug overdoses and other. If that child subsequently died in hospital, they would be considered a COVID-19 death – this was a known bias since early March 2020 due to "new" death certificate "guidelines" and high amplified PCR tests.

May 19

“The pandemic has been about the vaccine”

In an interview with Dr Peter McCullough, world’s most prominent and vocal advocate for early outpatient treatment of COVID-19 symptoms in order to prevent hospitalization and death stated:

“This is the most lethal, toxic, biological agent ever injected into the human body.”

Why does CDC, WHO, FDA, NIH all push for NO early treatment in their protocol but instead make the patient wait until the symptoms escalate and they require hospitalization?

May 20

COVID-19 vaccines create 9 new billionaires

On May 20, 2021 Oxfam released a report titled, “COVID vaccines **create 9 new billionaires** with **combined wealth greater** than cost of vaccinating world’s poorest countries”. [3, 4]

Topping the list are the CEOs of **BioNTech** and then **Moderna**. The top 2 to 6 are linked to Moderna. Neither company had brought a product to market prior to their brand new technology COVID-19 mRNA vaccine. [1, 2]

The last 3 billionaires are co-founders of CanSino Biologics, manufactures of China’s Ad5-nCoV-S recombinant (Ad5-nCoV) vaccine against COVID-19. [3]

May 20

Warning vaccine spike protein gets into blood stream

In a May 20, 2021 published paper, it shows that vaccine induced spike protein circulates in plasma (the blood stream), which wasn’t supposed to happen! [1]

The injected vaccine was meant to remain at the injection site and not spread throughout the body.

- After the first Moderna mRNA dose, the spike protein was immediately detected and was shown to circulate for 14 days to 28 days.
- By the second dose, when antibodies have been produced, the free spike protein is getting “sucked up by those antibodies”, so is not detected, but that doesn’t mean it is not there.

All of this this should have been known at phase 1 of the vaccine trials, way before being released to the public.

Shortly after Dr Byram Brydal, a vaccine scientist warns [archive]:

"The SARS-CoV-2 has a spike protein on its surface. We now know spike protein gets into circulation. We thought the spike protein was a great target antigen; we never knew it was a toxin. So, by vaccinating people, we are inadvertently inoculating them with a toxin." [2]

May 21

Vaccine adverse events alarmingly high and increasing

Every day there are increasing numbers of people, including health professionals, who experience a serious adverse reaction or death, following COVID-19 vaccination, where in many cases the person was previously healthy. Real stories are being collected, including data on VAERS, though this is known to capture only 1-10% of all adverse events. [2, 3]

This is mostly not acknowledged but the authorities, and no help is provided. Physicians and nurses started pleading for help, now the general population has joined in. [1]

Websites that pull data from the public reporting systems:

- US **VAERS**
- Australian **TGA DAEN**
- UK **Yellow Card** System

May 21

mRNA vaccine LNP shown to travel through out the body, highest in ovaries

On May 21, 2021 in an interview with Dr Byram Bridle, he revealed that Freedom of Information (FOIA) documents sourced from the Japanese Regulatory Agency revealed that the **lipid nanoparticles (LNP)** used in the new genetic mRNA COVID-19 vaccines does not stay at the injection site in the arm, as officials said, but in fact travels throughout the entire body of the mice test subjects in the animal biodistribution study. [1, 2]

Worse still, they accumulated with the highest concentrations in the ovaries of the mice, raising serious concerns over whether this could affect all aspects of fertility – when injected into child-baring-aged women and pregnant women.

These findings suggest that the SARS-CoV-2 synthetic, foreign spike protein could be made in any cell in the body of an infected person, and the consequences are completely unknown – or at least not shared with the public.

May 24

Whistleblower: Facebook algorithms secretly score and censor content

Facebook data center engineer Morgan Kahmann came to Project Veritas with leaked internal documents detailing Facebook's global effort to use algorithms to secretly score and censor "vaccine hesitant" content. Even if the facts are true, the users are targeted and demoted.

Facebook "wants to build a community where everybody complies" stated the whistleblower. "Get the vaccine" or you will be singled out as an "enemy of society." Morgan was soon terminated by Facebook.

Open discourse, discussion and dialogue about the topic of vaccines and now vaccine passports is actively censored on Facebook's controlled platform.

May 26

Virus lab-leak theory is now allowed, following Biden's ordering a probe into the possibility

Following a year of "vehemently rejecting" the possibility that SARS-CoV-2 virus may have originated from a lab in Wuhan, China, it is now a hypothesis that is allowed following President Biden's **May 26, 2021** announcement of a U.S. intelligence community probe into the lab-origin possibility. This comes after learning a Trump sponsored probe was previously shut down by Biden. The media are now forced to reconsider the natural origin theory of the virus. [1, 3, 4, 5]

"Biden released the statement after his chief medical adviser Dr. Anthony Fauci was grilled Wednesday by senators about whether the WHO is beholden to China. A preliminary WHO study controlled by China this year concluded the virus likely emerged naturally." Dr Fauci admitted he was "not convinced" the virus came from nature. [2]

"Biden said that a lack of transparency from China may have hindered efforts to understand the origins of the virus" [6]

May 27

Australia invests \$5 billion in COVID-19 vaccines

As of 27 May, 2021 the Australian government has agreed to invest over \$5 billion into five COVID-19 vaccines and \$350 million to support vaccine R&D.

- Pfizer
- AstraZeneca
- Moderna
- Novavax
- COVAX

This huge tax-payer commitment is "justified" because Australia is still under a declared Biosecurity emergency, and South Australia continues in an ever

extended “state of emergency” (note to date SA has only had 4 COVID-19 designated deaths in 14 months).

The current vaccines are under TGA Provisional Approval, which is only valid for 2 years, before full approval or failure to be approved is reached. All data that the TGA regulatory body uses to assess safety and efficacy is entirely provided by the sponsor.

May 27

CDC acknowledge increasing numbers of myocarditis VAERS reports

The May 27, 2021 CDC’s COVID-19 vaccine Adverse Events update first acknowledged myocarditis, stating in “April and May of 2021, there have been increased reports to the Vaccine Adverse Event Reporting System (VAERS) of cases of inflammation of the heart—called myocarditis and pericarditis—happening after COVID-19 vaccination in the United States. These cases have been reported after vaccination with the Pfizer-BioNTech and Moderna COVID-19 vaccines and have mostly been reported in adolescents and young adults.” [1]

May 28

FOI request shows vaccine LNP does NOT stay at the injection site

On May 28, 2021 Dr Byram Bridle, a vaccine expert and part of the **Canadian COVID Care Alliance** released a warning statement on the COVID-19 vaccine safety, in particularly referencing a Pfizer **biodistribution study** from Japanese regulatory authorities [translated] which shows the PEG-coated synthetic lipid nano-particles (LNP) travel through the blood and accumulate in organs, especially in the ovaries. Demonstrating that the “vaccine” can distribute the mRNA code to any body system to start producing the spike protein at that location. [1, 2, 3, 4]

Further to this, Dr Robert Malone, the founder of the mRNA technology, when interviewed by the German Corona Investigation, voiced his concerns that Luciferase code was used to “demonstrate” that the vaccine stays at the injection site. He added that the “regulatory authorities are not sufficiently technically expert to comprehend” that they were being deceived by the data presented to them by the vaccine manufacturer. For LNP to accumulate in all body organs, means it does not stay at the injection site as was told. [5]

With the biologically active spike protein (manufactured by the body of the vaccinated) circulating in the blood (at least potentially) what measures are the red cross taking for tracking blood donations? In Australia, wait 7 days before donating because of side effects.

Australia’s TGA uses data from FDA and equivalent international regulators when assessing products to register for Australians.

May 31

ONS in UK stop reporting vaccination status for deaths

May 31, 2022 was the last day that the UK's Office of National Statistics (ONS) reported mortality data by COVID-19 vaccination status – thereby skewing the data! As of January 5, 2023 the minister is still avoiding answering a question in parliament as to why.

Prof. Norman Fenton *et al*/received a response on January 23, 2023, to their November 2022 letter which concluded "Overall, then, our view is that the Deaths by Vaccination Status publication does not provide information on vaccine effectiveness or vaccine safety, and should not be used in this way" [1]

May 31

WHO: Variants of Concern to be referred to by Greek alphabet

On May 31, 2020, the World Health Organization (WHO) announced SARS-CoV-2 mutating **Variants of Interest** (VOI) and **Variants of Concern** (VOC) will be referred to by the Greek alphabet to avoid "possible stigmatization associated with...the names of the countries they were first identified." [1]

June 1

June 2021

June 2

FOIA for Dr Fauci's emails from 2 news outlets

BuzzFeed News and The Washington Post under Freedom of Information Act (FOIA) requested the head of NIAID, Dr Fauci's emails through the period of Jan – June 2020, revealing how the 80 year old was inundated with a 1000 emails/ day, but neither article addressed his faults.

Within the 3,200 emails reveals holes in Dr Fauci's statements made under oath about the potential virus lab leak, gain of function research, his mask flip-flop. and early knowledge of the potential benefit of HCQ. [1, 2]

The emails also show his close association with Gates and the push for vaccine solutions.

Fauci's upcoming book "Expect the Unexpected" was suddenly removed from book stores. When did he have time to write that?

June 3

Comprehensive article exploring virus lab-leak theory

A comprehensive, must read, article by Katherine Eban was published in Vanity Fair which explores the fight to coverup the lab-leak theory origin of SARS-CoV-2. "Throughout 2020, the notion that the novel coronavirus leaked from a lab was off-limits. Those who dared to push for transparency say toxic politics and hidden agendas kept us in the dark."

Read Here >>>

June 4

FOIA for Dr Fauci's emails, this time from ICAN

In early 2020, ICAN made FOIA requests to NIH for documents regarding COVID-19 from Dr. Anthony Fauci. After nearly a year and a lawsuit, they have started to receive 3000 of these emails.

The emails provide insight into what health officials state in public compared to private emails – highlights reported by The Highwire. Fauci's public health advice was not based on data, what he states in public is different to his email communications.

Fauci comes back with the claim that:

"Attacks on me, quite frankly, are attacks on science".

Since April 2020 there have been calls, even a petition requesting #FireFauci, now the emails show "Fauci lied, people died" there is stronger push for an investigation.

June 5

Dr Fleming's Event 2021 – not a simulation!

Dr Richard Fleming presents via live-stream, 'Event 2021', A medical evidence and science-based presentation on the COVID-19 Pandemic, from the virus, to vaccines, treatments, and the public health response.

Dr Fleming is a preventative and nuclear cardiologist who at the outset of the COVID-19 pandemic began in-depth study of "the virus" science which revealed alarming mechanisms of action, patent ownership and potential weaponry of the spike protein.

June 6

Genetic fingerprint favours GOF virus origin

The genetic fingerprint of SARS-CoV-2 is suggested as the most compelling reason to favour the lab leak hypothesis. The rare and unnatural combination of CGG-CGG

(double CGG) is common for Gain-of-Function researchers to use for gene splicing but it is not known to occur naturally in the entire class of coronaviruses.

June 10

US senator press conference on Big Tech censorship of Lab Leak theory

US Republican senators hold a press conference to discuss Big Tech censorship around the potential lab origin of SARS-CoV-2. During 2020 any comment on twitter or YouTube discussing the potential of the virus being potentially leaked or escaped from a lab was quickly censored, deleted and designated a “conspiracy theory” as the “official” narrative was of natural origin.

Since Fauci’s emails have been released, the “fact checkers” changed their stand to now the “consider” the possibility the virus being of lab origin. [1, 2]

June 11

Just under 6000 deaths in VAERS following COVID-19 vaccines

To date (June 11, 2021) the **US VAERS**, passive vaccine injury reporting system, has received 5,993 deaths following COVID-19 vaccinations.

Mass vaccination for COVID-19 began in the US on December 14, 2020 under Emergency Use Authorization (EUA). [1, 2, 3]

VAERS is a passive vaccine adverse events reporting system ran by HHS in US. A 2010 Harvard Medical School study determined that “fewer than 1% of vaccine adverse events are reported”, and many medical professionals don’t know it exists [4, 5], which means the statistics are higher.

The HHS reporting platform is difficult to navigate, so Open VAERS downloads their stats and presents them in an easy to view format.

Reported more deaths following COVID-19 shots in 6 months, than 20 years of data from all vaccines added together, yet mass vaccinations continue. [6, 7]

The post COVID-19 vaccine death and injury statistics include children, in the population group that has a 99.99% survival rate. [8, 9,10]

US COVID-19 vaccine EUA opened up to children:

- Ages 16+ from April 19, 2021
- Ages 12-15 from May 10, 2021

The **TGA DAEN** reporting system has received 303 death reports to date. A report doesn’t mean causality, but the number of reports are alarmingly high. DAEN is a passive reporting system, and Australian doctors have been deterred from attributing a post vaccination adverse event have any association to the product, even though the TGA requires all events to be reported under provisional registration status.

June 13

Australian journalist provides evidence that the WIV housed live bats

On June 13, 2021 Australian Sky News journalist Sharri Markson reveals more coverups by trusted experts investigating the Chinese Wuhan Institute of Virology (WIV).

The question whether the virus originated from the WIV lab is looking more and more plausible by the day.

Facts as we now know them:

- The French built and funded the WIV, and once finished they were kicked out.
- The lab workers had no prior experience in a Level 4 Biosecurity Lab (BSL-4), the place where highly dangerous virus experimentation was undertaken.
- The lab did house **live bats**, a fact previously denied, and deflected blame to a Wuhan wet-market which was known did not have live bats. The lab housed bats as revealed in May 2017 launch video for the WIV lab, as obtained from Chinese Academy of Science.
- In December 2020 Daszak stated that the lab does not have live or dead bats, then in June 2021 he does a 180 turn and state's he didn't ask them, and wouldn't be surprised if the lab did have bats.
- The WIV research team had collected over 15,000 bat samples, to isolate and characterize new viruses. The **database** was wiped clean by an alleged hacker in Sept 2019, and WHO investigator Peter Daszak, who was compromised, didn't ask for access to the WIV virus database.
- Further to this on Feb 3, 2020, Peter Daszak was invited to brief the FBI and office of the director of National Intelligence, after which the later stated the virus was not man-made!
- Peter Daszak is now leading a Lancet investigation into the virus origins, remembering that in February 2020 he coauthored a paper denying the virus was man-made.

Peter Daszak, the head of EcoHealth Alliance which provides US tax dollar funding (awarded by NIH) to the Wuhan lab, has a major conflict of interest, yet global authorities allowed him to play an influential role in the virus origins investigation.

June 15

US blood samples collected late 2019 show antibodies to SARS-CoV-2

A June 15, 2021 study reveals from blood samples that SARS-CoV-2 infections were occurring in at least five U.S. states in Late 2019, based on antibodies found against SARS-CoV-2 (using two different serology tests) in nine participants' samples.

The U.S. was then experiencing a high flu season in late 2019. [1, 2]

June 18

Jesse Bloom paper: China requested NIH delete virus genomic sequences

As reported by Vanity Fair, on June 18, 2021, an evolutionary biologist named **Jesse D. Bloom** sent a draft of an unpublished scientific paper he'd written to Dr. Anthony Fauci for a heads-up. The preprint contained "sensitive revelations" about the NIH. Bloom's investigation had revealed "that a number of early SARS-CoV-2 genomic sequences mentioned in a published paper from China had somehow vanished without a trace". "Piecing together clues, Bloom established that the NIH itself had deleted the sequences from its own archive at the request of researchers in Wuhan." A zoom meeting was organized by Francis Collins for June 20, 2021, whom he invited Fauci, Kristian Andersen and Robert Garry to attend and Bloom invited Sergei Pond and Rasmus Nielsen, which the meeting turned out to be "extremely contentious" according to Bloom with "yelling". Overall, the response was said by Sergei to be "inappropriate for a scientific meeting." Kristian Andersen revealed that he was a "screener at the preprint server, which gave him access to papers that weren't yet public" and could delete or edit the paper.

June 21

FDA Approves First Oral Blood Thinning Medication for Children

On June 21, 2021 the FDA approved the first oral blood thinning medication, Pradaxa (dabigatran etexilate) oral pellets, to treat children 3 months to less than 12 years old who have venous thromboembolism (a condition where blood clots form in the veins) directly after they have been treated with a blood thinner given by injection for at least five days. The only other approved blood thinning medication for children is given by injection.

In November 2021 the dose-reduced vaccine rollout in children 5-11 years began. [1] Is this getting ahead of the expectation that children will develop blood clots to the COVID-19 vaccines, and they can be treated at home – the press say no because it is not approved in children and "There's no evidence connecting the Pfizer vaccine to blood clots"!

June 21

Australia: No Domestic Vaccine Passport Bill 2021

Craig Kelly Independent MP introduced into the Australian Parliament the "No Domestic Vaccine Passport Bill 2021" [1] which was seconded by George Christensen MP. [1, 2] The No Vaccine passport is supported by Senator Alex Antic

Quoting in the Explanatory Memorandum:

- Dr Damien Wojcik
- Dr Roger Hodkinson (@1hr 05min)
- Dr Peter McCullough (@1:34:25)
- Dr Tess Lawrie

Parliamentary video deleted from YT! Mirrored video here.

June 25

FDA adds myocarditis warning for mRNA vaccines

On June 25, 2021 the US FDA announced the addition of a warning “to the patient and provider fact sheets for the Moderna and Pfizer-BioNTech COVID-19 vaccines regarding the suggested increased risks of myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the tissue surrounding the heart) following vaccination.” [1]

June 25

TGA grants Provisional Registration to J&J COVID-19 vaccine

Janssen Pharma who is wholly-owned by **Johnson & Johnson (J&J)**, On June 25, 2021 were granted provisional registration by the TGA for their “COVID-19 Vaccine Janssen” for use in 18 years and over. This is the third “provisional use” vaccine in Australia, and the first one-dose COVID-19 vaccine, which was first submitted for determination on November 16, 2020. [4]

The active ingredient is “adenovirus serotype 26 encoding the SARS-CoV-2 spike glycoprotein (Ad26.COVS)” as stated in the public assessment report, together with a list of its excipients. [1, 2, 3]

The approval decision was made on preliminary short term efficacy and safety data, and is thus under ongoing clinical and post-market assessment under the black triangle scheme.

June 25

FDA warns of increased risk of heart inflammation post-jab

On June 25, 2021 the FDA update the patient and provider Fact Sheets for Moderna & Pfizer-BioNTech’s mRNA COVID-19 vaccine to warn and reflect “the suggested increased risks of **myocarditis** (inflammation of the heart muscle) and **pericarditis** (inflammation of the tissue surrounding the heart) following vaccination”...“particularly following the second dose and with onset of symptoms within a few days after vaccination.” [1, 2, 8]

Two days prior, on June 23, 2021 ACIP met to discuss the rising incidence of myocarditis (heart inflammation) but despite alarming data, [5] they didn't advise to halt the vaccine in this age group. [4]

Since March 2021 there has been documented increasing incidences of fit and healthy athletes suddenly collapsing and dying, but also in the general population. [6, 7]

Dr McCullough, a cardiologist, says there's no such thing as "mild" myocarditis from the vaccines. Once heart cells are damaged, that's permanent. An elevated troponin level from natural infection is transient and should not be confused with vaccine induced myocarditis. [3]

July 1

July 2021

July 3

CDC: Delta variant now dominant in the US

As of July 3, 2021 the CDC estimated that the "highly transmissible" Delta (B.1.617.2) variant of SARS-CoV-2 to be the dominant variant in the United States, accounting for 51.7 percent of cases/infections. It overtook the alpha (B.1.1.7) variant, which accounted for 28.7% of cases. Two weeks prior Delta was around 20% of cases. [1, 2]

At this point the US has nearly 160 million people fully vaccinated, out of a population of approx. 330 million. This accounts for around 67% of adults who've had at least 1 dose and 58.4 with 2 doses, where an average of 0.73 million doses/day are being administered. Health officials alleged concerns is they are seeing "relatively big spikes" in regions with low vaccination rates.

The variant had spread to 104 countries, including Australia, Malaysia, Indonesia and Portugal. Delta is predominant in the UK [3]

With the Delta variant the WHO still want the vaccinated to wear a mask!

July 12

Upon waning vaccine protection, Israel becomes first country to approve boosters

On July 12, 2021 Israel becomes the first country to approve the COVID-19 vaccine as a **booster – a third shot** as Delta variant spreads. [2, 3]

Israeli Health Minister Nitzan Horowitz announced Sunday July 11, 2021, that the country's health providers have been informed they may begin administering boosters to adults with weakened immune systems. [1] Within a few weeks they open the shot up to over 60's then over 50's.

"The news comes on the heels of a new report that shows there seems to be a growing correlation between vaccinated Israelis who have been infected with the

Delta variant and those who were among the first to get the vaccine in January or February of this year, suggesting that the **vaccine's protection fades" after 6 months.** [4]

July 14

WHO distinguishes between vaccine efficacy and effectiveness

The WHO publishes an information webpage that explains the difference between "vaccine efficacy, effectiveness and protection."

According to them vaccine "**efficacy**" has to do with clinical trial results and vaccine "**effectiveness**" can only be determined after the vaccine is used in the population, and vaccine level of "**protection**" has to do with the time period following the injection, protection takes time to build.

So if clinical trials determine "efficacy" why do they refer to it as 90% **effective**, if effectiveness is determined by "how the vaccine performs in the wider population"?

July 14

Australia: 309,831 sign petition against mandatory jobs

A simple petition to stop mandatory COVID-19 jobs as it violates the Nuremberg Code raised 309,831 signatures, a huge number relative to other petitions, and went from 20K to 200K in 24 hours.

Australian's are pushing back against mandatory jobs.

Compulsory Jobs was something that Professor Paul Kelly did not support in May 2020, but it is being pushed by global NGO representatives such as Jane Halton the Chair of CEPI.

CEPI was launched in 2017 at the Davos WEF, and is a key player in coordinating COVAX, on the back of this initiative they're already preparing for "disease X", with the aim of solving all future diseases in a coordinated effort with a vaccine!

If mandatory vaccination coupled with a vaccine passport get legislated, overriding informed consent, there is not stopping what product the "authorities" deem "necessary" to add to the list!

July 15

Whitehouse admit working with Big Tech to censor free speech

On July 15, 2021 the White House press secretary, Jen Psaki, told reporters the government is working closely with tech companies such as Facebook, on determining what content is deemed misinformation. She said "we're regularly making sure social media platforms are aware of the latest narratives, dangerous to public health..."

Psaki stated the "private sector company makes decisions about what information should be on their platform. Our point is that there is information that is leading to people not taking the vaccine." She says 12 people are behind the majority of "misinformation" on social media.

The lab leak theory is but one such area of "problematic posts" which are deemed a "conspiracy theory" and "misinformation", but now is allowed because the government "said so"!

Dr Shiva has documentation that the government with working with big tech to shut down free speech.

Following this revelation by the White House, America First Legal (AFL) submitted a FOIA request to HHS, CDC and FDA & NIH to uncover the degree to which these agencies and the White House have been censoring content. In April 2022, AFL needed to sue the CDC to compel their release. Which in July 2022 revealed their collusion.

July 17

"Pandemic of the unvaccinated"

On July 17, 2021, CDC's director, Rochelle Walensky said *'this is becoming a pandemic of the unvaccinated'*, as COVID-19 cases rise continued to rise in the US with the spread of the more infectious Delta variant. [1]

Yet many of those in the hospitals are actually vaccinated! Reported 11 days earlier, Israel which has 80% vaccination coverage, has 60% of those hospitalized in Israel are fully vaccinated. [2]

In early June 2021 the UK reported 75% vaccination coverage, where about 40% of those hospitalized are fully vaccinated.

Dr McCullough (others) reports that the Delta variant (and other variants) arise as a result of mass vaccination pressure, and those vaccinated are experiencing immune escape as the vaccine-induced antibodies, for all the vaccines, are not effective and thus resulting in COVID-19 illness in these individuals. The vaccinated assume they are protected when in actual fact they are not!

Vaccination is reducing the viral diversity and making a more compressed environment, with few number of mutant strains...allowing one to become more dominant. [2]

At this point a well-defined natural infection with no vaccination, appears to be produce "robust, complete and durable" immunity, avoiding reinfection, with the current strains of SARS-CoV-2. [2]

July 17

Israel: 60% those hospitalised patients are vaccinated

On July 17, 2021 it is reported that in Israel, “**around 60%** of the patients in **serious conditions** have been **vaccinated**”, and “around 90% of newly infected people over the age of 50 are fully vaccinated.”

Israel’s Prime Minister Bennett says the vaccine is ‘significantly less’ effective against the Delta variant of SARS-CoV-2.

At this time 61% of Israel was vaccinated, and based on the advertised “90% effective” for Pfizer-BioNTech COVID-19 vaccine at stopping symptoms i.e.

“COVID-19”, only 16% of those vaccinated should have be hospitalized, but the data shows 60% of those hospitalized with COVID-19 are “vaccinated”, and possibly boosted.

At this time the US news had **stopped reporting** that getting vaccinated protects your neighbor (i.e. stops infection or transmission)!

July 19

UK gov decide not to inject under 18’s

In a press release on July 19, 2021 the UK government decided not to inject children under the age of 18, with the exception of those immuno-compromised, until more safety data on the vaccines becomes available. [1, 2]

July 19

45,000 dead within 3 days following COVID jabs

It was announced that a whistleblower in the US who works with the VAERS database has signed an affidavit claiming that more than 45,000 people have died within 3 days following COVID-19 vaccines, and that the VAERS public disclosure statistics are vastly under reported. This is just one of 11-12 different government reporting systems.

A lawsuit has been filed to stop the Emergency Use Authorization of COVID-19 injections.

July 19

Lawsuit to stop the EUA of the COVID-19 jabs

America’s Frontline Doctors filed a motion to stop the Emergency Use Authorization (EUA) of the experimental COVID-19 gene therapy injections for Americans, as the evidence continues to mount to their risk, and there is no longer a need for EUA.

July 20

SA starts 7 day Lockdown over Delta variant

A seven-day lockdown with Level 5 restrictions was announced on the morning of 20th July, sparked by a Modbury case cluster and justified to “protect South Australians from further spread of the Delta variant of COVID-19 in our community.” Four new diagnosed cases, a total of 18 active cases and 1 hospitalization. [1, 2, 3, 4]

During lockdown “South Australians will only be allowed out for five reasons – to provide essential care, to seek medical assistance, to buy essential food and other goods, for essential work, or to exercise for up to 2.5 hours” [5]

Compare South Australia to National COVID-19 statistics as of July 21, 2021 [6, 7]

Note the end point is “preventing spread” not “preventing hospitalizations”, which was the original reason to “flatten the curve” in early 2020. This change of focus is to push vaccination as the solution, and not allow natural immunity.

This marks the first day masks have been mandated for South Australia.

At this point it is unknown what number of South Australians are fully vaccinated, and if the vaccinated could still be a source of infection? The Delta variant is alleged to be 60% more transmissible than original Alpha variant.

Booster shots are starting to emerge in the conversations and appears to have been the plan by the manufacturers from the beginning.

July 21

CDC withdraws EUA for it's PCR test

On July 21, 2021, the CDC announce they will withdraw their request to the U.S. Food and Drug Administration (FDA) for Emergency Use Authorization (EUA) of the CDC 2019–Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel effective December 31, 2021. This test was first introduced in February 2020 for detection of SARS-CoV-2 only.

This PCR test was used to diagnose COVID-19 “cases” in 2020, justifying the need for a vaccine. [1]

A month earlier in May 2021 a FOIA revealed that the CDC’s PCR tests were “poorly designed and came with erroneous instructions that made it doubly difficult for labs to rely on the test’s results” and the CDC lab scientists knew that the tests failed 33% of the time yet didn’t stop it’s release.

July 21

Biden claimed “you’re not going to get COVID if you have these vaccinations”

On July 21, 2021 president Joe Biden in a CNN Town Hall with Don Lemon claimed “**you’re not going to get COVID if you have these vaccinations**”. [1] Which the media then had to clean up! [2, 4]

Biden also made the statement *"We have a pandemic for those who haven't gotten a vaccination. It's that basic, that simple. Ten thousand people have recently died; 9,950 of them, thereabouts, are people who hadn't been vaccinated."* Followed by the bold claim *"If you're vaccinated, you're not going to be hospitalized, you're not going to be in an ICU unit, and you're not going to die."*

A year later the on the multi-vaccinated President would get/test positive for COVID-19, multiple times. [3]

July 22

PM Scott Morrison says "we don't have mandatory vaccination"

In an interview Australian Prime Minister Scott Morrison stated "we're all responsible for our own health", and that we should visit our GP to get informed, and the individual who ultimately "consents" to the COVID jab will fully wear the risks, including possible death and permanent injury. **"That's why we don't have mandatory vaccination"**, he said, though qualified that with... "in relation to the general population."

Morrison reiterated pro-choice message in November 11, 2021. It's each state making vaccines mandatory under their individual emergency declaration, not the Federal Government.

On March 9, 2021 AHPRA sent a letter to Australian health professionals informing them to not share any anti-vax information or risk investigation and potentially have their medical license revoked.

So, under these circumstances can there truly be "informed consent" or just "mockingbird medicine"?

Once consent is given, and the jab administered, the individual holds all the liability, since vaccine manufactures are exempt of liability. Adverse events following vaccines are not that rare, and potentially have attributed to over 45,000 deaths in the US.

July 22

TGA grant provisional approval for Pfizer vaccine for 12-15 years

On 22 July 2021, the TGA grants provisional approval for Pfizer COVID-19 vaccine for use in 12 to 15 year olds.

"The Therapeutic Goods Administration (TGA) has thoroughly, and independently, assessed the domestic and international evidence before extending its approval for the Pfizer vaccine to be administered to this age group." [1, 2]

ATAGI was stated as having "been meeting with global experts over recent days to inform their deliberations and expert advice," indicating that much or all of the data is coming from international regulator experience.

At this time just under 15% of Australians had received 2 doses.

July 25

Fauci seeks funding to launch the “prototype vaccines project” for pandemic pathogens

The New York Times on July 25, 2021, published that Dr Anthony Fauci is seeking funding to make “prototype vaccines” in advance of the next pandemic, a proposal he said “is not well known among the general public”, but is expected to start in 2022, and initial funding will come from NIAID. [1]

This **prototype vaccines project** is the brainchild of Dr. Barney Graham, deputy director of the Vaccine Research Center (VRC) at the National Institute of Allergy and Infectious Diseases which he pitched to Fauci in a private meeting in February 2017. The Director of the VRC, Dr. John Mascola, said “we are in a different state of knowledge and vaccine development” for each proposed 20 virus families they have gathered in the spreadsheet. “The work to fill in the gaps in vaccine development would be done with [NIAID] research grants to academic scientists.”

Dr Anthony Fauci is the gatekeeper to the allocation of those funds.

“The program would also establish **collaborative agreements with pharmaceutical companies to produce prototype vaccines quickly**”, Dr. Fauci said. COVID-19 set the precedent for such “collaborations” of which “days after the new coronavirus’s sequence was published, scientists had designed vaccines to fight it.”

Fauci would “like to have prototype vaccines for 10 out of the 20 virus families in the first five years of work.”

“It would require pretty large sums of money,” Dr. Fauci acknowledged. ***“But after what we’ve been through, it’s not out of the question.”***

In May 2020 Dr Graham publishes an additional paper with coauthor, the NIH scientists, Kizzmekia Corbett (who receives royalties from Moderna’s COVID-19 vaccine), titled **“Prototype pathogen approach for pandemic preparedness: world on fire”**, (a smallpox story) stating “New technologies have revolutionized vaccinology.”

July 29

President Biden announced “pandemic of the unvaccinated”; the vaccines are a failing – solution Boosters

President Biden claimed in a speech on July 29, 2021 that coronavirus is a “pandemic of the unvaccinated.” [1]

On July 29, 2021 The Highwire summarized the situation in that the “scientific and public health communities are now forced to accept the fact that neutralizing antibodies after vaccination are rapidly falling, which means the vaccine is failing. Their solution? Booster shots!”

Five days later on August 3, 2021, Israel's Health Ministry reported smashing a five-month record of new cases, the vast majority in the fully vaccinated population! Then September 30, 2021 the NEJM published a letter: "*Resurgence of SARS-CoV-2 Infection in a Highly Vaccinated Health System Workforce.*"

Clearly the vaccines are not effective at stopping infection and thus transmission, the whole point of a vaccine in the first place!

July 30

CDC: vaccines no longer prevent transmission of the virus

On July 30, 2021 the CDC released a study which showed that vaccinated and unvaccinated people who got infected with the SARS-CoV-2 Delta variant produced similar high amounts of virus – thus everyone can transmit the virus to others, eroding any community benefit. [2]

On the same day, CDC released a media statement from the Director, Rochelle Walensky, which stated that "vaccinated people infected with Delta can transmit the virus". Thus the vaccine does not prevent infection, or transmission and may only "prevent severe illness". The CDC advised everyone to wear a mask regardless of vaccination status. [1, 3]

Two days previously Walensky blamed the "unvaccinated" for most of the transmission! On August 2021 Walensky spoke to CNN and stated:

*"Our vaccines are working exceptionally well,...they continue to work well for Delta, with regard to severe illness and death – they prevent it. **But what they can't do anymore is prevent transmission.**"*

August 1

August 2021

August 2

CDC Director confirms transmission prevention of vaccines was not studied in the clinical trials

On August 2, 2021 at a White House Press Briefing CDC Director Rochelle Walensky confirmed that the prevention of virus transmission was not studied in the COVID-19 vaccine clinical trials.

She stated they worked for Alpha variant, but does not with the Delta variant. As such the vaccinated could get infected and "potentially transmit" the virus to an unvaccinated person, she neglects to mention transmission could also occur to another vaccinated person!

August 3

Alberta court case sets global precedent

Patrick King from Alberta Canada took his government to court to contest the grounding for a \$1200 fine, a fine based on a claim the pandemic virus exists. The health department could NOT provide proof the virus existed. This case forms legal grounding for other cases around the world.

August 3

COVID-19 vaccines are unnecessary, ineffective and unsafe

"Doctors for COVID Ethics", representing hundreds of doctors and scientists from all corners of the globe, updated their published paper expressing the evidence for COVID-19 vaccines conclude they are unnecessary, ineffective and unsafe.

It's important to understand the risks and benefits of these vaccines, since liability for harm will fall on all those authorizing, recommending, enforcing and administering COVID-19 vaccinations, since manufactures are exempted from legal liability.

August 5

US begins preparing their population for booster shots

Early June 2021, before mention of Delta, comments about to emerge regarding the probable need for booster shots. It was on **July 30, 2021** STAT news reported FDA's plans to speed up full approval for Pfizer's COVID-19 vaccine, allegedly spurred on because of the Delta variant, but vaccine manufactures are at the same time Pfizer has an application submitted for full licensure as well as EUA for booster shots. [1]

But on **August 5, 2021** White House's chief medical adviser Dr Anthony Fauci begins announcing the need to give **booster shots** to immuno-compromised Americans. Other countries are also looking to a booster shot amid the more transmissible Delta variant wave. [2]

A few days before, on **August 2, 2021** the head of the NIH, Francis Collins (Fauci's boss) told the press that right now "*there is no evidence that we need to go ahead with boosters*" as the existing vaccines have "*high effectiveness towards Delta*", a message others have stated but is now contradictory to the emerging narrative. [3, 8]

Then on **August 6, 2021** the Washington Post published that "extra shots are **expected** to be authorized within days or weeks, according to federal officials who spoke on the condition of **anonymity** because the **plan** has not been announced." This article adds fuel to the chain of events that is preparing the public for imminent boosters. [4]

On **August 8, 2022**, Dr Fauci is interviewed on a range of topics including boosters where he states that because of “*attenuation of protection...sooner or later...we’re going to have to give an additional boost to people*” he also points out that those previously infected should also get the boost. [5]

Following FDA’s 3rd shot, booster approval on **August 12, 2021** for immuno-compromised **only**, the next day, on **August 13, 2021**, the CDC’s ACIP committee met and voted unanimously to recommended booster shot for both Pfizer (12+) & Moderna’s (18+) vaccine for the immuno-compromised, but this opens the door for everyone. [6, 7, 9]

But then on **August 18, 2021** the Biden administration announced their plan to roll out a third dose (booster) of the Pfizer or Moderna vaccine to everyone by September – just 8 months after recipients’ second jab, pending an independent evaluation by the FDA.

On **August 24, 2021** Jeff Zients, the White House COVID-19 response coordinator announced they are moving “aggressively” to roll out booster shots by fall (September) to Americans, even though FDA has not cleared any third doses for any vaccine. The Delta variant is spreading, vaccine manufactures have started announcing an antibody response in their “booster trials”, and “health officials” have already stated vaccine should be ready!. [1]

On **August 29, 2021** Fauci is now “certain” that all Americans would need booster shots!

By **September 1, 2021** two senior officials. Marion Gruber, director of the FDA’s Office of Vaccines Research & Review, and deputy director Phil Krause, resign from the FDA over Biden’s booster push prior to approval.

The vaccine manufactures wrote “booster doses” into their initial clinical trials....they anticipated the vaccines would not produce long-term protection!

J&J – Booster cohort – HERE

August 5

CDC admit vaccines don’t stop transmission

On August 5, 2021 the CDC director Rochelle Walensky finally admitted the vaccines do not prevent transmission [3], thus vaccinated individuals can still spread the virus to the vulnerable – the entire point of mandating the COVID-19 vaccines for healthcare workers *et al* in the first place. [1, 2, 4]

Though Walensky still claims “the “vaccines are working exceptionally well...with regard to severe illness and death – they prevent it”, the vaccine can now make you asymptomatic and pass the virus onto someone else...the entire reason for locking everyone down until a vaccine was available for everyone!

On October 10, 2022 a Pfizer spokesperson admitted to the European Parliament committee that they never tested the vaccine to see if it stopped transmission!

August 5

First Australian company to mandate COVID-19 vaccines for staff

Shepparton food processor SPC on August 5, 2021, is the first company in Australia to mandate the still experimental, provisionally registered COVID-19 vaccines of all staff, or “ risk being barred from on-site work”.

August 5

Dr Shiva's historic lawsuit the MSM won't cover

Dr Shiva Ayyadurai, MIT PhD provides powerful insight on the Stew Peter's Show discussing his historic court case, representing himself against Big Government and Big Tech's collusion to stop free speech of a political candidate, a topic main stream media haven't covered.

Dr Shiva shares his election story and reveals that through his journey of investigation he uncovered the playbook documents that layout the system of how government colludes with Twitter to illegally censor American citizens.

August 5

Morrison's National Cabinet an agent of deception

The Administrative Appeals Tribunal on 5th August, 2021, delivered by Federal Court judge Richard White, said that “National Cabinet” had not been established as a committee of the Morrison Cabinet and as such could not be included under the “secrecy exemption” of the FOI Act. Justice White rejected the Morrison government's plea it was a committee of the federal Cabinet. [1]

A June 1, 2020 FOI request failed to provide usual documents to justify the March 13, 2020 creation of a National Cabinet (NC), under the auspicious of a National COVID-19 response group. The body includes the Prime Minister, each State Premier and Chief Ministers. [2]

The NC first met on March 15, 2020. After each NC meeting the Prime Minister holds a press conference announcing the “decisions of the National Cabinet” regarding the COVID-19 response. Each State chooses whether to implement decisions or not, this is not consistent with a Cabinet, yet those decisions reference the National Cabinet's recommendations including their National vaccine rollout.

The NC are now subject to FOI requests, they are not exempt as decided by Justice White.

On 29 May 2020, the National Cabinet agreed to the cessation of the 1992 formed Council of Australian Governments (COAG) [archive].

August 6

After 20 months SARS-CoV-2 has not been isolated

Thousands of FOI requests from around the globe are coming in and show that the “virus has never been isolated, purified, sequenced, characterised or proven to exist”. The SARS-CoV-2 virus is a “digital theoretical extraction, made on a computer from a genomic database”. [1, 2] (also see May 5, 2020)

But the narrative continues “that there is a new distinct SARS-CoV-2 virus which is spreading, infecting and causing the disease COVID-19” [3]. Yet still after 20 months, governments around the world cannot prove this virus to exist, other than as a computer genomic model.

Reminder: the disease labelled COVID-19 is a collection of symptoms or a positive PCR test (with or without symptoms), and anything in between, but is there only one causal agent for the collection of symptoms where you may or may not have them all?

August 6

Adverse Events in 12-17 year old post jab

At the time the CDC morbidity and mortality report shows 863 serious adverse events out of 75,000 were children (1.2%) in 12 to 17 year old age range, which includes

- 14 deaths (2 brain bleeds, 2 heart attacks, 2 heart failure within few weeks of 2nd shot).
- Over 40% myocarditis (inflammation in the heart),
- 41% chest pain,
- 40% with high troponin levels indicating cardiac muscle damage.

The authorities now want to expand trials into 2 -10-year-old children who are statistically at negligible risk from COVID-19.

August 8

Report: UK, Isreal and US it's the vaccinated in ICUs

Independent investigator Sarah Westall compiles article showing in Israel: “95% severe patients vaccinated” and in the UK: “6.6 times higher vaccinated death rate” and doctors across US are reporting that ICU's are filling up with vaccinated patients suffering vaccine reactions, but labelled COVID-19.

August 9

US mandate COVID-19 shots for all military

On August 9, 2021 President Biden announced his “support” for the Department of Defense to mandated the emergency use authorized COVID-19 vaccine for the military – stating “These vaccines will save lives. Period. They are safe. They are

effective." On July 29, 2021 Biden had ordered the military to start taking steps toward vaccine mandates.

Though there were great concerns for adverse effect from the shots. [8, 9] More than 60,000 military personnel refused the jab and were "cut off from their military benefits".

On August 24, 2021 the Secretary of Defense announced [1] that COVID-19 vaccinations are mandated for US Service Members, on the premise that "mandatory COVID-19 vaccinations for service members are necessary to protect the health and readiness of the force." [2, 4]

On November 30, 2022 it was reported that more than 20 Republican governors were calling on Congress to remove and prohibit the Biden administration's COVID-19 vaccine mandate for members of the U.S. armed services.

By January 11, 2023 the mandates ended [3] despite the White House and Pentagon wanting them to stay. [5, 6, 7]

August 9

US Military to be mandated to receive CV19 vaccine

On August 9, 2021 the Pentagon announced its intention to mandate all active duty US military personnel to receive a COVID-19 vaccine by September 15, 2021. [1, 2] Defense Secretary Lloyd Austin wrote "I will seek the president's approval to make the vaccines mandatory no later than mid-September, or immediately upon [full approval of the vaccine by the Food and Drug Administration], whichever comes first". The FDA granted full approval to the Pfizer-BioNTech COVID vaccine on August 23, 2021!

August 9

TGA grants provisional registration for Moderna's COVID-19 vaccine

On August 9, 2021 the Moderna COVID-19 genetic vaccine (mRNA-1273) called Spikevax (Elasomeran) was granted **provisional registration** by TGA for use in 18 years and over. The submission was accepted on 24 June 2021 and **approved in just 23 days**, a "standard application" takes 255 working days.

This vaccine contains a long excipients list, and like other COVID-19 vaccines under this fast-tracked provisional approval process it too is still under investigation.

Approval was granted "for active immunisation to **prevent** coronavirus disease-2019 (COVID-19)", the symptoms, not for the prevention of SARS-CoV-2 the virus.

August 12

For the record at this point in time

For the record, the Australian TGA still states that “vaccination against COVID-19 is the most effective way to reduce deaths and severe illness from infection.” This, in light of overwhelming data to support the early use of ivermectin, and other early treatments that have demonstrated to saving lives.

The TGA is 100% funded by sponsors (Big Pharma), and as ivermectin is an off-patent, cheap drug there has no financial incentive for the manufacturer to sponsor an expanded use submission to include COVID-19, though the Australian government has been petitioned to make this submission on behalf of Australian taxpayers.

August 18

Biden approves booster shots before FDA authorise their use

On August 18, 2021 President Biden announced the plan to roll out COVID-19 booster shots to everyone even though the FDA had not fully assessed or approved their use!

August 18

Blood from vaccinated patients show rouleaux formations

German physician Dr Barbel Gittalah takes blood from 10-15 COVID-19 vaccinated patients per week and views it under a light microscope. She is finding severe blood cell stacking called rouleaux formations, a phenomenon often seen in patients with blood cancers. [1, 2]

French doctors are finding the same – comparing unvaccinated blood to the blood of the COVID-19 vaccinated.

This **blood cell clumping and coiling** does not flow and is possible the beginning of thrombotic coagulation – blood clotting.

August 23

FDA Grants FULL Approval to First COVID-19 Vaccine, but no product will be available

In the fastest time in history and before the clinical trials are complete, On August 23, 2021, the US FDA grants approval of BioNTech COVID-19 vaccine called Comirnaty for 16 years and older even though their own data shows higher all-cause deaths amongst the trial vaccinated group.

On the same day, the FDA publishes another letter addressed to Pfizer granting EUA for their vaccine in 12–15-year-olds.

Dr Robert Malone shares that he doesn't believe these are legally the same products, but FDA documents state licensed and EUA formulations are the same.

Granting approval is suspicious in light of 9,024 reported deaths in US following the Pfizer COVID-19 vaccine, which could be as many as 200,000 deaths, for a product

with no solid long-term safety data, because the Pfizer placebo control group was un-blinded in December 16, 2020.

Did Pfizer's early 2020 lobbying efforts to the FDA and CDC help with this approval? Totaling \$13.2 million in 2020, the most since 2009.

This product approval is another example of unprecedented deviation from normal protocols; failing to adhere to the normal regulatory process with checks and balances. [1, 2, 3, 4]

Pfizer appear to be intentionally not marketing their newly approved product labelled COMIRNATY, which is unusual.

Update June 4, 2022 – Pfizer quietly admit they will never manufacture the FDA approved Comirnaty! [5]

August 27

Biden's NI 90-day investigation into virus origin – inconclusive

On August 27, 2021 the US Office of the Director of **National Intelligence** (ODNI) released an *Unclassified Summary of Assessment on COVID-19 Origins*. This was the summary of the full classified report which was "the result of a 90-day investigation by US intelligence agencies requested by President Biden to bring us closer to a definitive conclusion on the origins of the SARS-CoV-2 virus." [1] Following alleged concern over anti-Asian violence.

They "judge the virus was not developed as a biological weapon" but the investigation was "inconclusive". The summary report stated "China's cooperation most likely would be needed to reach a conclusive assessment of the origins of COVID-19."

Two months later on October 29, 2021 the declassified report was released which does not determine the virus origin.

By December 14, 2022 the second interim US intelligence report gives "more credibility to the lab leak theory".

August 27

PHMPT send FOI request to FDA for all registration files

A Freedom of Information (FOI) request was sent to FDA by the lawyers of the non-profit group called Public Health and Medical Professionals for Transparency (PHMPT), to obtain all data and information use by FDA to grant registration of Pfizer's Comirnaty on August 23, 2021. [1]

PHMPT exists for the sole purpose of disseminating to the public the data and information in the biological product files for each of the COVID-19 vaccines, to allow independent experts to conduct their own review and analyses, starting with Pfizer. Initial document released of post-marketing data collected by Pfizer from volunteer reports, in the **first 90 days** after the EUA reveals they were well aware in Feb. 2021

that 1,223 deaths and more than **42,000 reports** totaling 139,888 adverse reactions post jab, and yet despite this warning data the FDA “has consistently maintained that the mRNA vaccine(s) are “safe and effective.”” [2]

The FDA has requested up to 75 years to fully release the data (see Dec 31, 2021 below).

Yet **post-vaccine adverse reactions**, for all COVID-19 vaccines keep piling up, including from clinical trial participants. [3, 4, 5, 6, 7, 8]

August 31

FDA officials resign after White House “approves” booster shots

On August 31, 2021 it was reported that two FDA officials, **Marion Gruber**, director of the agency’s Office of Vaccines Research and Review, and her deputy director, **Phil Krause**, announced their resignations “after the Biden administration went ahead with a booster program starting the week of September 20, [2021] – **without FDA approval**”. [1, 2, 3, 6]

On September 13, 2021 their “considerations” was published in The Lancet, together with other authors, stating: “...the currently available evidence does not show the need for widespread use of booster vaccination in populations that have received an effective primary vaccination regimen”. [7]

Emails obtained by Judicial Watch revealed that Krause was concerned about being “blindsided” by the CDC regarding booster shots. Judicial Watch also stated that top FDA officials had been “pressured by companies and the Biden administration” to impose booster approval timelines “that make no sense”.

Geert Vanden Bosche, who knows these FDA regulators, predicted more resignations, as “they’re in over their head” , they don’t understand what they’ve done. [5] The virus is worse now after mass vaccination – exactly what Geert had been warning for months.

On October 5, 2021 Francis Collins, the head of NIH and Dr Fauci’s boss, announced his resignation.

September 1

September 2021

September 1

CDC quietly change definitions of Vaccine and Vaccination to remove “immunity”

On September 1, 2021, the CDC quietly eliminated the word “immunity” from its definitions of “Vaccine” and “Vaccination” as they were both “problematic” for the current COVID-19 injections according to a FOIA request. [1, 2, 3]

VACCINE:

- was: “A product that stimulates a person’s immune system to produce **immunity** to a specific disease, protecting the person from that disease.”
- changed to: “A preparation that is used to **stimulate** the body’s immune response against diseases.”

VACCINATION [3]

- was: “The act of introducing a vaccine into the body to produce **immunity** to a specific disease.”
- changed to: “The act of introducing a vaccine into the body to produce **protection** from a specific disease”

September 1

WHO launch Hub for Pandemic and Epidemic Intelligence

On September 1, 2021 the WHO launched the *Hub for Pandemic and Epidemic Intelligence* based in Berlin, “to provide the world with better data, analytics and decisions to detect and respond to health emergencies”. [1, 2, 3]

Justified as the “COVID-19 pandemic has given us a shared experience that shows how interconnected our lives are and how public health depends on each one of us”. The Hub” will strengthen intelligence specifically for pandemics and epidemics by striving for better data, better analytics, and better decisions” ...“it will leverage WHO’s **unique** convening **power** across nearly 200 countries to foster global solutions.” [4]

At the launch, WHO representative Dr Mike Ryan stated “the main limitation in surveillance systems currently is local surveillance capacity, which needs to be strengthened and, additionally, **connected globally** in an unbreakable, interlinked system” [5]

September 2

Israel: Double dose no longer considered “vaccinated”

On September 2, 2021, Israel’s health czar Prof. Salman Zarka stated “We are updating what it means to be vaccinated,” 2 jabs are “no longer counted as vaccinated”. The third shot (**booster**) will only extend the “vaccinated” status for six months, not permanently, as more boosters are planned for the waning effectiveness of the vaccine.

This begins the change to the definition of what constitutes being “vaccinated”. Israel began vaccinating their population with Pfizer’s vaccine on December 20, 2020, 5 days after the U.S. rolled out their program.

- October 22, 2021 – US CDC changes definition of “vaccinated”

- December 7, 2021 – Australian ATAGI considering booster may be required to be considered fully vaccinated.
- December 15, 2021 – UK health secretary changes definition “vaccinated”

September 2

Australia’s political party formation numbers triple

The Electoral Legislation Amendment (Party Registration Integrity) Act 2021, changed criteria to register a new political party in Australia from 500 members to now requiring 1500 unique members, the reasoning provided is “to ensure that registered political parties have a genuine foundation of national community support.” Interesting timing in the middle of a politically charged pandemic!

September 2

TGA grant Moderna vaccine provisional registration for 12-17 years

The Therapeutic Goods Administration (TGA) has provisionally approved (PA) the use of the Moderna Australia Pty Ltd COVID-19 vaccine SPIKEVAX (elasomeran) in individuals 12 to 17 years.[1]

Previously on August 9, 2021, the TGA granted Spikevax PA for use in individuals aged 18 years and older.

September 6

Australian government sets up no-fault vaccine injury claims scheme

The Australian government granted pharmaceutical companies 100% liability immunity for their COVID-19 vaccine products. Compensation for injury and death is now the responsibility of the Australian taxpayer, under the no-fault claims scheme. [1, 2, 4, 5]

The government states most adverse events “are mild and last no longer than a couple of days”, but globally there are millions of passively captured accounts of injury or death following the vaccinations. [3] Compensation is offered to encourage vaccine uptake, and protect physicians and employers.

Vaccine injury compensation is something the US government has been doing since 1986 for all scheduled vaccines as the manufactures are liability free, and the tax payer foots the billion dollar bill.

September 7

FOIA documents reveal NIH funded GOF research

Documents obtained by The Intercept under a FOI request to the NIH reveal US federal funding of risky coronavirus research in China. [1]

In July 2021 when questioned under oath by Senator Rand Paul, Dr Fauci repeatedly denied gain-of-function research was funded by the NIH.

September 9

Biden mandates CV19 vaccine for 2/3 of US workforce

On September 9, 2021 President Biden issues two Executive Orders mandating COVID-19 vaccines for federal workers and contractors and announced new requirements for large employers and health care providers that he said would affect around 100 million workers, more than two-thirds of the U.S. workforce." [1, 2] At the time 80 million Americans were unvaccinated.

The federal worker deadline is by November 22, 2021, and the federal contractor deadline was December 8, 2021

OSHA is directed to mandate that private sector employers with 100 or more employees to require their employees receive a COVID-19 vaccine, also the Centers for Medicare & Medicaid Services (CMS) at the Department of Health and Human Services (HHS) announced the requirement for all health care workers at facilities participating in Medicare and Medicaid to be fully vaccinated. [3, 4, 5]

Even though an August 24, 2021 pre-print study with CDC-affiliated authors showed that the vaccinated had high viral loads (break through cases)...vaccination was not going to stop transmission. [6]

September 10

TGA: Ivermectin banned in Australia

TGA Secretary, Professor John Skerritt amended the Poisons Standard legislation that made it no longer possible for GP's in Australia to prescribe ivermectin for early COVID-19 treatment, due to an alleged "public health risk". [1, 2]

Provisional registration for ALL COVID-19 vaccines would NOT be legally possible or allowed to stand, if ivermectin, historically a safe drug, was "allowed" to be available as a potential early treatment for COVID-19. [3, 4, 5]

More on Ivermectin >>>

September 16

PHMPT sues FDA demanding it produce vaccine data submitted by Pfizer

On September 16, 2021, Public Health and Medical Professionals for Transparency (PHMPT) a body of "more than 30 academics, professors, and scientists

from...prestigious universities" sued the Food & Drug Administration (FDA) as they failed to produce documents requested under the Freedom of Information Act (FOIA). Following the FDA licensing Pfizer's COVID-19 vaccine in August 2020, PHMPT via it's lawyer, submitted a FOIA request to the FDA asking them to provide "the data and information submitted...by Pfizer to license its COVID-19 vaccine".

According to PHMPT's lawyer Aaron Siri, and on the back of the FDA promising transparency, the "scientists explained that, until all the data is produced, a proper review cannot be conducted because missing even a single data set could throw off any analysis." [@14min]

Three months later, November 2021, the FDA still has produce NO documents, instead the FDA asked a federal judge to allow them to release 500 pages per month, making it 2076 before all the documents are released to the public, or around 20,000 days. Upon page-recount by the FDA the 500 pg/mth would make full release 2097 or 27,000 days or **75 years!**

"It took the FDA precisely **108 days** from when Pfizer started producing the records for licensure (on May 7, 2021) to when the FDA licensed the Pfizer vaccine (on August 23, 2021)."

The fact is the US government shields Pfizer from legal liability, gives it billions of dollars in guaranteed sales, and mandates Americans to take an experimental product, yet the agency trusted with the public's well-being, won't allow the release of the data supporting the COVID-19 vaccines "safety and efficacy" claims.

On January 6, 2022, the judge ordered the FDA to produce at least 55,000 pages per month.

Revelations from the Pfizer documents – [HERE](#)

September 23

Rome Declaration signed by 10,000 medical professionals

An international alliance of physicians and medical scientists met in Rome, Italy on September 12 – 14 for a three-day Global COVID Summit to speak "truth to power about COVID pandemic research and treatment." [1]

Nine days later more than 10,000 doctors and scientists had signed the "The Physicians Declaration," condemning policymakers for authoritarian approaches of forcing a "one-size-fits-all" COVID treatment strategy which is resulting in "needless illness and death." This declaration is referred to as the Rome Declaration.

September 29

YouTube policy announced on "managing harmful vaccine content"

On September 29, 2021 YouTube announced it will expand its vaccine misinformation policies with new guidelines targeting content that "falsely alleges that approved

vaccines are dangerous and cause chronic health effects, claims that vaccines do not reduce transmission or contraction of the disease, or contains misinformation on the substances contained in vaccines will be removed.” [1]

“YouTube doesn’t allow content that poses a serious risk of egregious harm by spreading medical misinformation about currently administered vaccines that are **approved** and **confirmed** to be safe and effective by local health authorities and by the World Health Organization (WHO).” What they neglected to clarify is that globally the vaccines have been “approved” under various emergency use authorizations under limited clinical data.

Videos are removed if they violate YouTubes policies, including those who report adverse reactions following an injection or quoting scientific literature.

September 30

Emerging: Countries with higher COVID-19 cases have higher percent vaccinated populations

A September 30, 2021 study published in the European Journal of Epidemiology found increases in COVID are unrelated to levels of vaccination across 68 countries and 2947 counties in the United States, meaning vaccination is not showing a reduction in disease incidence. Although the “trend line suggests a marginally positive association such that countries with a higher percentage of the population fully vaccinated have higher COVID-19 cases per 1 million people.” [1]

October 1

October 2021

October 5

Dr Fauci’s boss resigns

On October 5, 2021 Francis Collins, the director of the National Institutes of Health (NIH) and Dr Fauci’s boss, announced his resignation effective end 2021, within a week of two FDA officials announcing their resignation. [1, 2]

October 7

US president claims the vaccinated don’t spread SARS-CoV-2

On September 7, 2021 President Biden claims that those who receive the COVID-19 vaccines are “protected” from COVID-19 and “Cannot Spread It To You” Yet a week earlier on August 26, 2021 , the CDC had already been forced to admit in that “fully vaccinated people with delta variant breakthrough infections can spread the virus to others.” [1]

October 7

SA Direction: Mandatory Vax for Healthcare

COVID-19 vaccination, which is still under TGA Provisional Registration, are now mandatory for all Healthcare workers as per a Direction handed down by the State Coordinator, Grantly Stevens, under the state of emergency for which a declared “outbreak” of the disease COVID-19 has occurred in South Australia.

There are three phases.

- Phase 1 (hospital and ambulance) Healthcare workers who do not comply by November 1, 2021, under this direction will not be allowed to return to work,
- phase 2 workers by November 8, 2021, and
- Phase 3 by December 6, 2021.

An amendment made to direction on the 8th November provided an exemption option for other vaccine trial participants.

October 13

Study shows SARS-CoV-2 spike protein enters the cell nucleus

Published October 13, 2021, an *in vitro* study from Sweden finds that SARS-CoV-2 spike protein enters the nucleus and impairs the normal damage-repair function of the DNA. It is unknown how this will translate *in vivo* and whether this potential mechanism could lead to the formation of cancer cells in individuals following COVID-19 vaccination. [1]

October 16

South Australian Judicial Review announced

At a freedom rally in Adelaide on Saturday October 16, 2021, Retired Judge, Stuart Lindsay, on the steps of Parliament House, announced the only potential remedy to combat the current mandatory vaccination is to challenge the legal standing of the Directions through a Judicial Review in the Supreme Court of South Australia. Following this information and fundraising meetings were held to set the ball in motion.

The trial began on Wednesday April 6, 2022:

- Vaccine mandate trial led by Crows footballer Deni Varnhagen begins in SA Supreme Court – READ
- Educators and police officers back down from vaccine mandate legal challenge, less than a week before trial begins – READ
- Nicola Spurrier spared from giving evidence in COVID vaccine mandate trial – READ

- SA Police Commissioner Grant Stevens too ill (with influenza) to appear at COVID-19 vaccine mandate court case – READ
- SA govt rolled directions into new legislation May 24, 2022
- Updates – HERE

October 20

NIH admits to funding risky coronavirus research in Wuhan

On October 20, 2021, the NIH's principal deputy director, Lawrence A. Tabak sent letters to members of the House Committee on Energy and Commerce (after months of congressional demands) he acknowledged funding research that resulted in an "unexpected" coronavirus gain-of-function. [1, 2]

The letter acknowledged that **EcoHealth Alliance**:

1. "Did indeed enhance a bat coronavirus to become potentially more infectious to humans, which the NIH letter described as an "unexpected result" of the research it funded that was carried out in partnership with the Wuhan Institute of Virology."
2. "Violated the terms of its grant conditions stipulating that it had to report ["immediately"] if its research increased the viral growth of a pathogen by tenfold," ["a one log increase in growth."]

The letter stated that "The research plan was reviewed by NIH in advance of funding, and NIH determined that it did not fit the definition of research involving **enhanced** pathogens of pandemic potential (**ePPP**)", curiously the next day, on October 21, 2022, the NIH set up a redirect from its Gain-of-Function web page to a new ePPP page!

According to HHS's P3CO framework, "Enhanced PPP do not include naturally occurring pathogens that are circulating in or have been recovered from nature, **regardless of their pandemic potential.**" The NIH concluded EcoHealth Alliance directed bat coronavirus research was therefore "not subject to departmental review under the HHS P3CO Framework."

The grant (R01AI110964) called "Understanding the Risk of Bat Coronavirus Emergence" was administered by Dr Fauci's **NIAID** to EcoHealth Alliance for the period of 2014-2019. EcoHealth in turn funded the Wuhan Institute of Virology in China to do the bat coronavirus research. The WIV lab is suspected to be the origin of the SARS-CoV-2 pandemic virus, though in the NIH letter Tabak is adamant the genetic sequence of SARS-CoV-2 could not have evolved in the lab from WIV-1, RaTG13 or BANAL-52 viruses. What about manipulation in the lab? [3, 4]

October 21

Gain-of-Function definition quietly changed by NIH

According to web archives on October 21, 2021 the NIH set up a new web page titled "Research Involving Enhanced Potential Pandemic Pathogens" (ePPP).

The previous web page titled "Gain-of-Function Research Involving Potential Pandemic Pathogens" is now set to redirect to the new ePPP page. [1]

Gain of Function definition has been replaced with "enhanced potential pandemic pathogen (ePPP) research a type of so called 'Gain-of-Function' (GOF) research".

- BEFORE – Image
- AFTER – Image

The day before, on October 20, 2021, the NIH's principal deputy director, Lawrence A. Tabak in letters to members of the House Committee on Energy and Commerce acknowledged funding research that resulted in an "unexpected" gain-of-function. [2, 3]

October 21

CDC admitted that the vaccines cause heart problems

On October 21, 2021 at an ACIP meeting for "COVID-19 Vaccine Safety Updates," Dr Tom Shimabukuro, a member of the CDC COVID-19 Vaccine Task Force presented slides admitted that the COVID-19 vaccines can cause myocarditis and myopericarditis, especially in the young and after their second dose. [1, 2]

The committee ignored this like altering myocarditis risk, and 5 days later on October 26, 2021, ACIP approved the vaccine for children aged 5 to 11.

October 26

TGA approves first booster – Pfizer

On October 26, 2021, the Therapeutic Goods Administration (TGA) provisionally approved the **first booster vaccine** for Australia. The Pfizer COVID-19 vaccine, COMIRNATY, was approved as a booster (third dose) for individuals 18 years and older, to be administered at least six months after the completion of a COVID-19 vaccine primary series (initial 2 doses).

October 27

SA Direction: Mandatory Vaccination for Police

Mandatory COVID-19 Vaccination is now required for the SA Police Force. This is the first Direction handed down by the Emergency Management Act state coordinator that is outside of a "high risk" setting such as aged-care, disability care or healthcare setting for mandatory COVID-19 vaccination. [original]

Police officers who do not comply by November 15, 2021, under this direction will not be allowed to return to work.

October 29

US approve EUA for Pfizer COVID-19 vaccine for 5-11 years

On October 29, 2021, the FDA grants EUA for Pfizer's COVID-19 vaccine for children 5 to 11 years old, based on the "scientific evidence available". This occurred after CDC's ACIP panel approves the jabs by ignoring vaccine risks and knowing only 2000 children were tested and followed up for only 2 month. [4]

The HART group claim the FDA decision is based on a fraudulent model.

Within 2 weeks of this date over 1 million US kids in this age group were jabbed, and around 100,000 adverse events were reported to VAERS, of which 82% of the reported the event immediately after the jab – a major safety signal that wasn't detected in the premarket testing. VAERS is a known under reported system, yet it is revealing 1 in 10 children have experienced an adverse reaction following their jab. [1] Doctors and scientists have been warning not to vaccinate the kids with these novel COVID-19 vaccines because the risks outweigh any benefit for kids; the data shows they'll survive with no treatment. [2, 3]

October 31

Australia: International and regional borders open for the vaccinated

Australian borders set for partial reopening, the first time since March 2020. New Zealand tourists who have been vaccinated will be allowed to enter Australia from November 1st. Based on over 80% of people 16 and older in New South Wales, Victoria and Canberra are fully vaccinated [1, 2, 3, 4]

This is happening at the same time that booster shots are being rolled out in NSW. [5] How will they define "vaccinated" once boosters become the norm?

As was predicted May 2020, the cases begin to soar shortly after Australia opens.

November 1

November 2021

November 1

Australia begins booster shots

On November 1, 2021, the 3rd COVID-19 vaccine "booster dose" begins in Australia, starting with NSW.

The 3rd dose contains the exact same genetic messenger (Pfizer and Moderna) as the previous 2 doses, yet the spike protein in which the message encodes is an "extinct" original Wuhan variant spike.

November 1

5 million deaths globally attributed to COVID-19

On November 1, 2021, it is reported, according to Johns Hopkins University's coronavirus tracker, that cumulatively 5 million people globally have had their death attributed to the pandemic disease COVID-19.

Countries with the highest death numbers attributed to COVID-19 include the United States with 745,800 deaths, Brazil with more than 607,000 deaths and India with more than 450,000 deaths. [1]

These numbers include all people who died *with* COVID-19 (a "positive" PCR test, false or not, with or without symptoms) and those fewer people who died *from* COVID-19.

On November 2, 2021, the U.S. started vaccinating healthy children between the ages of 5 and 11, who are not at high risk from COVID-19. [2, 3, 4]

November 2

Ventavia whistleblower claims Pfizer data coverup

A British Medical Journal (BMJ) report on November 2, 2021, about a whistleblower, Brook Jackson, who alleges the Texas-based Ventavia Research Group, a contractor involved in **Pfizer's phase III trial** for COVID-19 vaccine in 2020, "falsified data, unblinded patients, employed inadequately trained vaccinators, and was slow to follow up on adverse events reported in Pfizer's pivotal phase III trial." Brook emailed the FDA in September 2020, the FDA took no action on her email but Ventavia fired her. [2]

In January 8, 2021 Brook filed her "federal complaint under the False Claims Act, after first warning the U.S. Food and Drug Administration (FDA) of significant concerns she witnessed." [1]

In May 2022, the Epoch Times reported that Pfizer argued in court that the company did not violate its contract because its agreement with the U.S. Department of Defense allowed them to skirt the rules.

The TGA believe this Pfizer claim represents "only 2% of the trial population". This statement by TGA spokesperson proves that they use global data from the sponsor to make assessments for vaccine Provisional approval in Australia.

Other vaccine trial participants with "unwanted" outcomes are also known to have been removed from trial datasets.

November 4

UK govt approves molnupiravir, an oral drug for COVID-19

UK government approves the first oral antiviral drug for COVID-19 called Lagevrio by the pharmaceutical company Merck (active ingredient **molnupiravir**).

As always it " follows a rigorous review of its safety, quality and effectiveness by the UK regulator and the government's independent expert scientific advisory body". The drug is an anti-viral, that "works by interfering with the virus' replication", "interfering with viral replication, littering the viral genome with mutations until the virus can no longer reproduce" and as such reduces the severity of disease. As it is a known mutagen, it has the potential to significantly accelerate the rate of mutant virus variants being shed from the recipient! Experts warn, proceed with caution. [1, 2, 3]

Australia has purchased the drug ahead of provisional registration.

The off-patent antiviral's hydroxychloroquine and ivermectin don't have big pharma backing, and their benefits and use has been suppressed.

November 7

Bill Gates: What wasn't achieved with COVID-19 pandemic

In an interview with Jeremy Hunt on November 7 2021, Bill Gates comments about his post-2015 pandemic preparedness "prophecies" that weren't heeded with Ebola, but COVID-19 pandemic allowed for R&D budgets to focus on things we didn't have. [1, 2]

He recounts what **wasn't** achieved in this COVID-19 pandemic:

"we didn't have vaccines that blocked transmission...we need a new way of doing the vaccines"... "we didn't get much by way of therapeutics"... "we didn't get the diagnostics up and running in order to achieve, well at least Australia and New Zealand [both island continents] showed that competent management could keep the death rate down pretty dramatically".

It will take tens of billions in R&D"

He also plants the seed to remind us about the threat of bioterrorism such as smallpox being brought into airports.

He continues setting the stage for the next pandemic preparedness: having the WHO "global pandemic taskforce", all in preparation for the next pandemic! *"Making vaccines cheap [mRNA platform], building big factories, eradicating the flu, getting rid of the common cold, making vaccines just a little patch you put on your arm, things that will be incredibly beneficial even in years when we don't have pandemics"*

Remember for every \$1 Gates "donates" to public health, he is returned \$20 in his own pocket!

Philanthropy is a business model: use your Foundations to donate and fund NGO's which you are on the board of, direct research funding where you choose, and at the same time get your personal Trusts to invest in the companies that will benefit from your philanthropic endeavors....and make sure you sponsor media projects so they report good things about you! Of course, none of that happens!

November 8

SA Direction: Mandatory Vax for Community Carers

Covid-19 vaccination, still under Provisional Registration are now mandatory for all Community care workers who look after the elderly and disabled persons in-home under today's Direction handed down by the state coordinator.

Carers who do not comply by November 30, 2021, under this direction will not be allowed to return to work.

November 9

Big Pharma, Big Media, Big Bird

Despite the vast majority of young children having statistically 0% chance of death from COVID-19, the "illegal marketing of an unlicensed pharmaceutical product" to children has begun in the US with CNN's Dr. Sanjay Gupta helping Big Bird "get over his fear" of taking the shot that will help shield Granny from getting COVID-19. [1] Pfizer's COVID-19 vaccine, with no long-term safety understanding, is the only shot currently under EUA for 5-11 year age group. Since Pfizer benefits greatly from this marketing campaign are they colluding with CNN?

November 16

SA Direction: Mandatory Vax for Education

COVID-19 vaccination, still only under provisional registration are now mandated for SA education workers. This is the second Direction handed down by the Emergency Management Act state coordinator that is outside "high risk" settings of aged care and health care. [original]

Educational workers who do not comply by December 10, 2021, under this direction will not be allowed to return to work.

Since March 22, 2020 when the "outbreak" of COVID-19 was declared, South Australia has reported 921 cases and 4 deaths – in 20 months.

November 17

Pfizer documents shows 1295 vaccine side effects

Under the freedom of information Act (FOIA) the FDA was ordered to release to PHMPT the Pfizer documents relied upon to make their regulatory assessment for the Pfizer COVID-19 vaccine. On 17 November 2021 a batch of documents were released and the document titled "5.3.6 post marketing experience" in Appendix 1, from page 30, shows a list of 1295 adverse events reported following vaccination. [1, 2]

November 19

Tasmania: Children bribed to get vaccinated

The Tasmanian Government is running competitions for 12-18 year old Tasmanian kids to win an Apple product if they get vaccinated by December 14, 2021.

November 20

Record number of stillbirths from fully vaccinated

On November 20, 2021, Canadian, doctor Dr Daniel Nagase speaks out about the record number of stillbirths over and above the usually number which is 1 every 2 months or 5-6 stillbirths per year. [2, 3]

In November there was a rally outcry after 13 babies were born dead within in a 24 hour period. In Waterloo, Ontario, Dr Nagase was informed there were 86 stillbirths between Jan-July 2021 of which all the mothers were fully vaccinated with COVID-19 vaccine. Hospitals deny this is occurring, and still strongly encourage pregnant women to get vaccinated. [1, 4]

Scotland launched an investigation into the "spike" in number of deaths of new born babies; "21 infants died during September within 28 days of birth".

November 26

Record number of athletes suddenly dying

The reports of athletes who suddenly collapse have been occurring since March 2021, but with increasing occurrence of late. Since 1889 there has never been so many footballers die during the game. [1, 2, 7]

Heart problems such as heart inflammation are often the cause of their collapse and is one of the known life-threatening side effects of COVID-19 vaccines, to which these athletes are often mandated to receive. Booster shots started a few months ago.

Some athletes have said no to the vaccine.

With a mounting trail of data of athletes collapsing and dying, it begs the question were they all recently vaccinated? And if so, why is this allowed to continue?

[3, 4, 5, 6] Feb 2022 deaths climbing still.

November 26

WHO declares a new VOC called Omicron

On the advice of the WHO's Technical Advisory Group on Virus Evolution, on **November 26, 2021** the WHO designated a new SARS-CoV-2 variant (B.1.1.529) which was first reported to WHO from South Africa, as a **variant of concern (VOC)** because of its high number of S1 mutations, and "potential"

to evade immunity (i.e. vaccine effectiveness). They gave it the name Omicron, notably skipping the Greek alphabet letters "Nu" and "Xi". [2, 3, 9]

Dr Coetzee from South Africa said "it was unfortunate that Omicron had been hyped as "this extremely dangerous virus variant" with multiple mutations while its virulence was still unknown." So far patients suspected of having the new variant showed "only mild symptoms" different from other variants which resulted in severe symptoms. Over half of the patients were vaccinated. [1, 7, 8]

Four fully vaccinated travelers to Botswana tested positive for this new variant. Countries health agencies and the media have gone into panic mode promoting booster shots and suspending travel, while frontline doctors call for a little health perspective.

All this is happening on the back of South Africa rejecting COVID-19 vaccine batches and now CEPI seeing it as an opportunity to tighten the "huge gap between COVID-19 vaccinations in richer and poorer countries" and use Africa as a testing ground.

The Omicron variant has achieved "immune escape from all three major antibody classes", decreasing natural immunity preventing infection, though symptoms still mild. [5, 6]

The Omicron variant is evolutionary unusual, linking back to mid-2020. There are many theories emerging how this happened, including from virologist Christian Drosten and a possible HIV-SARS-CoV-2 infected individual as the reservoir! Or maybe it is man-made!

By Dec 15, 2021 genome analysis shows potential mouse overlap, the same animal use in virology laboratories. [4]

November 26

Scientist COVID-19 positive after exposure in Taipei P3 laboratory

Taiwan confirmed that in late November, a scientist in a BSL-3 lab got infected by the delta variant of the coronavirus during lab work, she showed symptoms on November 26, 2021, the lab was later fined.

Demonstrating the lab leak theory for SARS-CoV-2 is plausible.

November 27

Dr Scott Atlas releases book providing insight into the US Coronavirus Taskforce

Dr Scott Atlas published his book *A Plague Upon Our House*, which is an account of his personal experience on the US Coronavirus Task Force, an appointment he took up in August 2020. "Atlas points to the enormous cost of the machinery of

lockdowns... all while public health massively neglected the actual at-risk population in long-term care facilities... without regard to the consequences." [1, 2, 3]
According to Dr Peter McCullough who dined Dr Atlas, mentioned that Fauci and Birx turned up to taskforce meetings with no scientific data or preparation!

November 29

First case of Omicron in North America – the fully vaccinated are carrying and transmitting the virus – but get boosted!

On November 29, 2021 the first 2 cases of the COVID-19 Omicron variant was identified in Canada, the first for North America. At this time 16 countries have identified the presence of the "highly transmissible" Omicron variant of SARS-CoV-2. This case set the CDC in motion to heavily promote **getting a booster shot** – a vaccine that still codes for the Wuhan variant! Those fully vaccinated are not prevented from getting infected or for transmitting the virus to others. [1, 2]
Shortly after the CDC announced an **"infected individual, who is fully vaccinated"** who returned from South Africa on Nov. 22, 2021 is the first case of Omicron in the United States [3]

December 1

December 2021

December 1

WHO announces plan for International Pandemic Treaty

On December 1, 2021, the World Health Organization announced their plan to develop a new pandemic treaty "strengthening" international cooperation during future pandemics. Such a treaty could potentially eradicate the national sovereignty as we know it, giving the WHO "undemocratic rights over every participating nation and its citizens". [1]

December 1

WHO: The largest vaccination campaign in history

Just under "8 billion COVID-19 vaccines have been administered worldwide by December 1, 2021, in what was the largest vaccination campaign in history" states the WHO, yet in the same paragraph downplayed the under-reporting of vaccine injury, such as in VigiAccess.

December 1

WHO: Boosters offer no protection for healthy individuals

In a press conference on December 1, 2021, Dr. Mike Ryan, head of the WHO's emergencies program stated, "right now, there is no evidence that I'm aware of that would suggest that boosting the entire population is going to necessarily provide any greater protection for otherwise healthy individuals against hospitalization or death." [1]

December 3

TGA grant provisional approval for Pfizer vaccine in 5-11 years

On December 3, 2021, the TGA grant provisionally registration to Pfizer's COVID-19 pediatric , mRNA technology vaccine for use in 5 to 11 year olds, followed up by ATAGI's approval. [1]

This decision follows the provisional approvals granted by the TGA to Pfizer for the use of COMIRNATY in individuals 12 years and older on 22 July 2021 and the **booster** dose for use in adults 18 years and older on 26 October 2021.

December 6

Pan-Sarbecovirus vaccine concept presented to WHO by Stanley Plotkins

Upon the discovery of pan-sarbecovirus neutralizing antibodies, Dr Stanley Plotkins has wasted no time to introduce the concept of a "Pan-Sarbecovirus Vaccine" at the WHO Vaccine Research meeting December 6, 2021. [1]

Taxonomically SARS-CoV-2 is a *Betacoronavirus*, of the subgenus *Sarbecovirus*, unlike SARS and MERS.

A couple of weeks later the US Army release information that they are working on a pan-coronavirus vaccine, a Spike Ferritin Nanoparticle (SpFN) COVID-19 vaccine, at the Walter Reed Army Institute of Research, said to be able to work on all SARS-CoV-2's potential variants.

December 6

WHO: Vaccine Research sets the stage for a Universal Coronavirus Vaccine

On December 6, 2021 the WHO Vaccine Research consultation meeting was held "to identify vaccine research priorities so that vaccines can further contribute to achieve the control of the pandemic everywhere."

Participants were asking questions like how are we going to deal with the "anticipated challenges for developing variant specific vaccines" so that "vaccines can further contribute to achieve the control of the pandemic everywhere".

This conference sets the stage for a **Universal Coronavirus Vaccine** (to solve the virus variant “problem”), on the back of a years-long goal of a **Universal Flu Vaccine**, (which trials started 2019) which they couldn’t do with the existing technology, and the years it would take for clinical trials to complete. [3, 4, 5] A week later on December 15th, Dr Fauci *et al* published the “urgent need” (which a pandemic creates) for a Universal Coronavirus Vaccine. A universal pan coronavirus vaccine is a “concept” already in the planning by Ralph Baric. [1, 2]

December 6

Initiative for Global Vaccine Access (Global VAX) launched

USAID Administrator Samantha Power announced the foundation of a new **whole-of-government** effort, the Initiative for Global Vaccine Access (Global VAX), to accelerate global efforts to get COVID-19 shots into arms and enhance international coordination to identify and rapidly overcome access barriers to save lives now.

“The emergence of COVID-19 hotspots and variants including Delta and Omicron underscores the importance of this global fight. Vaccinating the world is the best way to prevent future variants” according to this Global VAX initiative. [1]

Further to this Samantha Power met in a senior leadership meeting with Dr Fauci and Bill and Melinda Gates Foundation and discussed “a range of topics such as COVID-19 drug discovery, **pan-coronavirus vaccines**, and global variant tracking”

December 7

TGA grant provisional registration to Moderna for booster dose

On December 7, 2021, TGA grant provisional approval for Moderna’s **booster dose** of their COVID-19 vaccine for 18 years and over. This is the second COVID-19 vaccine to be used as a booster in Australian adults when they become eligible, six months after receiving their second dose the initial or primary vaccination course. [1, 2, 3]

“TGA provisionally approved the booster dose following careful evaluation of the available data supporting safety and efficacy. The TGA’s decision was also informed by expert advice from the Advisory Committee on Vaccines (ACV), an independent committee with scientific, clinical and consumer representation.”

The Australian Technical Advisory Group on Immunization (ATAGI) must provide final approval for use, which occurred on December 12, 2021.

December 7

A paper predicted the spike protein mutations

The authors of this paper published December 7, 2021, predicted the precise spike receptor binding domain (RBD) mutation locations, which have now transpired with the selection pressure following the mass use of spike-protein targeted vaccines. “[N]atural selection is the dominating mechanism of SARS-CoV-2 evolution, which favors mutations that strengthen viral infectivity”. Several experts have warned that “vaccinating during an outbreak” is “a bad idea due to the effects of leaky vaccines leaving behind variants that are immune to the effects of vaccination.” [1, 2, 3]

December 8

Pfizer CEO promotes booster needed to protect against Omicron variant

According to Pfizer and BioNTech CEO's, who have a vested interest in the sale of COVID-19 vaccines, say that lab studies show that a booster shot will be required to protect against Omicron variant. [1, 2]

December 10

US VAERS exceeds 20,000 deaths following COVID-19 vaccine

In 12 months, the passive Vaccine Adverse Events Reporting System (VAERS) in the US has just recently exceeded 20,000 reported deaths following the COVID-19 vaccines.

This reporting system was determined to be 99% under-reported as was concluded a Harvard Medical School study. So what really is the death toll following these spike-protein targeted vaccines.

December 12

WARNING: Stop vaccinating the kids

Dr Robert Malone broadcasts to the world a 4min 30sec **strong warning** about vaccinating healthy children and the associated, irreversible risks. A warning supported by many thousands of preeminent doctors and scientists around the world who are part of The Unity Project and Global Covid Summit declaration.

Watch >>> Before you inject your child

December 13

Omicron and benefits of the vaccines in Australia

At a press conference the Federal Health Minister Greg Hunt said that the advice from Professor Paul Kelly, the Federal Chief Medical Officer is that Australia is in the early stages of the highly transmissible variant – **Omicron**, and that the “advice continues to be that all of our vaccines provide strong, clear **protection** against **serious illness, hospitalization and loss of life**,” with the evidence on transmissibility still “under consideration”. On the back of the “international evidence” we are “cautiously optimistic that the Omicron variant is showing clear signs of being milder.” The Australian borders to open on December 15 to students and skilled workers.

December 15

Omicron: bronchial infection suggests key for milder disease

Upon this, yet to be peer reviewed, December 15, 2021 Hong Kong paper, Dr Malone suggests Omicron could be a blessing, because the pattern of infection suggests more bronchial than deep lung, explains less severe disease.

[1, 2, 4]

Studies are showing infectivity and spread of Omicron is fast, but symptoms are overall mild, less severe, less pathogenic compared to previous variants.

Dr Malone hypothesizes that “Omicron may have now evolved to replicate more in our upper respiratory airway, and less in the deep part of our lung tissues due to shifts in receptor specificity. In other diseases, like influenza, replication in upper respiratory airways is associated with less severe disease.”

On Fox News, Laura Ingraham show on Dec 18 Dr Malone states that “Omicron blows right through the vaccines and the triple jabbed”, thus the vaccines are not protective against the highly infectious Omicron variant, but at last count the “number of deaths worldwide to Omicron is less than 10” – meaning the disease is mild. [3, 4] Case numbers maybe up, but the death numbers do not follow.

December 16

COVID-19 deaths in US under Biden, surpass that under Trump

By December 16, 2021 US COVID-19 death toll under President Biden surpassed that during Trump administration – media silence! The death toll according to the New York Times is now 801,037. [1, 2] Remembering Biden declared in October 2020 that he would “shut down the virus”.

On Trump’s last full day in office, January 19, 2021, the US COVID-19 deaths hit 400,000.

December 20

US administered 495 million COVID-19 vaccine doses in 12 months

By December 20, 2021, a year after the COVID-19 vaccine rollout began in the United States it is reported that 495,101,938 (**495 million**) vaccine doses have been administered. All but J&J vaccines required two doses to be fully vaccinated, and by this time the booster doses had already been administered. [1]

According to the CDC in the first 12 months of rollout:

- 241,571,084 people (~241.5 million) had received “at least” one dose (would include J&J)
- 203,926,479 people (203.9 million) were fully vaccinated (two doses)
- Making a total of 445,497,563 receiving one or two doses, only these could potentially be eligible for a booster.
- 60 million people had received a booster dose of either Pfizer, Moderna or J&J’s COVID-19 vaccines.

In 13 months, by the end of 2021, which includes Dec 2020, a total of 983,756 vaccine (all types) adverse event reports had been made to VAERS, of these 22,637 people were reported to have died, the vast majority within a few days post jab.

December 22

Danish study find negative vaccine efficacy for Omicron

Published on December 22, 2021, a Danish cohort study finds the Pfizer vaccine’s protection from infection against Omicron variant **wanes** after just 30 days and by 60 to 90 days has a negative efficacy for 76% of study participants.

December 22

FDA grants EUA for Pfizer’s COVID-19 oral drug

On December 22, 2021, the FDA granted EUA for Pfizer’s COVID-19 drug called Paxlovid (nirmatrelvir tablets and ritonavir tablets, co-packaged for oral use) for the treatment of mild-to-moderate COVID-19 disease in 12+ year olds. The drug should be given early; within 5 days of symptom onset. This makes it the first “approved” treatment before hospitalization. [1, 2, 3, 4, 5]

“Paxlovid consists of nirmatrelvir, which inhibits a SARS-CoV-2 protein to stop the virus from replicating, and ritonavir, which slows down nirmatrelvir’s breakdown to help it remain in the body for a longer period at higher concentrations.” “Paxlovid is not authorized for use for longer than five consecutive days.”

This follows on from UK govt. approving Merck’s mutagenic drug molnupiravir. [6] A drug that mutates SARS-CoV-2 creating the potential for someone to shed mutant virus variants for several days.

Australia's TGA is considering Pfizer's Paxlovid and Merck's molnupiravir for provisional registration, and generally they follow what the FDA approve. [7, 8]

December 23

FDA grants EUA for Merck's COVID-19 oral drug

Just one day after the FDA approved its first COVID-19 antiviral drug, it then, also under EUA, approves Merck's mutagenic antiviral drug molnupiravir.

- Danish doctors are hesitant to prescribe this new drug.
- Molnupiravir is under evaluation by TGA, for provisional registration.

December 25

The current state of COVID-19 science

Dr Robert Malone, the original inventor of mRNA vaccine technology, and recently suspended from Twitter, talks to Australian politicians and summarizes the current state of the science of COVID-19: the vaccines are leaky; Omicron is a blessing; warning to stop vaccinating the kids; natural immunity is superior to vaccine induced immunity; stop ignoring the mounting vaccine adverse injuries; stop hunting scientists and doctors. [1, 2, 3, 4, 5]

December 27

Paper: Omicron infection shown to protect against Delta

A South African study, yet to be peer reviewed, shows infection with the Omicron variant provides broad protection even against the Delta variant, even if you are vaccinated. This should see the more pathogenic Delta variant displaced by the seemingly less pathogenic Omicron variant. [1]

December 27

CDC halves quarantine for asymptomatic COVID-19 persons

The highly transmissible Omicron variant has become prevalent in the population and the CDC updates and shortens recommended isolation and quarantine periods for **asymptomatic** general population from 10 days to 5 days, and wear a mask.

Two days later CDC quietly revised this guidance to even less restrictive: Exit quarantine after 5-day isolation not only when you are "asymptomatic," but also when your "symptoms are resolving (without fever for 24 hours)". [1, 2]

Through the pandemic 40% of "positive cases" of COVID-19 have been asymptomatic, meaning they never develop symptoms, but are diagnosed as positive and "infectious" via a flawed PCR test. Though a study of 10 million people demonstrated that transmission does not occur to any significance from an asymptomatic person.

December 29

Dr Fauci finally admits hospitalised **"WITH"** COVID-19 is not the same as hospitalised **"FROM"**

On Wednesday December 29, 2021, as hospitalized children with a COVID-19 "diagnosis" reaches record high from the spread of the Omicron variant, Dr Fauci finally has to admit on MSNBC that hospitalized **"WITH"** COVID-19 is not the same as hospitalized **"FROM"** of COVID-19. A child with a broken leg can get diagnosed with COVID-19, that adds to the statistics and the fear! [1, 2, 3, 4, 6, 7]

Children have always gone to hospital, but now with a variant that appears more infections and transmissible than previous variants (doesn't mean they have any relevant symptom) coupled with the fact everyone is PCR tested upon hospital admittance there is a high likelihood they'll receive a positive result.

The PCR "positive" test result drives the "case numbers", a case of COVID-19 doesn't mean you are sick, and if you have no symptoms is likely a false positive with dead nucleotide or contamination but it does drive the fear and policies!

The PCR "test is not a meaningful measurement of the epidemiology of the disease", its use has always been for "making an unlimited number of copies of any piece of DNA". [5]

December 30

Israel approves 4th COVID-19 vaccine dose – second booster shot

On December 30, 2021, Israel is the first country to approve a fourth COVID-19 vaccine dose "as it braces for a wave of infections fueled by the Omicron variant".

Trials only started 7 days prior. The 2nd booster will begin roll out in the "vulnerable to COVID-19" and will "broaden this recommendation" if the data warrants it. [1]

Israel has "led the world" in their COVID-19 vaccination program, starting 1 year ago on December 20, 2020, after a deal was struck with Pfizer. [2]

In April 2021, after 80% of the population had received 2 doses, mask mandates were removed and the Israel economy began opened up – their vaccine program was said to be a "model for the world" to end the pandemic. Then the Delta variant infected the vaccinated, and the first boosters (3rd vaccine dose) were rolled out late July 2021, starting with the elderly then mandated to 2-dosed persons, making the "fully vaccinated" instantly "unvaccinated". [3]

Now they are one of the first countries to receive Pfizer's Paxlovid COVID-19 oral drug.

Australia's National Cabinet are pushing for 3 jabs to be considered "fully vaccinated", but ATAGI in November did not consider a booster as a requirement, and

on Dec 24th only considered the immunocompromised for boosters. The “required dose” as the TGA defined is the “recommendations made by the Australian Sponsor of the relevant vaccine”; the sponsor is the vaccine manufacturer. So is it ATAGI or the vaccine manufacture who determines the dose “requirement” to be considered fully vaccinated?

December 30

Australia: 79,000 vaccine injury claims

With 91.9% vaccination coverage across Australia, the news reports that the COVID-19 vaccines have led to at least 79,000 adverse reactions, as claimed through the September 6th no-fault, tax payer funded, compensation scheme.

The injured plaintiffs claiming under \$20,000 must provide evidence from their physician, for more serious conditions leading to claims over \$20,000, they require a review by a panel of legal experts. [1]

ABS report Australian population of 25.7 million as of June 2021, of which there were 2.6 million children aged 0-15 years, leaving 23.1 million Australians aged 16 years and over. With the reported 91.9% double vaccinated, that is 21.26 million Australians, of those 79,000 claimed serious adverse injuries which is a rate of **0.37%** of those vaccinated, **3700 times higher** that the “1 in a million” rare serious side effect claimed by authorities. [2, 3, 4, 5]

TGA received 129,732 (23%) post-vaccine adverse event reports into their pharmacovigilance system up to September 2021, which means 60% of these reports have resulted in a potential payout.

The number of adverse reports for all medicines as received by September 2021 is 27 times higher than 2017 reports, as calculated from to TGA’s own data. Yet TGA admits their system is under reported, “lack key information” and there is “no denominator”.

December 30

Indiana life insurance CEO says deaths are up 40% among people ages 18-64

On December 30, 2021 Indiana Chamber of Commerce and Indiana Hospital Association hold news conference on COVID-19 where Indiana Life Insurance CEO reports that **all cause mortality amongst prime working-age people** of 18-64 year old is up 40% from pre-pandemic levels, where “Most of the claims for deaths being filed are not classified as COVID-19 deaths.” [2]

Just how unprecedented this is, “a three-sigma or a one-in-200-year catastrophe would be 10% increase over pre-pandemic...so 40% is just unheard of.” [1]

December 31

US public health regulators refuse promised transparency on vaccine safety data

FDA seeks through the court, to delay for 75+ years the full production of Pfizer's COVID-19 vaccine clinical trial safety data, which took them only 108 days to review and deem "safe and effective". [1]

Now the CDC are refusing to produce deidentified adverse event reports (post-marketing safety data) that is actively collected in the CDC's new v-safe database system, and used by both CDC and FDA to claim the vaccines are safe. [2, 3]

These vaccines are being forced onto the global population, the manufactures are fully exempt of any liability, and now the public health agencies are refusing to prove they are "safe". The governments are now liable for injury from their "approved" vaccines. If adverse events prove to be far greater than their promoted safety, maybe that is why the transparency they promised in 2020 is no longer their desire? Lawyer Aaron Siri sums this up as being "dystopian for the government to give pharmaceutical companies billions, mandate Americans to take their products, prohibit Americans from suing for harms, yet refuse to let Americans see the pre- and post-licensure safety data for these products."

What happens in America, flows onto Australia, as our regulatory authorities work together, not to mention the vaccine manufactures are submitting the same data worldwide.

December 31

Reminder: Early Treatment stats for COVID-19

Throughout the past 2 years frontline doctors globally have been using and promoting, where they can, early treatments for COVID-19. But you won't hear this on mainstream media or by the government health departments.

Their strategy is to prevent hospitalization has been to hit it hard, hit it early, and to reduce hospital stay they are using a range of drugs and nutraceuticals that all have a role to play in the symptom progression of COVID-19 – anti-viral, anti-inflammatory, anti-coagulant.

- Ivermectin timeline
- Hydroxychloroquine timeline
- Critical care information

January 2022

January 1

The War on COVID-19!

2022 marks the beginning of the third year of the COVID-19 pandemic.

The Highwire recaps the past 100 Episodes covering COVID-19 pandemic. – [WATCH](#)

January 1

Borders open to all travelers into SA

- All international travelers are now allowed entry into South Australia with different testing and quarantine requirements for COVID-19 vaccinated compared to unvaccinated individuals. Though Australians 12+ years old, are required to be “fully vaccinated” to leave the country.
- All interstate travelers are now allowed entry into SA, and are “required” to sign/QR code into public places.

January 3

State Emergency Coordinator tests positive on day of record infections in SA

South Australian Police Commissioner Grantly Stevens, the State Emergency Coordinator, tests positive for COVID-19, the same day of record new case numbers of 2552. [1]

Mr. Stevens test positive and is allowed to quarantine at home. Just a month ago Senator Alex Antic tested negative upon return to SA from Canberra and was forced to quarantine in a medi-hotel for 2 weeks.

Besides the international border restrictions lifting 2 days ago, on the 4th of December 2021 the SA interstate borders opened with the knowledge of Omicron, the most transmissible virus variant to date. Prior to border opening you had to be vaccinated to enter the state.

The recent spike in cases is logical, even with the 90% vaccination rate, because the vaccines don't stop infection or transmission, they are said to only provide “protection against serious illness, hospitalization and loss of life”, though that effectiveness may not last long.

In two years, South Australia has recorded a total of **8** COVID-19 deaths.

January 5

CDC replaces “Fully Vaccinated” status with “Stay up to Date”

On January 5, 2022 as 3 monthly boosters caused confusion with COVID-19 “vaccination status”, the CDC replaced the term “Fully Vaccinated” with “*Stay up to Date*” with your vaccines!

A month later, on February 10, 2022, Australia’s ATAGI published “defining ‘up-to-date’ status for COVID-19 vaccination”

January 5

Omicron: poor at infecting deep lung and will likely escape vaccines

In a Nature article published January 5, 2022, it points to mounting evidence from animal studies that Omicron is poor at infecting deep lung tissue, making it “less dangerous”, the exact prediction made by Dr Malone on December 15, 2021.

Based on modeling, the Omicron variant may have an 88% likelihood of **escaping** current vaccines, and studies are revealing breakthrough cases with Omicron. In lay terms, the spike protein mutations are too great for the vaccine-induced Wuhan spike antibodies to neutralize. The same appears true for previous natural infections, though second infection is mild.

January 6

Judge orders FDA to release Pfizer COVID-19 vaccine data

In September 2021 the PHMPT sued the FDA for failure to respond to a FOIA request. The FDA then asked the court to grant them permission to release only 500 pages per month. On January 6, 2022, 18 months after the FOIA request, US District Judge Mark T. Pittman, Northern District of Texas, ordered the FDA to comply and “produce at least 55,000 pages per month” of the Pfizer documents they relied upon to license their COVID-19 vaccine in USA.

Since this time a huge “posse” of collaborating citizens, doctors and lawyers in a coordinated effort to review the Pfizer documents; which are revealing alarming insights into what was known before EUA was granted and shortly into the vaccine rollout!

Tracking the Pfizer FOIA documents – HERE

January 8

China: Omicron continues to spread even with “zero-covid” policy

Despite closed borders and very high vaccination rates, the highly transmissible omicron variant has been reported in seven out of 31 provinces and all of China’s biggest cities after it was first detected December 9, 2021

China’s first community outbreak of Omicron was detected in the city of Tianjin on Jan 8, 2022 in 2 patients, prompting an immediate government lockdown of the local districts followed by large-scale screening. 41 positive cases were reported as of Jan 11, the source of the transmission is unknown, and the virus is still spreading.

China, which is set to host the Winter Olympics in Beijing starting February 4th, has adopted a “zero-covid” policy, which if an infection is detected it triggers strict control measures such as city lockdowns, factory shutdowns and delivery standstills, including the shutdown of ports. These strict measures have an onflow effect to the global supply chain. [1, 2]

January 10

3rd Vaccine Shot Mandated for Australian Workers in multiple states

Booster shot mandates for healthcare workers are being ushered in by various state emergency coordinators. ATAGI stated it is “acceptable to co-administer” different brands of COVID-19 vaccines, though Pfizer and Moderna are “preferred over” AstraZeneca.

Each state and territory of Australia is under their own State of Emergency, and as such the Chief Health Officers (CHO) issue Directions independent of each other. Except for South Australia where it is the “emergency coordinator” Police Commissioner Grantly Stevens, who hands down vaccine mandate directions.

January 11

US oversight committee seek truth about the virus origins

Just before release of Fauci’s damning emails, a letter was sent from US Senate committee to HHS seeking to find truth about the origins of the pandemic virus. It is stated that “rather than be transparent with the Committee, HHS and NIH continue to hide, obfuscate, and shield the truth” by hiding information that will help inform the origins of the virus.

January 12

EMA warning: repeat boosters could adversely affect immune system

On January 12, 2022, the **European Medicines Agency** (EMA) warns that frequent boosters every 4 months could adversely affect the immune system and may not be feasible. Boosters *"can be done once, or maybe twice, but it's not something that we can think should be repeated constantly,"* said Marco Cavaleri, the EMA head. The narrative is now being steered towards "following the blueprint set out by influenza vaccination strategies". A pre-season flu shot will align with a COVID-19 pre-season shot.

The U.K. has said that boosters are providing good levels of protection and there is no need for a second booster shot at the moment. Boosters are less effective against mild illness for Omicron.

Back in March 2021 Australian TGA's Access Consortium was already looking at changing the mRNA code during the pandemic, in a provisionally registered vaccine, and compare that to what is done with seasonal influenza – yet they are completely different technologies.

January 14

Life insurer refuses to pay out on death following COVID-19 vaccination – deemed it "suicide"

An insurance company refused to pay out on a multi-million dollar life insurance policy, after it was confirmed the man died from a COVID-19 vaccination. A French court ruled in favor of the life insurance company because it is known the vaccine is "experimental" and as such is a risky undertaking, essentially "suicide", which is excluded from the insurance contract. [1, 2]

March 16, 2022, according to AFLD, America's Life Insurance council now says that Life Insurance policies may deny payment if you die from the COVID-19 vaccine because they are experimental.

January 15

Vaccine mandate for US/Canada cross-border truckers

The President of Private Motor Truck Council of Canada warns that the vaccine mandates for truckers crossing the US/Canada border has the potential to result in a devastating economic collapse, in the face of an already "fragile" supply chain. Beginning January 15 truckers entering Canada will be forced to show proof of vaccination, potentially causing around 30,000 cross-border truckers to shut down. A similar vaccine mandate for truckers entering the United States from Canada will go into effect January 22. [1, 2]

These mandates motivated the Canadian Trucker Convoy, a movement of over 60,000 trucks along with tractors and people coming out to protest the mandates.

government overreach. Other countries were inspired to follow suit with truck convoys to capitals. [3]

- Effective October 1, 2022 Canada removes all border requirements, including proof of vaccination
- April 2023 – Trudeau is now says he never “forced” anyone to get the COVID-19 vaccine – WATCH

January 17

World’s 10 richest men doubled their wealth since the pandemic began

On January 17, 2022, Oxfam’s “Inequity Kills” report was released and states “The wealth of the 10 richest men has doubled, while the incomes of 99% of humanity are worse off, because of COVID-19”.

The wealth of the 10 richest men amounts to \$1.9 trillion, grew at a rate of \$1.6 billion a day, more than it did the previous 14 years.

“This is the biggest annual increase in billionaire wealth since records began.”

“We have a situation where 10 men hold more wealth than that of two-thirds of humanity”

said Lyn Morgain, chief executive of Oxfam Australia.

Oxfam’s 2021 report revealed the COVID-19 vaccines had created 9 new billionaires. Over the past two years, the wealth of Australia’s 47 billionaires has doubled to \$255 billion. [1]

January 18

TGA grant Provisional Registration for PAXLOVID

TGA provisionally approves Pfizer Australia Pty Ltd’s COVID-19 treatment nirmatrelvir + ritonavir (PAXLOVID) on January 18, 2022. “The decision has been made on the basis of short-term efficacy and safety data”.

January 19

Scotland: unvaccinated have the lowest COVID-19 case rate/100,000 of all the cohorts

In a January 19, 2022 Public Health Scotland “COVID-19 & Winter Statistical Report”, figure 13 revealed **the unvaccinated** having the lowest COVID-19 case rate per 100,000 of all population cohorts, but they warn it should not be an indicator of the vaccines failing to “work.”

*“a simple comparison of COVID-19 cases rates in those who are vaccinated and unvaccinated **should not be used** to assess how effective a vaccine is in preventing serious health outcomes, because there are a number of differences between the groups, other than the vaccine itself, and these biases mean that you cannot use the rates to determine how well the vaccines work.”*

January 19

CDC & WHO: natural immunity superior, vaccines don't stop transmission, push for new vax technology

CDC MMWR report released on January 19, 2022 showing in their graph of the Delta wave (May-Nov 2021) data that the unvaccinated who have had previous SARS-CoV-2 infection have a lower risk of hospitalization as does the vaccinated population. In support of natural immunity. [1, 2, 3]

On same day the WHO's IHR Emergency Committee put out a statement regarding the COVID-19 pandemic.

“While current vaccines continue to be effective in reducing risk of severe disease and death due to COVID-19, they do not completely eliminate the risk of **transmission** of SARS-CoV-2 (all variants)...

Given the inability of the vaccines to stop transmission the committee stated a need to increase vaccine uptake in countries with only 10% coverage but also “stressed the importance of coordinating research on heterologous vaccine combinations” and “vaccines that confer broader immunity across variants.” plus “the importance of expediting research and development on novel vaccine technologies...such as **intranasal** vaccines.”

Point 7: Given the limited and uneven distribution of COVID-19 vaccines globally, proof of COVID-19 vaccination will no longer be required as the only way or condition for allowing international travel.

January 19

WHO: No evidence “healthy children or healthy adolescents need boosters”

The World Health Organization's chief scientist Soumya Swaminathan said during a media briefing on Jan 19, 2022 that there is no evidence that children need booster shots and that the goal needs to “protect those at highest risk of severe disease and dying”. [1]

“There's no evidence right now that healthy children or healthy adolescents need boosters, no evidence at all.”

January 19

CDC data shows strong natural immunity compared to vaccinated

On January 19, 2022 a CDC study shows that those who have recovered from COVID-19 have more protection against infections from Delta than those who have only been vaccinated.

Four groups of people were analyzed:

1. unvaccinated with no prior COVID-19 infection,
2. vaccinated with no prior infection,
3. unvaccinated who recovered from COVID-19, and
4. vaccinated who recovered.

Dr Malone summarizes: By the first week of October, COVID-19 rates among the vaccinated with no previous infection were 6.2 times lower in [California] and 4.5 times lower in New York than among the unvaccinated with no previous infection. However, among the unvaccinated with a previous infection, the COVID-19 rate was 29 times lower in California and 14.7 times lower in New York.

January 19

WHO want COVID-19 vaccination integrated into routine health services

In the "Statement on the tenth meeting of the International Health Regulations (2005) Emergency Committee regarding the coronavirus disease (COVID-19) pandemic" on January 19, 2022, amongst other things, the WHO want at least 70% of all countries' populations vaccinated by the start of July 2022 and they want COVID-19 vaccinations integrated into routine health services. Also "[t]o enhance vaccine uptake, States Parties are encouraged to assess **enablers** and **barriers** to vaccination."

In addition, the WHO is calling for the lifting of international travel restrictions and they Do NOT require proof of vaccination against COVID-19 for international travel because currently there's not enough to go around...not because of health!!!

January 19

TGA grant provisional approval to Novavax COVID-19 vaccine

On January 19, 2022 the Therapeutic Goods Administration (TGA) grant the first **non-genetic** COVID-19 vaccine provisional registration. The Novavax COVID-19 vaccine called NUVAXOVID is marketed in Australia by Biocelect Pty Ltd.

This a protein subunit vaccine administering a set dose of spike-antigen (SARS-CoV-2 rS or NVX-CoV-2373) compared to the genetic vaccines which deliver a genetic code (mRNA or DNA) which will trick the body into manufacturing unknown quantities of foreign spike-protein antigen.

Nuvaxovid is provisionally approved for individuals 18 years of age and older and administered in 2 doses given 3 weeks apart.

January 19

Australia's TGA grants Provisional Registration for Novavax COVID-19 vaccine

On January 19, 2022 Australia's Therapeutic Goods Administration (TGA) granted provisionally registration for Bioclect Pty Ltd's (on behalf of Novavax Inc) COVID-19 vaccine NUVAXOVID. This protein vaccine is for active immunization to prevent COVID-19 in individuals 18 years of age and older and is recommended as 2 doses administered 3 weeks apart.

The product has been under evaluation since February 2021

Australia purchased 51 million doses of Novavax and by September 2022 less than 1% has been used!

January 19

Britain lifts vaccine passports and mask mandates

British Prime Minister Boris Johnson announced "the lifting of COVID-19 vaccine passports, mask mandates and work-from-home guidance in England," from 20th January, on the back of "wildly incorrect" modelling. [3, 4]

Now with masks the basic policy will be to "trust the judgment of the British people and no longer criminalize anyone who chooses not to wear one." The virus is not going to be eradicated, we have to learn to live with it. [1, 2]

January 20

Israel, with most draconian measures, is #1 in COVID-19 cases/capita

Despite the fact that Israel has implemented some of the most draconian COVID-19 pandemic measures in the world, including most vaccinated, the country is now number one in the world in new cases, according to The Times of Israel, where "0.6 percent of the population was testing positive daily for the virus". [1]

January 20

Omicron sub-variant BA.2 emerges

The latest COVID-19 variant, the omicron sub-variant, known as BA.2, is 1.5 times more transmissible than the original omicron strain, according to Danish scientists, but just as mild. UK health say it has a "substantial" growth advantage over the

original omicron VOC, known as BA.1. The mutation difference between BA.1 and BA.2 is greater than the difference between the original “wild strain” and the Alpha variant, where BA.2 has five unique mutations on a key part of the spike protein. The BA.2 variant was first detected in the Philippines on **January 20, 2022**, and was soon detected around the world including Australia, around February 3, 2022. [1] The WHO still considers BA.2 the same Omicron variant of concern.

January 21

Canadian Trucker Convoy against mandatory vaccines begins

Following the announcement of border crossing vaccine mandates requirements for Truckers in Canada, a grassroots convoy began to form and migrate across Canada to meet up in Ottawa on Monday 31st January. The **Canadian Trucker Convoy** protest movement was cheered on by many millions of Canadians as they lined the roads and overpasses on their way to Ottawa. [2, 3, 20]

The Canadian Prime Minister referred to the record breaking 50,000 strong truckers as a “fringe minority”, and the media portray them as “terrorists”, but the Ottawa locals have a different view. [7, 8, 9, 10, 11, 14, 15, 17]

A GoFundMe page was set up and raised over \$10 million, which on 5th February the platform then shut it down. [5, 6] GiveSendGo then offered to assist and within 12 hours \$1 million in donations poured in which crashed their system. [1]

Protesters settle into Ottawa:

- Trucker convoy – live Jan 30
- The truckers were being catered to by the locals.
- Protesters keeping Ottawa clean and safe [12]
- Saskatchewan first to announce mandate end followed by others, but are their loopholes?. [4, 13]
- Police confiscate fuel, citizens bring more in. [16]
- The Canadian convoy for freedom went from “fringe minority” to a declared “state of emergency” in a week. [7, 8]
- Truckers have their say [18]
- The world is watching and joining in.
- Feb 6 – powerful rally speech by Chris Sky (2.5 million protesters in Ottawa) [19]
- Feb 10 – a warning went out to the truckers about the “self-appointed spokespeople” who setup the GoFundMe/GiveSendGo accounts.
- Feb 17 – Canadian government blocked citizens access to their bank accounts a pre-cursor consequence to a Digital ID! [21, 22]
- Feb 22 – The bank freeze ended, but trucks still were missing.
- Effective **October 1, 2022** Canada removes all border requirements, including proof of vaccination
- Nov 2022 – Trucker commission

Visit [Convoy Reports](#) for chronological coverage >>>
Nov 2022 – Canada’s Freedom Convoy Commission – [report](#)

January 21

FDA grants remdesivir outpatient and pediatric approval

As requested by the sponsor Gilead Sciences, On January 21, 2022 the FDA granted EUA approval to expand the use of the antiviral drug Veklury (remdesivir) to “certain non-hospitalised adults and pediatric patients for the treatment of mild-to-moderate COVID-19 disease”. Their justification is that it “provides another treatment option to reduce the risk of hospitalization in high-risk patients”, even with the renal problems. [2]

Previously, the use of remdesivir was limited to patients requiring hospitalization. EUA was first granted in May 2020.

In addition the FDA revised the Emergency Use Authorisation (EUA) for remdesivir to include pediatric **infants** weighing 3.5 kilograms to children weighing less than 40 kilograms even though there IS NO safety data, and children are not at risk of COVID-19, but certainly at risk of the drug side effects! [1]

January 22

Ireland announces ending COVID-19 restrictions

Almost all COVID-19 restrictions in Ireland will end on January 22, 2022, including domestic COVID-19 Certificates, curfews, social distancing, and capacity limits, but mask mandates, self-isolation rules, and protective measures in schools will remain. This makes Ireland the second country following England to remove mandatory vaccine passports after they were implemented reports the Epoch Times.

January 24

Senator Ron Johnson held Second Opinion doctor roundtable

US Sen. Ron Johnson (R-Wis.) held a 5 hour panel discussion, *COVID 19: A Second Opinion*, where a group of world renowned doctors and medical experts provided testimony of a different perspective on the global pandemic response, the current state of knowledge of early and hospital treatment, vaccine efficacy and safety, what went right, what went wrong, what should be done now, and what needs to be addressed long term.

- Attorney Tom Renz – DOD vaccine injury whistleblowers data – WATCH
- Nurse Nicole S first hand experience on the frontline – WATCH
- Dr Marble – telehealth early treatment success – WATCH
- Dr. Peter McCullough Full Highlights – WATCH
- Dr. Paul Alexander Full Highlights- WATCH
- Dr. Paul Marik Full Highlights – WATCH

- Dr. Aaron Kheriarty Full Highlights [WATCH](#)
- Dr. Pierre Kory Full Highlights – [WATCH](#)
- Dr. Robert Malone Full Highlights – [WATCH](#)
- Dr. Ryan Cole Full Highlights – [WATCH](#)
- Dr. Richard Urso Full Highlights – [WATCH](#)
- Dr. Harvey Risch Full Highlights – [WATCH](#)
- Dr. Christina Parks Full Highlights – [WATCH](#)
- Steve Kirsch Full Highlights – [WATCH](#)

January 24

US Department of Defence (DOD) medical data reveals alarming statistics

At Senator Ron Johnson’s “Second Opinion” round table discussion, [attorney](#) Thomas Renz [presented](#) Department of Defence (DoD) medical billing [data](#) from the **Defense Medical Epidemiology Database** (DMED) that was provided by [whistleblowers](#), which paints a shockingly high increase in [health issues](#) amongst service personnel in 2021 – corresponding with the mandatory vaccine rollout. [[1](#), [2](#), [3](#)]

The DOD were caught trying to [cover up](#) the alarming data after this release, but the whistleblowers had taken backup copies. [[4](#), [5](#)]

Sen. Johnson’s [letter](#) >>>

Matthew Crawford analysis of DMED data – [READ](#), [WATCH](#)

January 24

FDA limiting use of monoclonal antibodies for COVID-19 due to Omicron variant

On January 24, 2022, the FDA [limits](#) the use of certain Monoclonal Antibodies to treat COVID-19 due to the Omicron Variant, even though we know [doctors](#) have been saving lives using Monoclonal Antibodies.. [[1](#), [2](#)]

“Two monoclonal antibody treatments – bamlanivimab and etesevimab (administered together) and REGEN-COV (casirivimab and imdevimab) – to limit their use to only when the patient is likely to have been infected with or exposed to a variant that is susceptible to these treatments” the FDA state “data show these treatments are highly unlikely to be active against the omicron variant, which is circulating at a very high frequency throughout the United States.”

This FDA announcement happened 3 days after the controversial drug remdesivir was granted [outpatient](#) approval by the [FDA](#)!

January 24

US telehealth services has 99.99% survival rate for COVID-19

Dr Ben Marble, founder of the telehealth service myfreedoctor.com claims his early treatment protocol services has assisted over 150,000 COVID-19 patients with a 99.99% survival rate. [1]

January 24

Study: spike antigen and mRNA persist in lymph for 2 months

A January 24, 2022 paper published in Cell journal, shows vaccine spike antigen and mRNA persist for two months in lymph node germinal centers, which according to Dr Malone is highly unusual.

Dr Malone hypothesizes that the substitution of pseudouridine for uridine to avoid the immune response may be working so well that the mRNA is completely evading the normal clearance/degradation pathways. Hence, mRNA that is not being incorporated into cells at the injection site, is migrating to the lymph nodes and continuing to express protein there. In this case, the cytotoxic protein antigen is spike. Spike protein can be detected for at least 60 days after administration of dose. Note that the duration of the protein expression was only tested for 60 days. The mRNA in the vaccines may not be as self-destructing as they predicted. Protein production of spike in people vaccinated with the Moderna or Pfizer mRNA vaccines is **higher** than in patients who are severely ill with COVID-19!

January 25

Pfizer starts clinical trials with Omicron vaccine

First participants enrolled in Pfizer/BioNTech clinical trial received Omicron-based COVID-19 vaccine candidate as a two-dose primary series and as a booster dose.

January 27

CDC use "no data" to conclude safe to co-administer vaccines in children

On January 27, 2022, parents are told that it is safe for their child to receive the COVID-19 vaccine with other childhood vaccines (concomitantly), yet **no such safety data** on the simultaneous administration of COVID-19 vaccines and other vaccines are available for them to read. [1]

ACIP has a history of "no information available" regarding co-administering childhood vaccines, yet they say just stick it in different limbs, as though the body is compartmentalized! [@2:30]

January 27

TGA provisionally approves Pfizer booster for 16-17 years

On January 27, 2022, the TGA expands Pfizer's COVID-19 vaccine booster dose provisional registration to now include 16-17 years of age. [1]

"The TGA continues to monitor ongoing trials associated with booster doses for younger children.

Provisional approval of this vaccine is valid for two years and means it can now be legally supplied in Australia. The approval is subject to certain strict conditions, such as the requirement for Pfizer to continue providing information to the TGA on longer term efficacy and safety from ongoing clinical trials and post-market assessment."

On the same day as this approval the TGA stated in their weekly report that "[t]he TGA closely monitors reports of suspected side effects (also known as adverse events) to the COVID-19 vaccines. **This is the most intense safety monitoring ever conducted in Australia.**

We encourage people to report suspected side effects, even if there's only a very small chance a vaccine was the cause. This provides valuable data that helps us identify potential safety issues. Often, however, these events are not caused by the vaccines."

Post-vaccine adverse events the TGA are currently monitoring include:

- **myocarditis** and **pericarditis** (mRNA vaccines, particularly in younger age groups)
- **thrombosis with thrombocytopenia syndrome** (TTS) following Vaxzevria (AstraZeneca)
- **Guillain-Barre Syndrome** (GBS) following Vaxzevria (AstraZeneca)
- **immune thrombocytopenia** (ITP) following Vaxzevria (AstraZeneca)

January 29

Study shows natural immunity lasts at least 18 months

The protection people experience after recovering from COVID-19, known widely as natural immunity, lasts for at least 18 months, according to a recently published study, "This is the longest observation (March 2020-September 2021) for the presence of antibodies against SARS-CoV-2 in recovered individuals". Those who also received the vaccine showed it gave a "boost" but it waned quickly. [1]

January 31

Australia joins the global Trucker Convoy

Inspired by the Canadian Truckers in protest against waning freedoms and coerced vaccination mandates, Australian truckers started their own convoy and began arriving in Canberra, the nations capital, on January 31, 2022.

A convoy of trucks, cars and whatever vehicle citizens desired set out on a journey to Canberra

- First wave of trucks arrived in Canberra Monday January 31st, and stood at parliament house in protest [1, 2, 3]
- Camping out in Canberra [4, 6]
- Second wave to arrive Canberra by Saturday February 5th 2022 for a scheduled protest [5]
- On Feb 7th around 3000 protesters were in Canberra, with more on the way.
- Saturday Feb 12, 2022 – huge Rally in Canberra

January 31

FDA approves Moderna's Spikevax COVID-19 vaccine.

In a press release the FDA announced the approval of the vaccine which under EUA has been known as Moderna COVID-19 Vaccine, but now approved the vaccine will be marketed as Spikevax for the prevention of COVID-19 in individuals 18 years of age and older. This is the second approved COVID-19 vaccine. Pfizer's Cominarty was granted registration August 2021 yet it is still not available in the USA.

January 31

Denmark declares COVID-19 no longer a threat

Denmark ends virus restrictions on January 31, 2022 and reclassify Covid-19 as a disease that no longer poses a threat to society, even as infections hit a record high. [1] Followed by other countries shortly after.

February 1

February 2022

February 1

Pfizer submit EUA for COVID-19 vaccine in under 5 year olds

Pfizer and BioNTech, at the "request from US FDA" initiate rolling submission for Emergency Use Authorization (EUA) of their COVID-19 vaccine in children under 5 years old (6 Months to 4 years of age). The request is for "the first two doses of a planned three-dose" vaccine regimen.

The clinical trials for Pfizer, in 1300 children, failed in this age group, prompting a booster shot in the trials.

In trials with older children, participants such as Maddy Garay were severely injured, yet Pfizer reported her injury as a stomach ache. The vaccine was approved regardless! [3]

An urgent "call to action" went out to stop this under 5 yr. EUA, a prelude to a forever "liability shield". [2]

On February 11, 2022, the FDA announced it would “delay its decision” for EUA, and Pfizer announced it’s intent to “extend the rolling submission”, yet it was reported they “withdrew” their application. [1]

February 5

Number of athletes collapsing and dying continues to rise

Good Sciening website has been tracking athletes from over the world who have collapsed and or died on the field since the COVID-19 vaccine rollouts began. As of Feb 5, 2022 they have gathered 624 reports, of which 397 died, and it increases nearly every day.

By June 4, 2022, 1090 Athlete have suffered a cardiac arrest or other serious issues and 715 Died.

February 6

Corona Investigation – Grand Jury Proceeding by the Peoples’ Court of Public Opinion

Announced in September 2021 by Reiner Fuellmich, it now starts where a group of international lawyers and a judge begin conducting a criminal investigation procedure modelled after the United States Grand Jury proceedings.

“In serious criminal cases in the U.S., a so-called **Grand Jury** is presented with the evidence at hand to convince them that this evidence is sufficient to bring public charges against the defendants.

We are adopting this model to prove to the public, with the help of real witnesses, lawyers, a judge and experts from around the world, that we are dealing with **crimes against humanity** that span the globe.

The goal is a coherent presentation of all the facts gathered to date, and thus to convince the populations of all countries that resistance here is not only possible, but required of every individual.”

Schedule:

- Feb 6: Opening Statement , Full [1]
- Feb 12: The general historical and geopolitical backdrop
- Feb 13: PCR-Tests
- Feb 19: Injections
- Feb 20: Financial Destruction
- Feb 26: Eugenics + closing arguments and outlook

February 8

Pfizer vaccine rakes in highest drug profit in single year

Pfizer says it raked in \$36.8 billion in COVID-19 vaccine sales in 2021, making it among the best-selling drugs in history, and representing 45% of their product sales, which is projected to reach \$100 billion in Q4 2022 [1]

Pfizer is expected to take their new mRNA technology, that has been “accepted” by the global population through the emergency use authorization, and expand it into other diseases in collaboration with CODEX DNA. Acuitas Lipid Nanoparticles is also “an essential part of everything you do with mRNA” says Pfizer [2]

February 9

Pfizer quietly warns that “unfavorable pre-clinical, clinical or safety data” may impact business

Public Health and Medical Professionals for Transparency (PHMPT) with their lawyer Aaron Siri have sued the FDA to release Pfizer’s documents they relied upon to demonstrate vaccine safety and efficacy. The judge overruled the 75 years initially asked for, and every month thousands of pages are being released to the public. The first batch was released November 17, 2021. [1]

Now Pfizer “appears to be anticipating some *bad news*, as evidenced by several redline changes in their Q4 earnings releases”, the change in its business risk disclosures, center around disclosures of unfavorable safety data!

February 10

Australia: vaccination status of “fully vaccinated” is changed to “up-to-date”

On February 10, 2022 the Australian Technical Advisory Group on Immunization (ATAGI) updated the defining of COVID-19 vaccination status from “fully vaccinated” which served for the 2-dose practice, but with boosters now in place they introduce the terminology of being “up-to-date”. “It forms the basis of the due and overdue rules for the Australian Immunization Register (AIR).” [1, 2]

With any of the TGA provisionally approved CV19 vaccines (except J&J), 14 days post the second jab, is a minimum valid time frame for the primary doses to be considered ‘up to date.’” Booster eligibility is from 3 months after the last primary dose, which includes that 14 day wait time – so actually 2 1/2 months. “People who have not received a booster within 6 months of completing their primary series will be considered overdue”.

February 12

Convoy to Canberra – Rally march

On Saturday, February 12, 2022 hundreds of thousands of Australians congregated in Canberra, the nations capital in front of Parliament House, to protest Government overreach, vaccine mandates and media lies about the pandemic, to collectively send a message to our government ENOUGH!

Beginning January 30, 2023 and inspired by the Canadian Trucker Convoy, truckers and citizens from around Australia organized to **Convoy to Canberra**. It was Australia’s biggest protest ever, and

the mainstream media barely covered it, and referred to it as an anti-vaccine, "fringe protest"! [1, 2, 3, 4, 5]

February 14

Since kids don't get COVID-19 assessing vaccine effectiveness is difficult!

The FDA's plan to fast-track Pfizer's COVID-19 vaccine for children under 5 years old (24 million kids) was delayed because

*"there's a **low number of cases** overall in the clinical trial most kids are not getting symptomatic COVID as such one case in one direction or another can tip the perception of the vaccines overall defectiveness"*

says Pfizer director (former FDA commissioner) Dr. Scott Gottlieb

February 16

292 pages related to Virus Research in Wuhan are fully REDACTED

February 20, 2022 – The NIH redacted 292 pages of virus research in Wuhan, critical documents that could shed light on the origin of the coronavirus pandemic. [1]

February 17

TGA assigns provisional approval for Moderna vax in 6 to 11 year olds

On February 17, 2022, the Therapeutic Goods Administration (TGA) granted provisional registration for the Moderna COVID-19 vaccine, SPIKEVAX, for children aged 6-11 years, to be administered as a **half dose** of 0.25 mL or **50 micrograms** (50µg), in 2 doses at least 28 days apart. Compared to 12 years and older who receive the same vaccine preparation but at full dose of 0.5 mL or 100 micrograms (100 µg). [1, 2, 10]

The TGA state their assessment was based on Moderna's kidCOVE study [3, 4, 5, 6, 7, 8]

By this stage myocarditis is known as a potential side effect of the mRNA COVID-19 vaccines, and have been designated "very rare" which means "up to **one in 10,000** vaccinated people may be affected" and "the data show that the increased risk of myocarditis after vaccination is highest in younger males." [9]

As of Feb. 23, 2022, 49.4% of children have received their first dose of a vaccine and 62.1% of eligible of Australians have received their boosters.

February 18

TGA: AstraZeneca vaccine provisionally approved as booster

February 8, 2022 the TGA provisionally approved a **booster dose** of the AstraZeneca COVID-19 vaccine, Vaxzevria, for individuals aged 18 years and older. [1]

“The third (booster) dose may be given if clinically indicated with reference to official guidance regarding the use of a heterologous third dose (e.g. mRNA vaccine).”

“This means that the decision to receive Vaxzevria as a booster must be made in consultation with a medical professional. The mRNA COVID-19 vaccines (Comirnaty (Pfizer) or Spikevax (Moderna) are preferred as the booster dose in Australia, **irrespective of the primary COVID-19 vaccine used**. This includes for people who received the AstraZeneca COVID-19 vaccine for their primary course.”

February 20

CDC caught hiding data from the public

On February 20, 2022 the New York Times reports that the CDC has collected data on hospitalizations for COVID-19 in the United States and broken it down by age, race and vaccination status, but most of the information has been hidden from the public and independent scientists. [1]

“Two full years into the pandemic, the agency leading the country’s response to the public health emergency [the CDC] has published only a tiny fraction of the data it has collected”, because they claim “it’s not yet ready for prime time”. The NY Times goes on to state “much of the withheld information could help state and local health officials better target their efforts to bring the virus under control.”

Doctors call this hiding of data by a public health agency, “scientific fraud”. [2, 3]

February 21

US Trucker Convoy to DC begins

California and Montana truckers begin the peaceful **US Freedom Convoy 2022** to Washington DC, a trek across the continent in support of the Canadian trucker convoy and to overturn the vaccine mandates and the State of Emergency, so that civil liberties can be restored. [1, 2, 3, 4]

The convoy is intended to arrive in DC on March 1st, and will be joined by cars and cheered on by citizens along the way. [5]

- Day 1 of official convoy – REPORT
- 28 Feb Missouri, footage, [6]
- Day 6 – overpass, over 10,000 trucks expected in Indianapolis [7, 10]
- People’s convoy 70 miles long [8, 9]
- Trucks arrived block from Whitehouse, police blocking traffic.

February 22

Danish study find natural immunity from Omicron infection holds for subvariants.

People who contract the Omicron virus variant are unlikely to get re-infected by a subvariant of the virus Danish researchers published in pre-print paper. Emerging data indicate BA.2, a subvariant of Omicron, is more transmissible—possibly 30 percent more, according to the World Health Organization. But an analysis of data from national surveillance systems in Denmark, one of approximately 10 countries where BA.2 has become predominant, suggests reinfections are rare. [1]

February 23

US Trucker Convoy announces journey from California to DC

Drawing inspiration from Canada's Freedom Convoy, the US People's Convoy sets off from California on February 23, 2022 to travel across country to Washington DC, demanding an end to COVID restrictions. [1, 2, 3]

February 23

WHO setting up for Global Vaccine Passports

On February 23, 2022, the WHO selects subsidiary of Deutsche Telekom called T-Systems as the contractor to "standardize the issuing of QR codes" for 194 member states for an intended global vaccine passport. [1, 2, 3, 4, 5]

In August 2021 the WHO released technical specifications and guidance document for Digital Vaccine Passports to countries. [5]

The global digital passport system will be designed for ALL vaccines, not just COVID-19 vaccines, somewhere between 260 and 300 vaccines are in the developmental pipeline, and now with mRNA vaccine technology being "accepted" for COVID-19, that number vaccines "justified" for "disease control" could increase substantially. [6]

February 24

CDC data show vaccinated higher case rate and hospitalisation

It's hard to get a clear picture for what is truly going on with the effectiveness of the vaccine because every one who receives a vaccine is considered "unvaccinated" for 14 days post their final shot, thus if these people return a positive PCR test for COVID-19 or become hospitalized they are assigned "unvaccinated" status!

According to the data, which is submitted to the CDC by health departments across the US, the COVID-19 case rate in “fully vaccinated” persons rose by more than 1,000% between Dec. 11, 2021 and Jan. 8, 2022.

February 24

Russia begins “special military operations” in Ukraine

President Vladimir Putin of Russia declared the start of a “special military operation” in the Ukraine on February 24 2022 (23rd US time zone) with the goal to:

- “demilitarize” but not occupy the country [4],
- to ensure the security of the people of Donbas region and
- the de-Nazi-fication of the region (the para-military neo-Nazi groups that have allegedly been backed, armed and trained by Western military), [15, 17] and
- to bring human rights violator criminal, neonazis to justice. [1, 2, 3]

UK Column WATCH

More information HERE

February 24

UK data shows 9 in 10 COVID-19 deaths are fully vaccinated

UK Health Security Agency released it’s Week 8 “COVID-19 vaccine surveillance report” which analysis of their data reveals that “deaths by COVID-19 are rising dramatically amongst the triple vaccinated and declining steadily among the not-vaccinated” in England.

This data shows that fully vaccinated account for 9 out of 10 COVID-19 deaths in England. The vaccines were “sold” to the public as protecting against hospitalization, severe disease and death. [1]

February 25

From Debunked to Real: “mRNA is reverse transcribed intracellularly into DNA “

On February 25, 2022 a peer reviewed paper of an *in vitro* study out of Sweden shows that the Pfizer-BioNTech COVID-19 mRNA vaccine (BNT162b2) spike genetic mRNA code does indeed integrate (reverse transcribe) into liver cell DNA in as fast as 6 hours. [1, 2, 3]

From early 2021 the media “fact checkers” were debunking this as a possible mechanism or concern, including Australia’s Dept. of Health, and experts. More studies are urgently needed. [4, 5, 6]

This potential “phenomenon” that was NOT looked at and ruled out by the vaccine manufactures and the regulatory authorities before the vaccines were authorized.

The implications and potential consequences of a foreign piece of genetic code incorporating into cell DNA is scary – especially for children! [Z]
Watch >>>

February 25

Tasmania drops vax mandates, except healthcare settings

Tasmania scraps virtually all vaccination requirements amid the spread of the milder Omicron variant of SARS-CoV-2. From Feb. 25, 2022 proof of vaccination will no longer be required to visit the state and will be removed for venues such as bars, restaurants, theatres, and gyms. However, vaccination remains mandatory for workers in high-risk settings such as health and aged care. [1]

February 25

New Zealand High Court ends vaccine mandates

New Zealand High Court judge, Justice Francis Cooke, determines that “the government [vaccine] mandate is an unjustified incursion on the Bill of Rights.” The judge ends Jacinda Ardern’s Vaccine Mandate: “It’s a Gross Violation of Human Rights”. The landmark case means that the police and Defense staff cannot be fired for refusing to take the experimental COVID-19 vaccines. This case will be used to overthrow all of Ardern’s illegal mandates in New Zealand.

March 1

March 2022

March 3

Negotiations start on WHO International “Pandemic Treaty”

On 3 March 2022, the EU Council adopted a decision to authorize the opening of negotiations for an international agreement on pandemic prevention, preparedness and response or “pandemic treaty”. [1] In November 2021 the WHO noted this is because the “global response to COVID-19 was a disorganized, inequitable disaster”. The intergovernmental negotiating body (INB) formed in December 2021, tasked with drafting and negotiating this “international instrument”, will deliver a progress report to the WHO’s 76th World Health Assembly in 2023, with the aim to adopt the international legally binding instrument by 2024, providing the WHO unprecedented powers. [2, 3]

This is the continuation of an “effort to make the WHO the center of a One World Government” with their One Health agenda – WATCH

But the United States believe a new “Pandemic Treaty” is too slow, so in January 18, 2022 they have proposed changes to the existing IHR which the WHO D-G sent to

Member states on January 20, 2022, they want these amendments rushed through at the May 22, 2022 World Health Assembly. [4]

March 3

FOIA: US government and news media “blurred the lines” for COVID-19 vaccine promotion

Reported by Blaze News on March 3, 2022, they reveal that in response to a FOIA request, the US government paid hundreds of “trusted” media companies, blurring the line between advertising and objective news reporting when it came to COVID-19 vaccines. [1]

Hundreds of news organizations were **paid by the US federal government to promote COVID-19 vaccines** as part of a \$1 billion campaign to “strengthen vaccine confidence”, paying for “influences” and using “experts” such as Dr Anthony Fauci, yet no advertising disclaimer was provided. [2, 3]

A Blaze News FOIA request reveals that HHS purchased (with taxpayer money) COVID-19 vaccine advertising from major news networks, legacy media publications, digital media companies as well as hundreds of local newspapers and TV stations, all to “build vaccine confidence” in line with vaccine availability. [4]

At the same time, these media outlets collectively published “uniformly positive” [propaganda!] articles and video segments about vaccine efficacy and safety along with COVID-19 “fear based” stories. [5, 6]

Insiders have shared that the media outlets took the governments money to fund positive stories, and positive coverage of vaccines, the very definition of propaganda. Dr Malone explains this revelation of government involvement WATCH

March 4

The science showed in 2020 that ivermectin saved lives

Dr Tess Lawrie in conjunction with Oracle Films released a mini-documentary that captures her attempts to get ivermectin recognized as a drug that would save lives from COVID-19. The pooled data showed an 90% mortality benefit, and the health “establishment” quashed it. [1]

Yet the global drug regulators and health authorities warned against the established, Nobel Prize winning drug ivermectin for use for COVID-19! The media got hold of this and falsely portrayed it as only a horse dewormer, not crediting it as a life-saving human medication. [2, 3, 4]

March 9

NIH launches trial to study COVID-19 mRNA vaccine allergic reactions

On March 9, 2022, 16 months after the vaccine rollout in the US, the NIH launched a clinical trial of **up to** 100 people to study allergic reactions to a first dose of COVID-19 mRNA vaccine, where the second dose will be administered as an inpatient. [1, 2]
Adverse Events >>>

March 10

Pfizer CEO admits: only 2 years prior experience with mRNA vaccines

Pfizer CEO, Albert Bourla, admits that the company had only worked with mRNA vaccines for 2 years prior to 2020, before they began their mass experiment on the world population. The governments, health authorities and the mainstream media told the public that there were decades of experience with mRNA vaccines. [@10min] "It was counter-intuitive because Pfizer was mastering or let's say we had very good experience and expertise with multiple technologies that could give a vaccine...mRNA was the technology that we had less experience with, **only two years** working on this. And actually, mRNA was a technology that **never delivered a single product until that day**. Not vaccine, not any other medicine, so it was very counter-intuitive and I was surprised when they suggested to me that this is the way to go... They felt that the two years of work, on mRNA since 2018, together with BioNTech to develop a flu vaccine made them **believe that the technology is mature** and we are at the cusp of delivering a product, so they convinced me" says Albert Bourla

March 10

WHO advise Ukraine to destroy "high-threat" pathogens

The World Health Organization told Reuters that they advised Ukraine to destroy high-threat pathogens housed in the country's public health laboratories in order to prevent "any potential spills" that would spread disease among the population. [1] Three days earlier on March 08, 2022, Victoria Nuland testifies before a Senate Foreign Relation Committee hearing on Ukraine and admits the Ukraine does in fact have biological research laboratories, which for two weeks prior the US 'fact checkers' passed off as disinformation! [2]

On February 24, 2022 the Ukrainian Minister of Health Security sent an emergency Presidential Order to their bio-labs to destroy "biological pathogens."

March 10

US state changes definition of a COVID-19 death

On March 4, 2020 the US CDC changed how death certificates were to be filled in for COVID-19, a manner that would exaggerate death numbers.

Two years later on March 10, 2022 the US Health Department in Massachusetts acknowledge they counted the death of any person who had previously tested positive for COVID-19 as a COVID-related death, regardless of how much time elapsed between those two events. They have now changed the **definition** so the death number is 15% lower.

Australians looked to the high COVID-19 death toll in countries like the US as an example of what could happen here!

March 19

COVID-19 deaths impossible to calculate in UK as authorities used 14 different definitions

The number of people who have died from COVID-19 in Britain during the pandemic is impossible to determine because of the inconsistent definitions of what is meant by a COVID-19 death, Oxford University researchers have concluded. Freedom of Information (FOI) requests show that many people who died in the first wave NEVER tested positive for the virus, particularly older people who died in care homes. [1] In March 2020 the US and Australia allowed "assumed" COVID-19 deaths to be labelled on Death Certificates, maybe the UK allowed the same!

March 21

"Classical" herd immunity may not be attainable for COVID-19

On March 21, 2022, Dr Anthony Fauci *et al* published a paper to further propagate the notion that "**classical herd immunity**" may not be "attainable" for COVID-19. "The authors explain how the scientific understanding of herd immunity and its applications to various diseases have **evolved** over time." [1]

Some factors that Dr Fauci *et al* believe hinder achieving herd immunity for SARS-CoV-2 include: "the virus' ability to continually **mutate** to new variants; **asymptomatic** virus transmission, which complicates public health control strategies; the inability of prior infection **or vaccination** to provide **durable** protection against reinfection; suboptimal **vaccination coverage**; and adherence to non-pharmacologic interventions."

"Research to develop pan-coronavirus vaccines, which could protect against multiple coronaviruses or at least multiple SARS-CoV-2 variants, remains crucial." Remember in March 2020 getting a vaccine was the only way, this is the next step! [2]

Ten days later, on March 31st, the NIH launched their clinical trials for mRNA multi-variant vaccines; a solution they'll likely come to promote!

March 23

Australian MPs held COVID UNDER QUESTION cross-party inquiry

COVID UNDER QUESTION was a one-day, cross-party inquiry into the Australian Government's response to COVID held on 23rd March 2022. The inquiry was hosted by Senator Malcolm Roberts (One Nation Federal Senator for Queensland) and attended by Stephen Andrew (One Nation Queensland State MP for Mirani), George Christensen (Federal Nationals MP for Dawson), Gerard Rennick (Federal Liberal Senator for Queensland), Alex Antic (Federal Liberal Senator for South Australia) and Craig Kelly (Federal Palmer United Australia MP for Hughes).

Parliamentarians heard from a range of Doctors, experts, economists and everyday people about how the Government's response to COVID-19 has affected them and at times defied belief. The absurdity of Chief Health Officer (CHO) dictates and power-hungry politicians is all laid bare.

March 25

ATAGI recommend second booster before provisional registration is granted

Without TGA's approval, on March 25, 2022, ATAGI recommended a fourth dose (second booster), in some cases a 5th dose, of COVID-19 vaccine be given for certain groups and no shorter than 3 months apart.

"Comirnaty (Pfizer) or Spikevax (Moderna) are the preferred vaccines for COVID-19 booster doses including the additional winter booster dose. Vaxzevria (AstraZeneca) can be used when an mRNA vaccine is contraindicated, or a person declines vaccination with an mRNA vaccine. Nuvaxovid (Novavax) can be used if no other COVID-19 vaccine is considered suitable for that person."

It would appear that TGA have provided provisional registration for a "booster" dose, and maybe that is expected to cover any number of boosters!

The "winter booster" COVID-19 program is being rolled out with the 2022 **influenza vaccination program** and ATAGI says both vaccines can be administered at the same time!

ATAGI's reasoning for the state that "during the COVID-19 pandemic, there has been **reduced circulation** of influenza virus and lower levels of influenza vaccine coverage compared with previous years." But due to "borders reopening, a resurgence of influenza is expected in 2022." Masks and other mitigation efforts are doing nothing, or could it be they've returned to testing for ILI again?

Compare Victoria's Influenza Like Illness (ILI) data for yourself – see Figures 1, 2 and 3 for 2019, 2020, 2021, 2022 for yourself.

Dose upon dose upon dose and mix and match brands and "antigens"what could go wrong?

March 30

Bird Flu predicted as the “great pandemic”

Former CDC Director Dr Robert Redfield believes that COVID-19 was not the “great pandemic”, that is still coming and bird flu will be the next pandemic!

A few days after Dr Redfield’s “prediction” a “new deadly bird flu” is spreading through domestic flocks in America which will contribute to food shortages, though poses low risk to humans. [1, 2]

The U.S. Department of Agriculture is looking into vaccines as an option to protect poultry against deadly bird flu.

March 31

South Australia drops vaccine mandates for education & public transport

Vaccine mandates on workers in the school and passenger transport sectors will lift at midnight on March 30, 2022, Police Commissioner Grant Stevens announced, while SA records the second highest daily cases on record since the pandemic began! All decisions are based on Doherty/Adelaide University predictive modelling.

March 31

NIH begin multi-variant vaccine clinical trials

On March 31, 2022, the NIH begins clinical trials evaluating the second COVID-19 booster shots in adults with the Moderna mRNA vaccine, the study included new **multiple-variant vaccines**. The study is known as the COVID-19 Variant Immunologic Landscape (COVAIL) trial.

Two days earlier on March 29, the CDC recommended the second booster for adults 50 years and older and the immune-compromised.

The NIH will study the Moderna and Pfizer mRNA vaccine, and claim that the “COVID-19 vaccine manufacturers can adjust prototype vaccines to target specific variants, a process similar to how manufacturers update seasonal influenza vaccines every year to target circulating strains...**COVAIL trial** will gather data on the immune responses induced by prototype vaccines and variant vaccine candidates—including bivalent vaccines, which target two SARS-CoV-2 variants—to inform booster shot recommendations.

Effectively any mRNA code can be readily generated on a computer and synthesized with these new “vaccine platforms”, but the protein-antigen that your body will be tricked into manufacturing could potentially be cytotoxic, as has been shown with the “spike protein”.

*“We are looking beyond the Omicron variant to determine the best strategy to protect against **future variants**,”*

said NIAID Director Anthony S. Fauci, M.D.

The challenge is, what will be the new variant?

They've thought about that too, the NIH has established the **SARS-CoV-2 Assessment of Viral Evolution (SAVE)** programme to "address the public health threat caused by the increasing SARS-CoV-2 genomic diversity", because new "variants jeopardizes the protective antiviral immunity induced after infection or vaccination".

March 31

Human genome revealed hidden regions – with unknown consequences.

On March 31, 2022 it was announced that the first complete, gapless sequence of a human genome revealed there are hidden regions! "These unresolved regions include segmental duplications, ribosomal rRNA gene arrays, and satellite arrays that harbor unexplored variation of **unknown consequence**" [1]

There is still much to learn about the human genome and genetic material – so injecting a gene-based technology, after a few months of pharma-controlled human clinical trials, into billions of people on the planet also has inevitable "unknown consequences"!

April 1

April 2022

April 1

Second batch of Pfizer FOIA documents released

Under FOIA the US court order the FDA to release all Pfizer documents relied upon to grant Emergency Use Authorization for the Pfizer COVID-19 vaccine. The FDA wanted 55 years, then asked for 75 years to release these documents, but lawyer Aaron Siri fought them, and on January 6, 2022, a federal court in the Northern District of Texas ordered the expedited release of all documents. [1]

On April 1, 2022 the second batch of documents were released and published for public record on PHMPT (page 7) as well as ICAN websites, and have been revealing massive inconsistencies with the quoted "safe and effective".

- Documents reveal Pfizer employed 2400 additional staff Feb 2021 to handle adverse events reports (9 pages).

April 1

New website COVID.gov launched

Two years into the pandemic the Biden administration launch a new website, [COVID.gov](https://www.covid.gov), “that serves as a portal for information on vaccines, tests, treatments, masks, and the latest on COVID-19.” [1]

April 1

CDC introduces “COVID-19 vaccination status” ICD codes

Initially released January 19, 2022, and becoming effective **April 1, 2022**, the CDC’s National Center for Health Statistics (NCHS) introduced “3 new diagnosis codes, Z28.310, Z28.311 and Z28.39, into the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), for reporting **COVID-19 vaccination status**”. These “underimmunization” ICD codes are not based on any disease or illness, but are codes that depict a person’s “non-compliance of a medical procedure” – a means for digital surveillance. [1]

Once a person’s private information on their vaccination status is coded and uploaded into a database, it can be accessed by government and private health insurers alike, becoming a means for digital surveillance, or “**vaccine passports made easy**” [2]

Dr Malone also found another concerning ICD code – Z71.81 – a medical diagnosis for **counseling** the anti-vaxxer! Code was added effective from **January 10, 2021** – [read the “patient education” section!]

“The administrative state is busy **building a vaccine passport system** that will be active before most Americans are aware of what is being done to them.” [2] As I said in March 2020, the pandemic is the “perfect catalyst” for ushering in vaccine passports – globally.

CDC emails gained under FOIA by Epoch Times – the goal of the new IDC codes was “to track people who are not immunized or only partially immunized.”

April 6

FDA VRBPAC meeting discussed boosters and future COVID-19 vaccines

US FDA’s Vaccines and Related Biological Products Advisory Committee (VRBPAC) discussed “considerations for future COVID-19 vaccine booster doses and the process for selecting specific strains of the SARS-CoV-2 virus for COVID-19 vaccines to address current and emerging variants.” – WATCH

April 6

Study: Fourth vaccine dose, second booster – wanes quickly

On January 2, 2022, Israel began administering a fourth dose of BNT162b2 vaccine to persons 60 years of age or older. Study finds that the fourth dose of the Pfizer-BioNTech COVID-19 vaccine improves protection against infection and severe COVID-19; however, protection against confirmed infection appears to be short-lived.

April 6

FDA introduces “Future Framework” for re-coding mRNA vaccines, no need for trials!

The FDA’s advisory group VRBPAC discussed the “Future Framework” for the first time on April 6, 2022. “All of the committee members agreed that COVID-19 shots are not working, that boosting multiple times a year was not feasible, and that the shots need to be reformulated. They also unanimously agreed that there are no “correlates of protection” that one can use to predict what antibody levels would be sufficient to prevent SARS-CoV-2 infection.”

The “Future Framework” is a plan to rig the Covid-19 vaccine regulatory process in perpetuity with the so-called “next generation” COVID-19 shots.

The urgency of this matter was pushed because vaccine manufactures wanted a vaccine strain selection by June 2022 in order to deliver shots for autumn supply.

On June 28, 2022, VRBPAC met and **voted** to move forward with boosters formulated with Wuhan and Omicron variants even though there is little data. [2]

April 6

ATAGI provides advice on the use of sedation to vaccinate

ATAGI provides advice on the use of sedation in order to administer COVID-19 vaccines, with the caveat “sedation should not be used as a measure to enforce compliance with vaccination requirements.”

“While there are **no data** on the safety of specific sedative agents given concurrently with any specific vaccine, there are also no **theoretical** safety concerns.”!

April 7

TGA grants provisional registration for Pfizer booster in 12-15 age group, but ATAGI does not recommend

On April 7, 2022 the Therapeutic Goods Administration (TGA) granted Pfizer provisional registration for COVID-19 booster dose for adolescents 12-15 years, which would be a third shot six months after their first two **regardless** of which previous brand of vaccine used as their primary course. [1]

One day earlier on April 6, 2022, Senator Malcolm Roberts questioned the TGA in a Senate Estimates session, over the safety of boosters for this young age group.

On April 8, 2022 ATAGI met and concluded that based on current data they did not “currently” recommend the booster shot for 12 to 15 year, though they do still “strongly recommended” primary doses for ages 5-15. Reports of death and serious injury following the jab in all age groups including adolescent keep mounting up. As of April 19, 2022, over **57 million doses** of COVID-19 vaccines had been administered in Australia according to ATAGI who continue to assess appropriateness of boosters for the adolescent age group..

April 17

Australia stops Biosecurity Emergency

The Biosecurity Emergency Declaration relating to COVID-19 for Australia was NOT renewed when it lapsed on April 17, 2022. This emergency declaration that has been in place since March 18, 2020 and renewed every two months was only used to control border traffic.

Proof of a negative COVID-19 test prior to entry is no longer necessary, but proof of double COVID-19 vaccination is. [1]

April 22

WHO: Remdesivir now for early treatment of COVID-19

On April 22, 2022 the WHO publish update for their *Therapeutics and COVID-19: living guideline* document where they now conditionally recommend the antiviral remdesivir, with ONLY ONE mode of action, for **early treatment**, “in patients with **non-severe** COVID-19” to prevent hospitalization – what the COVID-19 vaccines were meant to do. [1]

Cheap hydroxychloroquine, with multiple modes of action, is not recommended for “any severity” of COVID-19!

April 25

Computer model fraudulently shows unvaccinated spreading COVID-19

The Canadian media picks up on the conclusions of a scientific paper published in a Canadian journal on April 25, 2022, that allegedly concludes from computer modelling that unvaccinated people increase COVID-19 risk of transmission, compared to the vaccinated.

BUT...

Dr Byram Bridle in his SubStack article walks through how a simple change to just **one** “assumption” entered in to the mathematical model “completely reverses the

conclusions of the paper". "Now the 'unvaccinated' are serving as a protective buffer for the 'vaccinated.'"

How could such a paper get through peer review and be published?

Mathematical models (that generally have not been made public) have been used in South Australia [1, 2] and globally by Public Health to shape COVID-19 policy, their outputs are only as accurate as the inputs! One change to the computer model parameters took the unvaccinated from "dangerous" to "heros"!

April 25

Elon Musk to buy Twitter (then not!) (then does)

In a press release on April 25, 2022 Twitter announced that Elon Musk will buy Twitter for \$54.20 per share (a 38% premium), amounting to approximately \$44 billion. Upon completion of the transaction, Twitter will become a privately held company. [1, 2]

This could be a win for free speech though vaccine "investor" Bill Gates is not sure, nor is the DHS. Elon is now a MSM "target" as he poses a threat to their control.

- March 25, 2022 (before the announcement) Musk tweets about Twitter's "free speech" policies. [8]
- April 15, 2022 – Elon Musk TED talk Q&A re Twitter and "humanoid" plans.
- May 15, 2022 the sale went on hold while the degree of fake "bot" accounts is determined, which are possibly different to Twitter's formal filings.
- June 7, 2020 deal may be scrapped?
- June 21, 2022 – Twitter Board unanimously recommends Elon Musk's \$44B bid to purchase company. At current prices investors would pocket a profit of \$15.22 per share. [3]
- July 9, 2022 – Elon Musk terminates his deal to buy Twitter – bots exposed!
- August 7, 2022 – Musk claims 33% of Twitter's visible accounts are spam
- August 23, 2022 – Musk lawsuit – subpoenas Jack Dorsey [4]
- Sept 13, 2022 – Twitter whistleblower congressional testimony – Twitter is a "cesspool of cybersecurity and privacy risks" [5] Now Musk's purchase the deal may be off again!

On October 27, 2022 Elon Musk finally takes over Twitter – HERE

April 28

Is COVID vaccination associated with an increase in emergency calls?

Peer reviewed, observational study looking at "Increased emergency cardiovascular events among under-40 population in Israel during vaccine rollout and third COVID-19 wave" was published April 28, 2022 in Nature. Is there a primary cardiac cause? – WATCH

April 28

ABS 2021 all-cause mortality 8700 higher than normal

On April 28, 2022 the Australian Bureau of Statistics (ABS) released their Australia wide provisional mortality statistics for 2021 which when you compile the data from their spreadsheet shows an increase in all-cause mortality of 8,706, with a definite increase above normal beginning in April/May 2021 when you look by month. Interestingly 2020 deaths were lower than 2019 and 2020. [1, 2, 3]
It's getting increasingly hard to find statistics on the ABS website!

May 1

May 2022

May 2

FDA finally admits COVID-19 is like the flu

In a May 2, 2022 JAMA viewpoint, top FDA officials wrote that, going forward, Americans will have to "accept that the presence of SARS-CoV-2, the virus that causes COVID-19, is the new normal", another respiratory virus just like influenza i.e. the flu!

On the back of close to a million deaths in the US "attributable" to COVID-19, they wrote, "widespread vaccine- and infection-induced immunity [natural immunity], combined with the availability of effective therapeutics [not these], could blunt the effects of future outbreaks. Nonetheless, it is time to accept that the presence of SARS-CoV-2, the virus that causes COVID-19, is the new normal."

The new normal will "likely require annual COVID-19 shots to be tailored around the most threatening strains of the virus" along with an annual influenza vaccine.

Conveniently companies such as Moderna have already been working on a combination vaccine.

May 7

First confirmed case of Monkeypox in non-endemic UK

On 7 May 2022, WHO was informed of a confirmed case of monkeypox in an individual who returned from Nigeria where the disease is endemic. The case developed a rash on 29 April 2022 and arrived in the United Kingdom on 4 May, departing Nigeria on 3 May.

By May 22 the WHO reported on Twitter that there are 11 non-enemic countries with "about 80 confirmed cases, and 50 pending investigations" with more likely to be reported, and travel links have not been established. Endemic monkeypox disease is normally geographically limited to West and Central Africa. [1, 2]

It is reported that monkeypox has been found in an 'atypical' spread in several countries including the United States, Spain, Canada and Australia, and "could accelerate in the coming months", prompting an emergency meeting by the WHO.

This world's first-ever global outbreak of Monkeypox has occurred, just one year after an international biosecurity conference in Munich held a simulation of a "global pandemic involving an unusual strain of Monkeypox" beginning in mid-May 2022! [3] The UK is stockpiling vaccines as they fear cases are being missed, as the majority of cases are not linked, suggesting it is spreading more widely.

Bill Gates "warned" us of smallpox in November 4, 2021. Is it a coincidence the smallpox vaccine also does monkeypox and just in time? On Sept 24, 2019, 13 months after it's submission, the FDA approved the smallpox/monkeypox vaccine called JYNNEOS in a country where the virus is not endemic.

The general, healthy population doesn't need to worry about monkeypox, the public health response need to be focused on male to male sex group – Dr McCullough concurs. The media are using images of shingles and smallpox to pass off as monkeypox, and COVID-19 vaccine side effects can result in Bullous pemphigoid, painful skin blisters, that could be misdiagnosed as monkeypox.

May 7

2000 Mules documentary reveals evidence of Election 2020 fraud

True The Vote and Dinesh D'Souza launched "2000 Mules" in early May 2022, a documentary which revealed that the 2020 Presidential Election was riddled with illegal ballot trafficking, enough to swing the result of the "most secure election in American history". [6, 7, 8]

This is separate to all the other alleged election fraud. [2, 3, 5]

The movie was released in a "novel" way because "we are in an age of censorship", so platforms like Apple, iTunes and Amazon Prime were NOT the methods used. The premier was limited to 300 US theatres and a virtual airing on May 7, 2022, which expanded over the following weeks to more theatres and DVD. By May 12, all most 1 million people had seen the film, making it "the most successful documentary in a decade". [4]

The documentary used purchased geolocation data and cross-matched, FOI-sourced, CCTV camera footage of many ballot drop-boxes. They were able to track "ballot mules" depositing multiple ballots in multiple boxes – an illegal act, as well as featured whistleblower. Of the key counties reviewed the total illegal ballots would have tipped the 2020 election results in the opposite direction.

Leading up to the 2020 US Election many ballot drop-boxes were sponsored by Mark Zuckerberg's private money and justified as necessary to "ease fears over voting" during the COVID-19 pandemic. [7, 8]

The film may be the prompt for new legal investigations into "impersonation fraud, false registrations, duplicate voting and fraudulent use of absentee ballots." [1]

May 8

FDA finally admits COVID-19 equates to flu

On May 8, 2022, the FDA officials now admit Americans should treat COVID-19 like the flu, a “departure from the rhetoric that was expressed by public health officials in 2020 and 2021.”

“...it is time to accept that the presence of SARS-CoV-2, the virus that causes COVID-19, is the new normal.”

Frontline doctors have been stating COVID-19 is like the flu since the early data came out in 2020 showing the survival rate for infection is 99.9% for the majority of the population, and they were called out for spreading “disinformation”.

May 10

FDA drops vaccine efficacy threshold for children’s COVID-19 vaccine assessment

FDA’s Peter Marks told a congressional committee that the COVID-19 Vaccines for children under 6 years, to be approved for Emergency use, they **won’t** have to meet the 50% efficacy threshold originally set. [1, 2, 3]

Pfizer’s two-doses “pediatric vaccine failed to trigger an immune response in 2-, 3- and 4-year-olds comparable to the response generated in teens and adults” [4]

May 10

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May 18

SA govt pass COVID-19 public health legislation

South Australian parliament passes new Public Health legislation to manage COVID-19, providing more “pandemic powers” and removal of civil liberties. The new labor Premier said this will “help end the Emergency Declaration at the end of June.” [2, 3]

“The amended South Australian Public Health Act 2011 allows for broad “directions” from the Chief Health Officer, with those who don’t comply facing \$20,000 fines and up to two years in prison.” [1]

May 19

ACIP approve booster jabs for children 5-11 years old

On May 19, 2022 on the back of flimsy data in only 67 children, the CDC Advisory committee on Immunization Practices (ACIP) approved the COVID-19 booster shot for children aged 5-11, a meeting with the public have opportunity to comment. [1]

May 19

G7 health ministers conduct 'Leopard Pox' simulation

The German Health Minister Karl Lauterbach (SPD) hosted the meeting of the health ministers of the G7 countries on May 19 to 20, 2022, in Berlin. The ministers agreed a pact for pandemic readiness that will focus on collaborative surveillance and a predictable rapid response to be better prepared in the future. They also pledged to increase their mandatory contributions to the World Health Organization by 50% by 2030-2031. [1]

The scenario submitted to the ministers of health predicted the spread of a dangerous smallpox virus quickly transmitted by a human after being bitten by a leopard. The details were disclosed by Bild on the basis of the documents they analyzed. The fake disease is called '**Leopard Pox**'. [2, 3]

May 20

First Better Way conference held in UK

On May 20-22, 2022, the first ever Better Way Conference was held in Bath, UK. The 3 day conference of over 65 leaders for health from around the world explored, debated and listened with an objective for a solutions-focused Better Way forward for public health. [1]

The conference was led by Tess Lawrie the founder of World Council for Health and hosted by Del Bigtree from The Highwire.

May 21

Australian Federal Election – Labor win with only 1/3 of first-preference votes

Australians went to the polls on Saturday May 21, 2022 to vote in their new government for the next 3 years in the Federal Election.

"Labor's path to victory has been unlike any election in history"..."This is reflected in the primary vote count, which will see Labor form government with just around a third of first-preference votes". "We've never seen support for the major

parties **drop so low** at a federal level before. The nearest comparison would be One Nation's breakthrough in Queensland in 1998." [3]
The final count won't be in for at least 13 days to ensure postal votes are counted. [1, 2]

May 22

WEF: Annual Davos meeting

The World Economic Forum (WEF) usually hold their annual gathering of elites & influencers in Davos, Switzerland, in the month of January, but due to the Omicron spread, they rescheduled it to **May 22 to 29, 2022**, so they could meet in person. The 2022 theme was **History at a Turning Point**: Government Policies and Business Strategies. [1, 2, 3, 4]

This forum links the digital data industry to the health industry!

The WEF meeting happened to coincide with 75th World Health Assembly (WHA) in Geneva, Switzerland, on 22-28 May 2022. At this WHA the controversial IHR amendments and "pandemic treaty" were being raised.

May 22

WHO: 75th World Health Assembly

The 75th WHO World Health Assembly (WHA) was held from May 22 to 28, 2022 in Geneva, Switzerland.

In his opening comments the WHO director general, Tedros assured the decision makers at the WHA that **COVID-19 is NOT over!**

At this WHA the controversial International Health Regulations (IHR) amendments and new "pandemic treaty" were being discussed and voted on.

The Pandemic Treaty – to allegedly define a better global public health response to the next pandemic, is not about health (big picture) but about justifying collecting **data for tracking**, and the **Vaccine Passports** are necessary to ushers (justify) all this in!

[March 2020 – I knew this declared pandemic was about vaccine passports – READ]

May 24

NIH establishes ARPA-H for fast tracking "high-risk, high-reward" biomedical research

On May 24, 2022 the National Institutes of Health (NIH) announced the establishment of a new structure the **Advanced Research Projects Agency for Health** (or ARPA-H), inspired by former director Francis Collins. With a mission to improve the U.S. government's ability to speed "high-risk, high reward" biomedical and health research, ARPA-H will serve as an independent entity

within the NIH and embrace the public-private partnership model used to develop the warp-speed COVID-19 experimental gene technology products referred to as vaccines. [1]

Shortly after, on April 30, Bill Gates writes an article advocating for developing, manufacturing, and injecting these [now accepted] mRNA vaccines even faster in the next potential pandemic!

MORE>>

May 24

WHO Director-General re-elected for second term

On May 24, 2022 the World Health Assembly re-elected Dr Tedros Adhanom Ghebreyesus as WHO Director-General for second term of 5 years. No other candidate challenged him for the post. His term officially begins August 16, 2022 [1, 2, 3]

May 24

SA ends State of Emergency after rule making changes hands

On May 24, 2022, the new South Australian government led by Premier Peter Malinauskas, as promised, allowed Grant Stevens to end the state of emergency **after 793 days** – the first state to remove emergency powers. The declaration of an Emergency which began on March 22, 2020 due to the outbreak of COVID-19 “gave the State Coordinator extraordinary powers to issue directions such as lockdowns, capacity restrictions and quarantine orders as the state sought to contain the spread of the virus.” [1]

The emergency could be lifted because on the same day the SA government passed amendments to the Public Health Act (2011) adding in “Part 11A – COVID-19 arrangements” which now provides these law makers the power to impose COVID-19 restrictions and rules upon South Australians with full “crown immunity”. [2]

“Cabinet’s Emergency Management Council (EMC) was informed [by whom?] it was now safe for Police Commissioner Grant Stevens to remove the pandemic laws ending his role overseeing the state’s COVID response.” [Cabinet’s EMC for 2020]

“We must remember that the lifting of the Major Emergency Declaration **does not mean** the pandemic is over.

We cannot be complacent. We must maintain vigilance to protect our community – that means getting vaccinated, wearing masks where required, getting tested if unwell, and quarantining while COVID positive.”

The new legislation was drafted “in consultation with the Emergency Management Council, which includes State Coordinator Grant Stevens and Chief Public Health Officer Professor Nicola Spurrier.”

The government stated that **school COVID-19 vaccination program** begins this Friday [May 27], with hubs at 40 schools **targeting** children aged 5-11." At this time 59% of 149,000 children in SA aged 5-11 years have had their first dose of COVID-19 vaccine. The government is promoting this so children "protect **themselves** against the disease".

Public Health Act (2011) – "Part 11 – Management of significant emergencies"
– BEFORE, – See Part 11A NOW (May 25, 2022)

May 25

Moderna discards 30 Million Doses of COVID-19 Vaccine, no country want's them!

On May 25, 2022 at the WEF it was reported that Stéphane Bancel, Moderna's CEO, while on a discussion panel said: [1, 2]

"It's sad to say, I'm in the process of throwing **30 million doses into the garbage**, because nobody wants them,"

"We have a big **demand problem.**"

Bancel elaborated on the outreach efforts the pharma giant was making to "every country," including going around to all the embassies in Washington, D.C., to entreat governments to distribute the excess shots to their citizens. But sadly, he concluded, "**nobody wants to take them.**"

"The problem we had two years ago is **there was no mRNA capacity** in the world. Zero."

[today] "Moderna has **3 billion** doses annual capacity, Pfizer has **4 billion** doses, that's seven billion doses, and the **Chinese don't want the vaccines with mRNA**. So if you just take the, just the Chinese population out, you have more than a dose per person, and as we just discussed, the issue in many countries is people don't want vaccines."

"We don't have a capacity issue, it was true 2 years ago, it is not true today"

Remember this 2016 prophecy by the man who worked with and funded the Wuhan Institute of Virology – [HERE](#)

Is the reason for the lack of demand that too many people are awake to the plan and pressuring their governments?

June 10, 2022 the CDC claim to have **wasted** 82.1 million COVID-19 vaccines from December 2020 through mid-May 2022.

At WEF meeting Albert Bourla, CEO of Pfizer, complains that they cannot even give away for free (paid for by the US) billions of doses to developing countries.

June 1

June 2022

June 2

68th Bilderberg meeting

On June 2 – 5 , 2022 the 68th annual **Bilderberg** meeting, a gathering of about 120 personally invited participants from 21 countries, met this year in Washington, D.C., USA to discuss (and influence) geo-politics. [4]

The Bilderberg core committee of insiders, selectively invite the world's most influential people, including political and military leaders, government officials, business and banking executives, royalty and other power elites. They meet behind closed doors, under the Chatham House Rule, to discuss and "set" global policy. [1, 2, 3]

According to their archived website, "Bilderberg is a small, flexible, informal and off-the-record international forum in which different viewpoints can be expressed and mutual understanding enhanced. Bilderberg's **only** activity is its annual Conference."

- Big tech censorship (cyber-steering) was on Bilderberg's agenda before it became "real" – such as 2015-16's "cybersecurity" and "AI" discussions.
- Bilderberg takes its name from the hotel in Oosterbeek, Netherlands, where the **first meeting** took place in May 1954.

Bilderbergers have historically directed policy! – see [HERE](#)
"Why we must oppose Bilderberg" 2014 – WATCH, NOTES

June 4

RECOVER initiative to find answers for "Long COVID"

On April 4, 2022, the NIH launched the four-year RECOVER initiative to understand a condition called **long COVID** and other post-SARS-CoV-2 infection conditions, which the NIH received \$1.15 billion from Congress a year prior. [1]

"The condition known as long covid continues to frustrate its sufferers, baffle scientists and **alarm** people who are concerned about being infected by the coronavirus.... a catchall phrase for persistent symptoms that can range from mild to debilitating and last for weeks, months or longer, is technically known as Post-Acute Sequelae of SARS-CoV-2 [COVID-19] infection, or PASC."

What would be interesting to understand is how many of the people who were treated early are suffering from "long COVID"? Is Long-COVID associated with the cytotoxicity of the spike protein, and is it "dose" dependent and/or time exposed to spike?

June 4

Pfizer admit they will not manufacture FDA approved COVID-19 vaccine Comirnaty

The US CDC quietly publishes a comment from Pfizer that they will not be manufacturing their August 2021 FDA approved [NDC] product called Comirnaty. The

only product available to date in the US, including mandated for the military, has been the emergency use experimental product. [1]
They state they will make the formulation with the modified tris-sucrose ingredient, which was not part of the clinical trials conducted by Pfizer and thus a distinctly different product.

June 6

CDC “upgrades” death coding system to now use AI

From June 6, 2022 the CDC’s The National Vital Statistics System (NVSS) cause of death coding system began a system-wide upgrade, which required a temporary suspension of routine NVSS surveillance reporting. The upgrade required all 2022 death records to be reprocessed into the new system. [1] The timing is interesting! The updated **cause of death coding system**, known as MedCoder, can handle a greater proportion of these records: It currently codes 85 percent of records automatically, and with continued improvements [through **machine learning**], “has the potential to code better than 90 percent of records,” [2, 4, 5]
The upgrade were expected to resume week 24 (i.e. last for 2 weeks) but it lasted 8 weeks until August 3, 2022 – having reorganised and lowers death codes – to artificially make the vaccines look better and COVID-19 look worse?! [6]
The CDC states: CDC’s Data Modernization Initiative supports artificial intelligence (AI), machine learning (ML) and other powerful solutions for large or complex data. These solutions can help us maximize insights from our data and systems and use those insights to drive public health action.” [3] The modernization initiative can be tracked back to a September 2019 white paper.

June 8

Media promoting Sudden Adult Death Syndrome

Around June 8, 2022, news media begin reporting on an alleged phenomenon “that doctors can’t explain”, which is too frequently occurring in healthy young people – and happens to fall in the time-frame since the new technology vaccines have rolled out. They are labelling these events **Sudden Adult Death Syndrome** or Sudden Arrhythmic Death Syndrome (SADS). Their advice, go get your heart checked! [1, 2]
The media is attempting to normalise the increasing number of young people collapsing and suddenly dying, and the vaccine “elephant in the room” appears to not be considered, even though there are multiple, emerging plausible mechanisms of injury. The question is had the victims been recent inoculated, an obvious, but taboo to mention, potential cause? [3]
For years **Sudden Infant Death Syndrome** (SIDS) has occurred in infants under 1 year old, but linking the timing with childhood vaccines is taboo, even for coroners to suggest.

June 9

Study: Unvaccinated control group shows less hospitalisations

On June 9, 2022 a pre-print (not yet peer reviewed) is uploaded to Researchgate, showing the results from a preliminary analysis of self-reported, self-selected survey from a sub-cohort of >300,000 participants of the Control Group Cooperative project. The intent to understand more about the health outcomes, choices and any discrimination faced by people who have chosen to avoid COVID-19 vaccinations, who effectively are the “control group” since Pfizer and Moderna eliminated their controls in the phase II/III clinical trials. The preliminary finding from this citizen-led project, initiated by an Eastbourne (UK) cooperative, show the unvaccinated control group participants place minimal burden on health systems through their strong reliance on natural immunity, self-care and the use of natural health supplements to help prevent or even treat COVID-19. [1] Update: “Nine days after the survey report was uploaded, *ResearchGate* removed it citing a breach of their terms and conditions.”

June 11

WCH: Called for “recall” of all COVID-19 vaccines

On June 11, 2022, the **World Council for Health** (WCH), representing around 70 organizations internationally, sent out a press release calling for the recall of all COVID-19 vaccines stating “Adverse Reactions for Novel Covid-19 Vaccines More Numerous Than for Similar Products by Factor of Between 10 and 169”. [1] Sufficient pharmacovigilance data exist on official and public global databases (WHO VigiAccess, CDC VAERS, EudraVigilance, and UK Yellow Card Scheme) to establish a safety signal on the novel COVID-19 injections – that warrants recall. In December 2021 they also called on regulators and governments around the world to immediately cease use of all experimental COVID-19 injections. In total, more than **40,000 deaths** are linked to the novel Covid-19 vaccines in the official databases analyzed and this is likely extremely under reported. This doesn’t account for the side effects. For context, Swine Flu vaccine was halted after 52 deaths and numerous debilitating side effects.

June 16

Fauci admits there are no studies in children to support booster shots

On June 16, 2022 at a COVID-19 hearing, Dr Fauci (while at home with COVID!) admits to Senator Rand Paul that currently there are no studies to support

COVID-19 vaccine booster shots in children to reduce hospitalization and death, though the health authorities are recommending children 5 years and older get their shot.

Senator Paul also questions Fauci about receiving royalties and he evades the question.

June 16

FOIA: CDC failed to monitor VAERS for vaccine safety signals

Children's Health Defense, a non-profit organisation received a letter of reply from HHS on June 16, 2022 to their freedom of information (FOIA) request to provide proof that the CDC had performed their stated data mining of the VAERS data for COVID-19 vaccine to surveil for safety signals. Their response was that **"no PRRs were conducted by the CDC"**. [1]

The CDC said in their Standard Operating Procedures document dated January 29, 2021, that it "will perform" a type of data mining analysis of vaccine safety data called **Proportional Reporting Ratio (PRR)**. Also in the letter they said that data mining is outside the CDC's purview, a contradiction to their SOP!

June 18

FDA & CDC: Children 6 months and older can now get COVID-19 vaccine

On June 18, 2022 the CDC's vaccine advisory committee (ACIP) unanimously voted to advise the CDC to recommend all children—save for those who have contraindications to the vaccines—from 6 months through 5 years of age get the Moderna or Pfizer-BioNTech COVID-19 vaccines, both of which are built on the brand new messenger RNA (mRNA) technology. [1]

Many watched the proceedings in horror of what they witnessed.

3000 out of 4536 children dropped out of the trial, and the vaccine group got more COVID-19 than the placebo group.

American Academy of Pediatrics statement,

"we've successfully immunized millions of children and adolescents against COVID-19. Families with infants and toddlers need and deserve the same chance to protect their children against this virus. More than 30,000 children younger than 5 have been infected with COVID-19 [positive PCR result!] and more than 500 have died [is this with or from?]..."

On June 17, 2022 the FDA granted EUA for Moderna and Pfizer-BioNTech for children 6 months to 5 and 4 years respectively, based on their advisory panel's recommendation, even though there is no efficacy data.

Australia's TGA will likely follow suit in a short time.

Pfizer's shocking "twisted" data – WATCH

Adverse Events in children – HERE

On June 6, 2022 the Global COVID Summit of over 17,000 doctors released their "Pediatric Declaration" regarding COVID-19 public policy harms to children in light of upcoming FDA meeting.

June 22

Denmark stops vaccinating under 18 year olds

On June 22, 2022 **Denmark** announced a cut-off for under 18's for the COVID19 vaccination. "From 1 July 2022 it has no longer been possible for children and young people under the age of 18 to get the 1st jab, and from 1 September 2022 it will no longer be possible to get the 2nd jab." The reason, "Children and young people only very rarely become seriously ill from covid-19 with the omicron variant." [1]
On September 30, 2022 **Sweden** removes the recommendation for vaccination against COVID of healthy children and adolescents under 18.

June 28

FDA's advisory group approved reformulated tri-valent COVID-19 booster shots with no testing needed.

On June 28, 2022, the FDA's advisory body, VRBPAC, met and **voted** 19 to 2 to move forward with the next wave of COVID-19 booster shots to include a component that targets the Omicron variant. The tri-valent boosters will be formulated with the obsolete Wuhan strain plus the BA.4 and BA.5 Omicron variants, even though there is little data. [2, 3]

The urgency of this matter was pushed because vaccine manufactures wanted a vaccine strain selection by June 2022 in order to deliver shots for autumn/fall supply. On Saturday June 25, 2022, the FDA released their "strain selecting guidelines", the proposed "Future Framework" for addressing future COVID-19 vaccine strain composition. [1] The FDA will not require clinical trials for these strain changes! The briefing document states: "The evaluation of **modified vaccines** for the purpose of vaccine strain composition decisions **will need to rely mainly on comparative immunogenicity data** due to the time constraints involved in vaccine manufacturing and clinical efficacy evaluation." Skipping clinical trials all together. The FDA assume the vaccines are safe (even though they are still emergency use), and with regards to effective, they will determine this simply through achieving an antibody response!

WATCH

June 29

WHO still focused on vaccines for COVID-19

WHO media briefing on June 29, 2022 the heads are still pushing the vaccines as effective for COVID-19, plus not enough people have had their first vaccine, and pushing the mRNA technology for other diseases (@35:50) ...even though the current mRNA COVID-19 vaccines are still under "emergency use" regulatory authorization! [1]

June 30

FDA recommends Omicron strains in new boosters, that to the Future Framework scheme

On June 30, 2022 the FDA recommended [2] to vaccine manufactures to include Omicron BA.4/5 component, together with the extinct original strain, in their September booster doses as the effectiveness of the current (still Wuhan/original strain) vaccines wane so fast.

The FDA have adopted the "future framework" scheme (introduced April 6, 2022) which was voted on at June 28, 2022 VRBPAC meeting, which will allow reformulated mRNA COVID-19 shots to gain approval WITHOUT further clinical trials. [1]

A week earlier NIH researches had found better antibody responses from natural infections vs vaccination with Moderna, of which at best offer only short-lived protection.

A June 28, 2022, Pfizer presentation to the FDA's VRBPAC meeting shows they were already developing a bivalent vaccine! [3]

July 1

July 2022

July 1

Three deaths in Pfizer vaccine trial were not investigated

On July 1, 2022 another court-ordered dump of the Pfizer documents were received from the FDA, in which a document reveals that 3 deaths following vaccination in trial participants were not investigated.

"[I]t's not clear how the investigator and Pfizer can be so sure the death was unrelated to the vaccine when there was no autopsy and no thorough medical assessment" said Sonia Elijah who has analysed the 3611-page document entitled, 'C4591001-fa-interim-narrative-sensitive' which contains pertinent information on hundreds of Pfizer's clinical trial subjects who were withdrawn from the trial. Based on these 50,000 pages submitted to the FDA, the vaccines were advertised as "safe & effective" to the public.

July 6

Australia recommends 4th Jab!

The Australian Technical Advisory Group (ATAGI) met on July 6, 2022, and decided to recommend a fourth jab for everyone. Over 65 years are already eligible. Politicians and media are citing high case numbers as a cause for alarm. [2]

The data released from NSW week 26 Epidemiological report suggests the 4th and 5th vaccinated individuals have a 1 in 5 chance of dying from Omicron sub-variants, BA.4 and BA.5, though many are elderly in aged care facilities and “no attempt was made to rescue them”! Only 1 of the 718 people admitted to Hospital was confirmed unvaccinated. Having COVID-19 attributed to their cause of death fuels fear.

Australian Prime Minister Anthony Albanese has called the fourth booster shot ‘inevitable’ and a ‘matter of urgency’ for Australians as he warned the Covid-19 pandemic was far from over. [1]

July 7

Un-vaccinated have superior natural immunity and recover quicker

A study by Chemaitelly et al out of Qatar on July 7, 2022, shows that the “Effectiveness of primary infection” which is natural infection in an unvaccinated person, “against severe, critical or fatal COVID-19 reinfection was 97.3%,...irrespective of the variant of primary infection and reinfection, and with no evidence of waning...for over 14 months after primary infection”. [1:23:03] Demonstrating natural infection provides superior immunity which is broad, robust and long lasting.

On July 7, 2022, NEJM Correspondence by Boucau et al, now published, demonstrated that the boosted, “people who are triple-vaccinated ...against COVID **recover significantly more slowly** from COVID infection and **remain contagious for longer** than people who are not vaccinated at all.”

Ten days previous on June 28, 2022, another paper by Venkata et al showed that increased hospitalization and death from COVID-19 is occurring in the highly vaccinated and that 95.6% of all COVID-19 deaths had pre-existing conditions. STUDIES

July 12

Omicron sub-variant BA.5, the most infectious & transmissible; the highly vaccinated are suffering the most

On July 13, 2022, picking up from the WHO press briefing yesterday CNN reports the most infectious and transmissible virus variant Omicron BA.5 has arrived. They spout that the vaccine is the only tool available to help “blunt the toll”, yet the data shows that it is actually those who have received the most vaccine doses who are suffering hospitalisation and death from COVID-19 Omicron variant. [1]

July 12

WHO extends PHEIC and reinforces "COVID-19 is nowhere near over"

At the World Health Organization (WHO) press briefing on July 12, 2022, the Director General stated [1]

*"Sub-variants of Omicron, like BA.4 and BA.5, continue to drive waves of cases, hospitalization and death around the world..." and the "[n]ew waves of the virus demonstrate again that **the COVID-19 is nowhere near over**"*

He announced that the Emergency Committee on COVID-19 met on Friday July 8, 2022 and extended the Public Health Emergency of International Concern (PHEIC) because:

1. Waves of cases, hospitalization and death around the world from sub-variant BA.4 and BA.5
2. Testing and sequencing surveillance has been reduced significantly.
3. Diagnostics, treatments and vaccines are not being deployed effectively.
4. There is a major disconnect in COVID-19 risk perception.

"New waves of the virus demonstrate again that the COVID-19 is nowhere near over"

*"We have safe and effective tools that **prevent infections**, hospitalizations and deaths."*

*"As transmission and hospitalizations rise, governments must also deploy tried and tested measures like **masking**, improved ventilation and **test and treat protocols**"*

Tedros also promoted other vaccinations, including new ones. "Today, WHO released the first-ever report on **vaccines in development** to prevent infections caused by antimicrobial resistant bacterial pathogens."

The vaccine was meant to render the pandemic over, but as new variants keep emerging...it seems it will never be "over". [2, 3]

July 12

Lawsuit filed against 3 US medical boards

On July 12, 2022 the American Physicians and Surgeons Educational Foundation (AAPS) filed a lawsuit in the federal Southern District of Texas, against three **medical special boards** for their threatened retaliation against physicians who speak out on matters of public concern. [1]

"This new lawsuit asserts that "Defendants wrongly misuse their authority in a politically partisan manner to chill speech critical of positions taken by Dr. Anthony

Fauci, lockdowns, mask mandates, Covid vaccines and even abortion.” This Complaint seeks injunctive and declaratory relief against several specialty Board Defendants that hold monopolies over board certification, and against the federal government for its newly created Disinformation Governance Board.”

July 13

FDA grants EUA for Novavax COVID-19 vaccine

On July 13, 2022 the FDA grants Emergency Use Authorization (EUA) for Novavax COVID-19 Vaccine, a 2-dose, adjuvanted vaccine for 18 years and older.

July 14

Public Health scientists are quitting in droves

Frustrated and alarmed, health experts are quitting the CDC, NIH and FDA at high rates, creating serious staffing shortages and a serious lack of leadership, writes Johns Hopkins University professor Dr Marty Makary in his substack together with Tracy Hoeg on July 14, 2022. [1]

Public health officials are not following the scientific data and are going around established protocols, providing “bad advice” which is especially harming children. But many appear to be hanging in there just to get to their retirement. Even Dr Fauci is considering retiring!

July 15

UN delegation commit to accelerate progress towards SDG

At a July 15, 2022 UN Economic and Social Council political forum in New York, the Ministers and high representatives on the theme “**building back better** from the coronavirus disease (COVID-19) while advancing the full implementation of the 2030 Agenda for Sustainable Development” declared that the 2023 Sustainable Development Goals Summit in New York would **mark the beginning** of a “new phase of **accelerated progress** towards the Sustainable Development Goals” [1, 2, 3, 4] This will be the second SDG Summit, since the adoption of the 2030 Agenda in September 2015. With a “decade of action” to go!

July 15

US extends public health emergency

The Biden administration announced on July 15, 2022, that it has extended the COVID-19 public health emergency for three more months.

Department of Health and Human Services Secretary Xavier Becerra officially renewed the emergency declaration. The order was extended to Oct. 13, 2022, “as a result of the continued consequences of the Coronavirus Disease 2019 pandemic,” Becerra said in the order. [1]

July 18

Dr Anthony Fauci announces intent to retire

On July 18, 2022 in an interview with Politico, Dr Anthony Fauci, now 81 years-old, says he's planning on retiring by the end of President Joe Biden's term (2025). Fauci has been the director of the NIAID since 1984, serving under seven presidents and is currently the chief medical adviser to the White House. [1, 2]

"I haven't made an announcement of my retirement, but it could be anywhere from now until then...I don't know yet." said Fauci.

It is estimated that Fauci's first year pension payout will exceed \$414,000 – more than the salary for the President of the United States (\$400,000) – "the largest federal retirement package in history".

Two years into Fauci's appointment as director of NIAID, the 1986 Act is passed which provided 100% liability immunity to vaccine manufacturers, even though vaccines are "unavoidably unsafe". Also in 1986 the first genetically altered vaccine for humans was approved by FDA.

July 20

Australia: Trusted Digital Identity Bill would lay foundations for social credit system

On July 20, 2022 Senator Alex Antic warned Australians about the looming "**Trusted Digital Identity Bill**" "which would lay the foundations for a government controlled central information database for every Australian. This can only lead to a **social credit style system**. A system which will forever change the fabric of our society."

July 20

Media Watchdog report: Big Tech censorship is hurting the public

Released July 20, 2022, the Media Research Center's CensorTrack.org, a media watchdog, has identified and verified over 4,000 individual examples of censorship in the first 3 months of 2022, which in that time, over 144.3 million times information was withheld from the American people by Big Tech social media platforms – Facebook (Meta), Instagram, YouTube, TikTok, Twitter, LinkedIn, and Spotify. This figure is "massively understated".

This "**Secondhand censorship**" phenomenon can be defined as the number of times users on social media had information kept from them – stifling free speech and online debate.

When it comes to suppression of COVID-19 vaccine and early treatment information this could be argued as crimes against humanity – murder. Other stories includes the suppression of Hunter Bidens laptop, and the implications for manipulating a Presidential election.

July 21

Fully vaccinated US President Biden tests positive for COVID-19

On Thursday July 21, 2022 President Joe Biden tested positive for COVID-19 for the first time, he had returned from a trip to Saudi Arabia the previous weekend. 79 year old Biden is double vaccinated and double boosted (4 doses) with COVID-19 vaccines and is taking the antiviral drug Paxlovid, he said he is experiencing mild symptoms. [1, 2, 3]

Biden cognitive state is (still) under question. Just prior to the positive result, he remarked as to having cancer, which the White House attempted to cover the gaff by indicating he was referring to pre-presidential skin cancer.

July 22

First US polio case in nearly a decade

The New York health department on July 21, 2022, reports the first US case of Polio in almost a decade, last reported 2013.

“It appears this patient had a strain of the [polio] virus that could have come from someone who got a live vaccine.... For the past 25 years, the U.S. has used a polio vaccine that contains a dead virus.” [1, 2]

July 27

FOIA: CDC coordinated with Big Tech to censor COVID-19 information

Back in July 2021, following this revelation that the White House was collaborating with private companies to moderate content on social media platforms and restrict access to information, America First Legal (AFL) submitted a FOIA request on July 16, 2021, to the HHS, CDC, FDA & NIH to uncover the degree to which these government public health agencies and the White House have been censoring content. In April 2022, AFL needed to sue the CDC to compel them to release the documents. [1] On July 27, 2022 AFL received 286 pages of CDC internal documents that within them revealed that they coordinated with Big Tech to censor COVID-19 free speech. [2]

Much of the information shared by the CDC and other top health agencies and officials in the early days of the pandemic **turned out themselves to be misinformation!**

- Walensky – (April 2021) “*vaccinated people wouldn’t transmit COVID-19*” [3, 4, 5], CDC reversed next day!
- Fauci – (May 2021) vaccinated people: “*you become a dead end to the virus*” i.e. stop transmission [6], but then came “break through” infections
- Fauci – Americans shouldn’t wear masks, then he started promoting 2 or more masks – contradictory messages.
- Biden (July 23, 2021) – “*you’re not gonna get Covid if you have these vaccinations*” [7]
- FDA commissioner Califf – “misinformation” is “leading cause of death” in America!

August 1

August 2022

August 3

ATAGI recommend CV19 vaccine for children as young as 6 months

On August 3, 2022 Australia’s vaccine advisory group, ATAGI announced they recommend the “COVID-19 vaccination for **children aged 6 months to <5 years** with severe immunocompromise, disability, and those who have complex and/or multiple health conditions which increase the risk of severe COVID-19.”

“The recommendation is for 2 primary doses, except for those with severe immunocompromise who require 3 primary doses.” Conveniently “A **pediatric formulation** of the Moderna COVID-19 vaccine (Spikevax) was provisionally approved by the Therapeutic Goods Administration (TGA) on **19 July 2022** for use in children aged 6 months to 5 years”

“Moderna pediatric COVID-19 vaccine **can be** co-administered with other vaccines...co-administration **may** increase the likelihood of mild to moderate adverse events including fever.”

August 8

FBI raid the home of the 45th President

On August 8, 2022, the FBI raided Mar-A-Lago in Palm Beach, Florida former President Trump’s home, including his safe! [1, 2, 3]

“*They don’t want Trump to run again and win in 2024*”[4]

"The purpose of the raid from what they said was the national archives wanted to corroborate whether or not Donald Trump had any documents in his possession" says Eric

This would have been signed off [12] at the highest level [11] fodder for the MSM. [5, 6] Trump's lawyer stated they weren't allowed to touch or keep the search warrant, contrary to MSM narrative re Merrick Garland's remarks.

Is it politically motivated, and an abuse of power? [7, 8, 9]

New information:

- Trump cooperated with FBI prior to this raid, raising questions as to it's justification. [10]
Glenn Beck covers Trumps current lawsuits and persecution. Aug 26, 2022 the DOJ release heavily redacted affidavit [10], which a former FBI member says the affidavit did not meet the standard for a search warrant. [11]
Legal basis for raid blown apart. Could it be "election interference"? [12, 13]
- Sept 5, 2022 Judge grant's Trump's request for "Special Master", can't trust DOJ to do the job! [14]
- Biden admin paved the way for the raid: " wave executive privilege for the first time in US history".
- Note: Obama kept classified docs – double standard?
- Former FBI agent weighs in on the raid

August 11

CDC loosens COVID-19 guidance

On August 11, 2022 the CDC announce a new relaxed COVID-19 pandemic guidance, even though "COVID-19 remains an ongoing public health threat"; a carefully worded reversal. After 2 1/2 years, now putting the onus on individuals to limit the spread, rather than schools, industry and workplace. [1, 2, 3] Right at this time lawsuits are happening in the background. Coincidence?

CDC spokesperson Greta Massetti stated "this guidance...helps us move to a point where COVID-19 no longer severely disrupts our daily lives."

"The agency's focus now is on highly vulnerable populations and how to protect them — not on the vast majority of people who at this point have **some immunity** against the virus and are unlikely to become severely ill."

- dropped screening or testing for covid in most settings.
- dropped the 6-foot social distancing standard
- abolished the quarantine rule for unvaccinated people.

"High levels of vaccine- and infection-induced immunity and the availability of medical and nonpharmaceutical interventions have substantially reduced the risk for medically significant illness, hospitalization, and death from COVID-19."

In plain terms announcement effectively means: "*everyone can pretty much go back to normal*". Focus on illness that is medically significant. Stop worrying about positive cases because nothing is going to stop them. Think about the bigger picture of

overall social health. End the compulsion.” “So finally, nearly two years later the CDC has embraced the Great Barrington Declaration” released October 4, 2020.

August 15

UK first to approve Moderna’s bivalent COVID-19 vaccine

On August 15, 2022, the UK Medicines and Healthcare Regulatory Agency (MHRA) announced the “conditional” approval of an “updated versions” of Moderna’s COVID-19 vaccine (mRNA-1273.214) for “boosters”, called Spikevax Bivalent, the first country in the world to do so. This vaccine targets both extinct original Wuhan SARS-CoV-2 variant and the Omicron BA.1 variant, 25 micrograms of mRNA for each variant. The government’s independent expert scientific advisory body endorsed the new vaccine type, “after carefully reviewing the evidence”. [1] The approval was based on a single, incomplete human trial consisting of approximately 800 participants currently being conducted by Moderna. It “triggers a strong immune response” against BA1 and a “good immune response” against sub variants BA.4 and BA.5 – the current prevalent strains! Moderna’s CEO calls this the “next generation COVID-19 vaccine” and equates it to an iPhone app. The bivalent vaccine will be manufactured National Resilience, founded November 2020, with links to the CIA.

August 17

CDC head admits they mishandled pandemic, reorganise agency

On August 17, 2022 CDC director Rochelle Walensky reportedly informed her senior staff that the agency will be reorganizing following an April 11, 2022 internal and external review, which focused on the handling of the Delta and Omicron waves of the COVID-19 pandemic, not 2020. She wants to restore public trust, but is it too late? [1, 2, 3, 4]

“The changes include internal staffing moves and steps to speed up data releases.”

“Restructuring of the agency’s communications office and revamping its website to make public health guidance easier to find and increasing the use of preprint scientific reports to get actionable data out quicker.”

The CDC has a \$12 billion budget, more than 13,000 employees, and is charged with protecting Americans from disease outbreaks and other public health threats.

Doctors from other countries refer to the CDC website for guidance also!

The CDC were arbiters of “The Science” during the pandemic, and now they admit they made dramatic mistakes. The public and doctor’s have lost trust in the agency.

Dr Malone suspects the persons behind the April internal reports were behind the “anomalous” February 20, 2022 NY Times story which acknowledged the CDC is hiding data, and is becoming politicized. [4]

Dr Risch writes "The CDC's announcement covers everything except the fundamental problem to which the director and the external reviewer are blind: **industry subservience and epidemiologic incompetence.**"

Dr Wolf states that Walensky is currently facing two legal actions, one for willful misconduct and another for first amendment rights violations – conspiring with Big Tech. The CDC revamp also appears to be more "authoritarian" by introducing pre-print, non-peer reviewed "science" to be "rushed to the message shop" to direct public policy! [5]

"Rochele Walensky(CDC)...her optimism for the Vaccine came from a CNN News Report...which is essentially the press release of Pfizer" says Dr Aseem Malhotra

August 19

NIH terminates EcoHealth Alliance funding of Wuhan lab

The U.S. National Institutes of Health (NIH) informed EcoHealth Alliance, on August 19, 2022, that it has terminated subgrant R01AI110964, which is used to fund the laboratory in Wuhan, China located where the first COVID-19 cases were identified in 2019.

EcoHealth Alliance failed "to meet award terms and conditions requiring provision of records to NIH upon request," including failing to provide the "lab notebooks and original files from the research conducted at the Wuhan lab" on bat coronaviruses. EcoHealth Alliance still receives funding from NIH for other projects.

August 22

Fauci stepping down as director of NIAID, effective Dec. 2022

On August 22, 2022, Dr Anthony Fauci announced he will be stepping down, in December, as director of the National Institute of Allergy and Infectious Diseases (NIAID) after 38 years in that position. Fauci was a coronavirus taskforce member and a media favorite during the pandemic, famous for his flip-flop messages. [1]

August 29

Australia "provisionally" approves bivalent Moderna vaccine

On August 29, 2022, Australia's Therapeutic Goods Administration (TGA) provisionally approved Moderna's bivalent COVID-19 vaccine, elasomeran/imelasomeran (SPIKEVAX Bivalent Original/Omicron) for use as a booster dose in adults 18 years and over. This is the first bivalent COVID-19 vaccine approved for use in Australia. [1]

"The SPIKEVAX Bivalent Original/Omicron vaccine contains 25 micrograms of imelasomeran that targets the Omicron variant BA.1, and 25 micrograms of

elasomeran that targets the original strain of SARSCoV-2. All other ingredients are the same as those used in Moderna's original COVID-19 vaccine."

Like the UK approval, but unlike the US EUA, Australia's "provisionally approved" vaccine contains the BA.1 Omicron variant as well as the original "Wuhan" extinct variant.

According to the TGA: "SPIKEVAX Bivalent Original/Omicron (elasomeran/imelasomeran) is the third mRNA vaccine to receive provisional approval in Australia. mRNA vaccines use a synthetic genetic code called RNA to give our cells instructions about how to make the coronavirus' unique spike protein. When our body has made the protein encoded by the mRNA vaccine, it then recognizes the spike protein as being foreign and launches an immune response against it. The RNA from the vaccine does not change, or interact, with our DNA in any way."

August 31

FDA approves bivalent vaccine on "faith" not data

On August 31, 2022 the FDA announced the emergency use authorization of the new COVID-19 bivalent booster vaccine formulations both Moderna and Pfizer-BioNTech with **NO** human trials and **NO** advisory panel consultation, hopefully it will work! The formulation contains the mRNA spike protein code for the extinct original Wuhan strain plus "one **in common between** [!!!] the BA.4 and BA.5 lineages of the omicron variant of SARS-CoV-2". They will be referred to as "updated boosters" [1, 2]

"The company has tested the **BA.5-specific** vaccine only on [eight] **mice**, so far, and is relying on data from both the **BA.1** human trials and the BA.5 mice trials for their submission for authorization". A vaccine expert John Moore says "to rely only on mouse data (for authorization) would be unprecedented"! But both of these vaccines do not contain the mRNA code use in this new EUA.

FDA Commissioner Robert Califf tweeted, "As we know from prior experience, strain changes can be made without affecting safety." He is considering this new technology vaccine the same as an influenza "strain change", but is ignoring the trail of destruction.

The following day on September 1, 2022, CDC's ACIP committee recommend the use of the new bivalent jab for 12 years and older for Pfizer, and 18 years for Moderna. [1, 2]

The Moderna BA.1 vaccine was authorized in the UK on August 15, 2022.

The World Council for Health continues to call for a HALT on these injectable products.

September 1

September 2022

September 5

UK government no longer offers COVID-19 vaccine to under 12 years

In a UK **Green Book** update on September 5, 2022, the UK government no longer offer COVID-19 vaccination to children aged 5-11, except those in clinical risk groups. Under 12's is no longer being injected, allegedly for "developmental" concerns. [1, 2, 4]

The UK Health Security Agency (UKHSA) says this is line with advice published by the UK's Joint Committee on Vaccination and Immunization (JCVI) back in February 2022. [3]

September 6

White House transitioning to a single covid annual booster shot

On September 6, 2022 the Biden administration's chief medical officer, Dr Anthony Fauci, said [@11:20] that the U.S. is "moving towards a path" of vaccinating against "covid" at a "cadence similar to that of the annual influenza vaccine," where a "**single**" annual booster will be "matched to the currently circulating strains "

On the same day Fauci said that there is no time to do human clinical trials to test the new bivalent vaccine just authorized under emergency use by the FDA. The new COVID-19 bivalent booster authorization was based on a study of ONLY 8 mice, assessing whether they produced antibodies!

[note, more and more they use "covid" instead of the correct nomenclature "COVID-19"]

September 8

Queen Elizabeth II, dies at aged 96

On **September 8, 2022**, Queen Elizabeth II died at aged 96, following a downturn in health. Buckingham Palace released a statement just after 6:30pm on Thursday 8th Sept (local time) confirming the Queen had died at her Balmoral estate in the Scottish Highlands. She is the longest-reigning British monarch of 70 years, and has overseen 15 Prime Ministers, including the Assent of PM Liz Truss just two days earlier. [1, 2, 3]

Prince of Wales, Charles aged 73, who mourns his mother, will become the King of the United Kingdom and the head of the Commonwealth, known as King Charles III.

[4, 5, 6] On Sept. 9, 2022, K. Charles made his first address as UK monarch. [7]

Once the official 7 day mourning period ended his new cypher was revealed on Sept. 26, 2022.

The Queen was laid to rest at Windsor Castle on **September 19, 2022**, following a large state funeral attended by 2000 guests including global leaders. [8, 9, 10, 11, 12, 13]

Queen Margrethe of Denmark tests positive for COVID-19 following attending the funeral, where many elderly attended and no masks were worn! [14]

September 12

Bioeconomy executive order signed

On September 12, 2022 President Biden signed an Executive Order titled "Advancing Biotechnology and Biomanufacturing Innovation for a Sustainable, Safe, and Secure American Bioeconomy "

The order calls for the rapid development of a "bioeconomy" to address "societal goals" like programming human biology. The order directs multiple federal agencies to work with the private sector to develop genetic engineering technologies to "write circuitry for cells" and to "predictably program biology." [1, 2]

"Transhumanists and Technocrats in Big Pharma have cracked the U.S. government wide open to flood the bioeconomy with taxpayer money and labor to push the frontier of **genetic modification of all living things** and **especially humans**." writes Patrick Wood.

September 13

Denmark ends COVID-19 jabs for under 50's

On September 13, 2022 the Danish Health Authority updated their recommendations and ended the COVID-19 vaccines for most people under 50, who "are generally not at particularly higher risk of becoming severely ill from covid-19". [1, 2]

"The purpose of the vaccination programme is to prevent severe illness, hospitalization and death. Therefore, people at the highest risk of becoming severely ill will be offered booster vaccination. The **purpose** of vaccination is **not to prevent infection** with covid-19, and people aged under 50 are therefore currently not being offered booster vaccination." !!!

"Denmark did not explicitly say the **risks of mRNA jabs now outweigh their benefits** for healthy people under 50. But that view is **implicit in the announcement**, which does not merely discourage but actually bans shots for those people, even though Denmark expects "a large wave of [Covid] infection" in the next few months." reports Alex Berenson

Denmark has already discontinued COVID-19 shots for nearly everyone under 18.

September 18

President Biden declares “the pandemic is over”

On Sunday September 18, 2022 in an interview with 60 Minutes, while at a Detroit motor show, US President Biden casually said “**the pandemic is over**, we still have a problem with covid”, prompting the White House to go into damage mode on Monday, stating the COVID-19 policies are unchanged, and the “health emergency” continues, and vaccine mandated remain in place! [1, 2, 3, 4]

“The declaration surprised the president’s own senior health officials, many of whom only learned about Biden’s remarks from tweets and news headlines.” [5]

Qu. If we are in a COVID-19 pandemic, how can “the pandemic” be over if “we still have a problem with covid”?

Their narrative is collapsing – WATCH

September 20

United Nations claim they “own the science” on climate change

On September 20, 2022 the United Nations Secretary Melissa Fleming told the World Economic Forum sponsored Sustainable Development Impact Meetings [3] on the topic of “Tackling Disinformation” that the United Nations “**owns the science**” [4] on **climate change** and they partnered with Google and big tech to censor content counter the UN narrative on that subject. [1]

“We own the science [on Climate Change] and we think the world should know it”...“This idea that all speech is equal is not true” says UN Secretary for Global Communications [2]

October 1

October 2022

October 1

Canada drops vaccine mandate to enter country

Effective October 1, 2022, Canada drops its Covid-19 vaccine requirement for visitors entering the county. The cross border mandate for Truckers began January 15, 2022. [1]

Air Canada welcomes the change, stating the measures “were not justified by science”! [2]

October 3

CDC finally release V-SAFE vaccine adverse events data, revealing alarming info.

On October 3, 2022, The Highwire announced that their non-profit, the Informed Consent Action Network (ICAN) via the Freedom of Information Act (FOIA) court order (by Siri & Glimstad), after (463 days) nearly a 2-year fight for transparency, have finally obtained the CDC's Vaccine Safety Assessment For Essential workers (V-SAFE) data for approximately 10 million registered smartphone app users who took the COVID-19 vaccines. [4]

On December 29, 2021 ICAN sued the CDC (and FDA), twice, for the, already de-identified, V-SAFE data. The first batch of data released contains "144 million rows of health entries by v-safe users", where they only had pre-determined check boxes they could mark, it "does not include data from the fields that allowed free-text responses" i.e. other negative health consequences not listed! "It nonetheless **reveals shocking information** that should have caused the CDC to **immediately shut down** its Covid-19 vaccine program." [1, 3]

Of the 10 million registered users (of which 13,000 were under 2 years of age), there were 71 million reports of symptoms, working out to an average of **over 7 symptoms reported per v-safe registrant**. V-SAFE represents **less than 4%** of COVID-19 vaccine recipients in the US! Consider this, 400,000 reports of severe joint pain, extrapolates to potentially 100 million people across the vaccinated population. [2] There were so many negative health outcomes reported. You can access the dashboard created with CDC's raw v-safe data obtained by ICAN – HERE, WATCH

October 10

Pfizer admits their vaccine was not tested for stopping viral transmission

On Monday October 10, 2022 in a COVID hearing in the European Union Parliament, Dutch MEP Rob Roos asked Janine Small, Pfizer's President of International Developed Markets [2, 3, 4, 5]

*"Was the Pfizer Covid vaccine tested on **stopping the transmission** of the virus before it entered the market?..."* [1]

The Pfizer representative's answer was

*"**NO**...we had to really move at the speed of science...[and] we had to do everything at risk"*!

The COVID-19 vaccines were/are mandated to hundreds of millions of people (especially health workers) around the world on the premise that they prevent viral transmission (what a vaccine is supposed to do), and the public were told by public health officials and the media, that no development short-cuts were taken, the vaccines are safe and effective and to roll up their sleeve, get the vaccine "for the greater good" of stopping this virus. It was all a lie! [6]

Pfizer admit in an email to OAN that their trial 'efficacy' endpoints were ONLY to assess:

1. the prevention of confirmed symptomatic COVID-19 infection and
2. the prevention of severe disease

"The BNT162b2 trials were not designed to evaluate the vaccine's effectiveness against transmission of SARS-CoV-2"

Australia's vaccination advisory board ATAGI have promoted the COVID-19 provisionally approved vaccines as "a key public health intervention to prevent infection, transmission and severe disease due to SARS-CoV-2," yet both the FDA and now Pfizer have stated that tests were not done to assess transmission.

October 12

FDA grants EUA for mRNA bivalent vaccines in children with no testing.

On October 12, 2022 the FDA announced they awarded emergency use authorizations (EUAs) for both Moderna and Pfizer-BioNTech bivalent mRNA (original strain plus omicron variant BA.4 and BA.5) COVID-19 Vaccines for use as a booster dose in children 5-11 years old – when the bivalent vaccine was NOT tested on children – only 8 mice!

The FDA/CDC always promote that their "approved" vaccines "goes through extensive safety testing"! – not when it comes to kid or EUA!

October 13

US extends Public Health Emergency for 12th time – even though the "pandemic is over"

On October 13, 2022 Xavier Becerra, Secretary of Health and Human Services extended, for the 12th time, the declaration of a Public Health Emergency (PHE) for COVID-19, even though on September 18, 2022 President Biden stated that the pandemic is over. [1]

The PHE was first declared effective January 27, 2020. [2]

October 14

Boston lab creates a Wuhan-Omicron chimeric virus, killing 80% of humanised lab mice

On October 14, 2022 the Boston University School of Medicine published a pre-print paper (not yet peer reviewed) that shows the authors had created a chimeric lab virus taking the Wuhan SARS-CoV-2 virus "body" and inserting the more "infectious" Omicron BA.1 spike proteins onto it, this resulted in 8 out of 10 (80%) humanised lab

mice dying. The chimeric virus resulted in more severe disease – a virus that gained in its function! [1, 2, 4]

The director of NIAID was allegedly not aware this pathogenic potential research was being conducted in the US, Boston Uni claimed they didn't have to clear the research with the NIAID! On Dec. 19, 2017 the NIH clears a pathway to release the 2014 moratorium on such gain-of-function research. [3]

SARS-CoV-2 was likely already a lab created chimeric virus – HERE

October 19

ACIP votes unanimously to make COVID-19 vaccines manufactures permanently liability free

On October 19, 2022 the CDC's Advisory Committee on Immunization Practices (ACIP) met to discuss and "quietly" vote on adding the COVID-19 vaccines for children to the Childhood Immunization Schedule, without assuring safety. [1, 2, 3, 4, 9]

The moment the CDC adds the vaccine to the Childhood vaccine schedule, vaccine manufacturers become liability immune for their products, and trust in public health will be ruined. [10, 11, 12, 13, 14, 15, 16]

The ACIP meeting panel [7, 8] unanimously voted 15 to zero, to add the COVID-19 vaccine to the childhood vaccine schedule. [5]

Tens of thousands of public comments poured into the CDC, "the great majority seemingly in direct opposition to the vote to add the COVID-19 vaccines to the childhood schedule." "ACIP's decision would be based on hidden data and in defiance of the minute Covid risk factors for healthy children, particularly those who have natural immunity due to a prior infection.", but the risk of death or injury is very real. [6]

The Highwire Ep 290 – EXCERPT, FULL

On February 10, 2023 the COVID-19 vaccine was added to the childhood schedule for children 6 months and older to allegedly "provide immunity", for an extinct Wuhan virus.

October 19

COVID-19 vaccines added to Vaccines for Children program

On October 19, 2022 following ACIP meeting the CDC added the COVID-19 vaccines to the CDC's Childhood Immunization Schedule as well as included in the HHS Vaccines For Children (VFC) program. [1, 2, 3]

The addition of a vaccine to the VFC program allows the CDC to purchase bulk vaccines at discounted prices.

October 20

CDC moves from daily to weekly COVID-19 case and death reporting

Shortly after Biden declared the “pandemic is over”, and after more than two years of publishing data on COVID-19 cases and deaths on a daily basis, the Centers for Disease Control and Prevention (CDC) announced via a web update on October 5, 2022 that it would shift to weekly updates, similar to the flu. Starting on October 20, 2022, the US states and local health departments will now only need to report new COVID-19 cases and deaths to the CDC every week on Wednesdays. [1, 2, 3, 4]

Dr Fauci said “There is a considerable drop around the country in COVID cases, hospitalizations, and deaths” [The video with Dr Fauci violated YouTube guidelines! – ARCHIVE]

Currently the CDC collect and publish COVID-19 hospitalization data daily, but that will transition to The National Healthcare Safety Network (NHSN) by mid December 2022.

A week later on October 13, 2022 the US HHS extended the Public Health Emergency declaration!

October 23

“Catastrophic Contagion” pandemic simulation

On October 23, 2022 the Johns Hopkins Center for Health Security in partnership with the World Health Organization and the Bill and Melinda Gates Foundation conducted a pandemic simulation in Brussels, Belgium called “Catastrophic Contagion”.

This exercise simulated the fictional enterovirus called Severe Epidemic Enterovirus Respiratory Syndrome (SEERS) that begins in Brazil in 2025 and spreads the globe. The simulation resulted in more than 20 million deaths, of which 15 million were children, and “would have been prevented if countries adopted pandemic operational drills and adhered to the WHO’s pandemic guidance”. [1, 2]

October 27

Elon Musk buys Twitter, fires top executives, begins returning free speech

On October 27, 2022 **Elon Musk**, one of the world’s wealthiest person, finally buys-out the social media platform **Twitter**, a takeover that began April 25, 2022. “Let that sink in” he tweeted the day before. [1, 2, 3, 4, 5]

Twitter is now privately owned and was delisted from the New York Stock Exchange beginning Friday Oct. 28, 2022. [6] Twitter has been a public company since November 2013, seven years after it’s July 15, 2006 inception. [12, 13]

Musk, now as "Chief Twit", immediately fired three top executives CEO Parag Agrawal, CFO Ned Segal and Legal affairs and policy chief Vijaya Segal. [7, 8] Musk sent in his Tesla digital engineers to halt any potential "proprietary code" changes ahead of the purchase.

Musk's objective is to use the platform as a "common digital town square" and use it as a place for him to build the X app, the "everything app". His goal for Twitter is "to be the most respected advertising platform in the world".

The Left are not happy – they're likely concerned that censorship and free speech can no longer be controlled, especially ahead of mid-term elections. Musk is intending to return suspended accounts to the platform, helping equitable dialogue, without censorship bias such as algorithm interference [14, 15], restriction of followers, Twitter jail and account suspension, or bot comments! [9, 10, 11] Musk tweeted he will form a "content moderation council".

October 31

The Atlantic: "Let's Declare a Pandemic Amnesty"

On October 31, 2022 The Atlantic published an article by Emily Oster titled "Let's Declare a Pandemic Amnesty", asking the reader to forgive those who didn't know better! [1, 2, 3]

Though the article had "[n]o mention of the vaccine mandates, serious adverse events, lost jobs and bankrupt businesses, elderly dying alone, and the lives ruined and lost as a result of lockdowns, to mention only a handful of the crimes committed over the past few years. No mention of the social hysteria that turned many into fearful, aggressive hypochondriacs and control freaks" [2, 3]

November 1

November 2022

November 9

WHO: COVID-19 deaths 90% less weekly death than Feb. 2022 peak

On November 9, 2022 the WHO reported that COVID-19 deaths are 90% less than they were 9 months prior in February 2022, where weekly deaths topped 75,000. [1, 2]

Tedros stated "Almost 10,000 deaths a week is 10,000 too many, for a disease that can be prevented and treated." It is unclear what would officially "prevent" SARS-CoV-2 infections, and what effective "treatments" he is referring to.

November 23

US: More vaccinated people dying of COVID-19 than unvaccinated

On November 23, 2022 the Washington Post reports that COVID-19 in the US is no longer a pandemic of the unvaccinated as **58%** (the majority) of COVID-19 deaths in August 2022 in the US “were people who were vaccinated or boosted”, a trend that has been rising since late 2021. [1, 4]

COVID-19 death in the vaccinated group were at **23%** in September 2021 and grew to **42%** by January 2022. [2]

As of October 20, 2022 “80% of the U.S. population was vaccinated, while 68% were fully vaccinated, and 34% had gotten their boosters”. [3, 4] They are still pushing that being unvaccinated is a risk factor!

The entire point and promotion of the COVID-19 vaccines was to stop serious illness and death – the stopping of transmission was admitted by Pfizer to have never been assessed. Thus the product is more a “treatment” (i.e. 3 monthly boosters) and not a “preventable” such as one would expect of a “vaccine”.

November 24

Protests erupt in China against “zero covid” lockdown policy

On November 24, 2022 protests erupted across China [12, 13] following the horrific deaths of 10 people who, due to the CCP’s “zero covid” lockdown policy, were locked in their apartment building in Urumqi, Beijing, which was on fire [8, 11] and could not escape. In some regions people have been locked in their apartments for more than 100 days! [1, 2, 3, 4, 5, 6]

On this same day Beijing went back into lockdown as record high SARS-CoV-2 infections have been reported. That’s 400 million people in lockdown! [7] Demonstrations spread in Beijing, Shanghai and other major cities. The CCP use mobile phone data to track protesters, and are clamping down on internet VPNs to censor videos of the protests. Apple updated their app in China only, which restricted the use of AirDrop which protesters had used to evade censorship and thus harmed the organizational efforts of demonstrators protesting against the CCP’s lockdowns. The CCP health authorities have now “modulated their language about the dangers posed by the virus” and began relaxing rules. [14]

Is the CCP wanting students infected to create natural immunity, as they know “zero covid” has failed and economy is suffering? Leaked audio – [9, 10]

Following the protests the CCP relaxed their Zero COVID policy and reports came of a surge in case “infecting 37 million people per day”! [15] and 10 CCP officials allegedly died.

By early December 2022 China unofficially lifted [19] its harsh restrictions and the virus spread rapidly through the heavily vaccinated population. By January 2023 China had 80% of population infected, and they stopped counting COVID-19 cases,

and by March 2023 they stopped reporting COVID-19 deaths! [16, 17, 18]. [Could deaths be the result of enhanced disease due to prior vaccination?]

November 28

New "info intervention" introduced – Pre-Bunking!

On November 28, 2022 Google showcased their new "info interventions", a set of approaches, informed by "behavioral science" to "build resilience to online harms." ...One approach is "pre-bunking misinformation"[1] to "immunize" users. [2, 3] As stated, Prebunking is to "Increase Resistance to Manipulation" i.e. preemptive debunking!

On February 13, 2023 it was reported that Google will be expanding their "Prebunking" scheme into Europe to inoculate people against 'Conspiracy Theories

December 1

December 2022

December 3

The Twitter Files release begins

Elon Musk began releasing internal Twitter documents to select journalists who, as a condition, had to report their findings on Twitter first, before other media. Matt Taibbi released his **first** Twitter Thread on December 3, 2022, since then other journalists have released Threads disclose activities of collusion with government agencies to censor content and delete high profile accounts, including the President of the United States, Donald Trump. [1]

- Dec 3 Matt Taibbi – Hunter's Laptop Story/Election 2020 – PART 1
- Dec 9 Barri Weiss – Twitter's Secret Blacklist – PART 2
- Dec 10 – Matt Taibi – The Removal of Donald Trump – PART 3
- Dec 11 – Michael Sellenberger – The Removal of Donald Trump: January 7 – PART 4
- Dec 13 – Bari Weiss – The Removal of Trump From Twitter – PART 5

On December 11, 2022 Elon Musk stated that he had bought a "crime scene"! The mainstream media have been effectively silent about the revelations. The Twitter Files >>> [HERE](#)

December 7

Study: Mode of Action how ivermectin save lives from spike protein blood clotting effect

On December 7, 2022 a study published in the International Journal of Molecular Sciences by Boschi et al lays out a "highly plausible description of ivermectin's

mechanism of action” for reversing the blood clotting effect of the SARS-CoV-2 spike protein. [1]

Ivermectin **blocked** Hemagglutination (clumping/clotting) when added to red blood cells prior to the addition of SARS-CoV-2 spike protein but also **reversed** Hemagglutination when added afterward. “By reversing the clumping of red blood cells, ivermectin enabled the dying patient’s proper respiratory function to return, thereby generating his or her astonishing recovery.”

US hospital administrators and their attorneys “systematically denied ivermectin” to countless hospitalized patients dying from SARS-CoV-2 starting in 2020. The same is true for Australia, starting with the TGA.

December 13

WHO: Jeremy Farrar to become Chief Scientist for Global Health

On December 13, 2022 it was announced that Dr Jeremy Farrar, current Director of the Wellcome Trust was appointed as the World Health Organization’s new chief scientist for global health. Interesting timing as a Pandemic Treaty is looming, which if it goes ahead Farrar will have immense global reaching power over “health”. [1, 2] Freedom of Information requests has revealed what Dr Farrar says publicly is too often the opposite what he says in private. [3]

On May 15, 2019 the World Health Organization (WHO) announced the formation of a partnership with Farrar’s Wellcome Trust!

December 19

US Intelligence report: virus likely a “lab-related incident” in Wuhan

In December 14, 2022 Republicans on the House Permanent Select Committee on Intelligence (HPSCI) led by Congressman Brad Wenstrup (OH-02) released their report on the origins of COVID-19 titled *UNCLASSIFIED SUMMARY of the SECOND INTERIM REPORT ON THE ORIGINS OF THE COVID-19 PANDEMIC*. They conclude “there are **indications** that SARS-CoV-2 may have been **tied to China’s biological weapons research program** and **spilled over** to the human population during a **lab-related incident** at the Wuhan Institute of Virology (WIV).”.[1, 2]

The press release states “The findings identify more culpability from the Chinese Communist Party, highlight the failures of the Intelligence Community to share pertinent information with the American public and their authorized representatives, and give more credibility to the lab leak theory – which many government officials, Big Tech platforms, and media outlets were quick to label a ‘conspiracy theory.’”

December 28

A negative COVID-19 test is now required prior to entering US if you come from China

On December 28, 2022 the US Centers for Disease Control and Prevention (CDC) announced that a negative COVID-19 test (PCR or antigen) will be required for air passengers (>2 years old) entering the United States from China effective January 5, 2023. The reason “to slow the spread of COVID-19” following a surge [3] in COVID-19 cases in the People’s Republic of China which has occurred following the reversal of China’s strict “**zero-COVID**” [9, 10] policies earlier this December resulting from mass protests. [1, 2, 5, 6, 7, 8]

Over 130 omicron virus versions have been detected in China resulting in outbreaks, but China is not being transparent with their genetic sequencing! It is reported by Sydney Morning Herald that China’s vaccine version, given a year ago has likely waned and is allegedly less effective than “Western-made messenger RNA versions”! It is reported that “248 million people — nearly 18% of China’s population — came down with the virus in the first 20 days of December”, a rate of 37 million per day, but the CCP is not being transparent. It’s hard to know if overwhelmed hospitals are due to the virus or a result of the “zero covid” strict lockdown policies the Chinese people had to endure.

Allegedly half of passengers on a flight from China to Lombardy, Italy tested positive for COVID-19 [4]. It’s like 2020 Déjà vu!

By December 26, 2020 it is reported China’s ICU’s are full.

January 2023

January 3

CDC finally release their VAERS analysis – alarming vaccine safety signals revealed

On January 3, 2023 the CDC finally released their Vaccine Adverse Events Reporting System (VAERS) “early warning systems” safety monitoring analyses for Pfizer and Moderna’s mRNA COVID-19 vaccines. The Epoch Times had to seek the data via Freedom of Information (FOIA).

The CDC conducted **Proportional Reporting Ratio (PRR)** analysis on adverse events reported to VAERS from Dec. 14, 2020 through to July 29, 2022 revealing alarmingly, hundreds of adverse events (AEs) which meet the safety signal definition, such as Bell’s palsy, blood clotting and death! [1]

Files for your own analysis can be sourced [HERE](#)

January 16

Oxfam reveals the richest 1% grabbed 2/3 of new global wealth

On January 16, 2023 Oxfam International released their new *Survival of the Richest* report which revealed that the richest 1% gained about 63% of new wealth created between 2020-2021, worth about \$42 trillion, almost twice as much money as the bottom 99% of the world's population. [1, 2].

The report referred to a "**global polycrisis**" developing throughout the world. Ironically "polycrisis" was the very term that the rich "elites" of the World Economic Forum in Davos introduced into the "corporate risk lexicon" this same week, warning the world! [3, 4, 5]

January 16

WEF Davos 2023 begins

The annual World Economic Forum conference kicks off in Davos, Switzerland from 16th to 20th January 2023, this year's title: *Cooperation in a Fragmented World*. The 'economic' conference of un-elected members who purport to be helping the world, but actually use their platform for the "controlled reveal of their plans", covered the topics of "polycrisis" in many areas"

- Economy
- Ukraine war with Russia
- Trade
- Climate
- Technology – ChatGPT
- China
- Inflation
- Financial Services
- Vaccines and Digital ID's

What they did NOT talk about was "The Great Reset" and "Build Back Better" – which have received great public backlash since their reveal in 2020.

January 18

South African advocates call to "stop the jab", pending investigation

On January 18, 2022 South African mainstream news reports that advocacy group Transformative Health Justice [1, 2] call for the COVID-19 vaccines to be suspended, **pending investigation**, over concerns of adverse side effects and deaths related to the COVID-19 vaccines. They're asking that the "precautionary principle" be adhered to.

Sabelo Sibanda says that there has been a high rise in patients reporting to doctors unexplained symptoms where the common denominator has been the people have received the COVID-19 vaccine.

January 20

Japan to downgrade COVID-19 to seasonal flu status

On January 20, 2023 Japan's Prime Minister Fumio Kishida announced plans by spring to downgrade the legal status of COVID-19 from a Class 2 disease to a Class 5, the equivalent of seasonal influenza. [1]

This means the relaxing of mask wearing, remove self-isolation rules and other anti-virus requirements and allow COVID-19 patients to seek treatment at any hospital instead of only specialized facilities.

January 20

TGA considers Moderna's Spikevax "vaccine PLATFORM" for Full Registration

On January 20, 2023 Australia's Therapeutic Goods Administration (TGA) announced that they have , received the **first application to transition** a provisionally-approved (PA) COVID-19 vaccine **to full registration**. [1, 2]

Moderna have applied to transition their COVID-19 vaccine (SPIKEVAX) from Provisional to Full registration – for individuals 6 years and over, and as a booster dose for individuals aged 12 years and older!

Moderna's "Genetic vaccine platform" called "Spikevax (**elasomeran**, Moderna COVID-19 Vaccine, mRNA-1273)" received Provisional Approval by TGA on August 9, 2021, just 17 months previous, for a brand new technology product.

On August 29, 2022 the TGA announced it had granted PA for Moderna's bivalent COVID-19 vaccine (**elasomeran/imelasomeran**, the original virus and the BA.1 Omicron variant) for use as a booster dose [not primary dose] in adults 18 years+.

On January 10, 2023 Australia's Department of Health stated that "Moderna (original) vaccine is no longer being manufactured". The "original" formulation is for the code mRNA-1273 or **elasomeran**, for which PA was granted! [3]

On December 13, 2021, the Victorian government announced an agreement in-principle to build a Moderna mRNA manufacturing plant in Australia to make a "range of mRNA vaccines", barely 4 months after the TGA first granted emergency (PA) use for this new technology product! [4]

TGA is considering Spikevax – Moderna's "**vaccine platform**" for full registration, not the product which was granted PA in 2021. So, irrespective of the specific protein for which the genetic, modified mRNA code tricks the body into making, the TGA appears to be considering all proteins to be "safe" by default!

January 22

China's first mRNA vaccine trials begin – Omicron-specific

On January 22, 2023 it was reported that China National Biotec Group (CNBG), a subsidiary of China National Pharmaceutical Group Co Ltd (Sinopharm) had received regulatory approval by their State Drug Administration to begin clinical trials of **China's first mRNA** COVID-19 vaccine targeting specifically the **Omicron variants**. [1]

Jia Weiguo, chief scientist at CNBG's Virogin Biotech Company, based in Shanghai, says the new advanced mRNA-LNP encapsulation technology "has proved effective in **preventing infection** in animal trials"!

Virogin, "has built a research and development platform, as well as production lines with an annual capacity of 2 billion doses of mRNA vaccine. They can quickly produce mRNA vaccines to deal with pandemics". "China's annual COVID-19 vaccine production capacity has reached 7 billion doses."

Gao Fu, former head of China's CDC [and sat on Event 201 panel, etc.] "suggested that approval procedures for COVID-19 vaccines should be similar to those for influenza vaccines".

The only foreign mRNA vaccines allowed in China are BioNTech doses shipped by Germany late last year and being given to expatriate Germans living there, but Moderna are in talks with China.

Currently global emergency approved vaccines are for Wuhan strain (original) or a bivalent (Wuhan plus and Omicron variant) version, no Omicron only vaccine.

January 25

Booster jab offer to end in the UK, transitioning to targeted approach

On January 25, 2023 the UK government's Joint Committee for Vaccination and Immunization (JCVI) advised to phase out the COVID-19 booster jab offer to everyone, and transition toward the vulnerable population as a more targeted strategy. [1, 2, 3] There has been dwindling uptake of the booster vaccines!

The JCVI recommended people aged 16 to 49 who are not at clinical risk from COVID-19 should no longer need a vaccine. Healthy under-50s, will no longer be offered a booster vaccine after February 12, 2023 following "dwindling uptake of boosters jabs among the young and healthy". [4, 5, 6]

A "focused" approach to those at risk of the disease is what The Great Barrington Declaration proposed in October 2020!

The UK data shows ridiculously high number of people needed to be vaccinated in order to prevent one hospitalization from COVID-19.

January 26

VRBPAC meeting: 3 Big Pharma's discuss their Vaccine Platforms

On January 26, 2023 the FDA's advisory committee, VRBPAC, held their 178th meeting to Discuss **Future Vaccination Regimens** Addressing COVID-19. Discussions included next generation vaccines such as mucosal, plus Moderna, Pfizer/BioNTech and Novavax got to speak about their **Vaccine Platforms**, updating the genetic code.

With the FDA accepting these vaccine platforms all they need to do in the future is "assess" the "variant" for whatever virus they choose to target with the vaccine! The emergency use of COVID-19 vaccines during the pandemic has allowed, in record time, Big Pharma companies to establish their new technology vaccine platforms into the market, Platforms that can encode for whatever virus variant they choose! What are the chances of 3 independent companies introducing brand new technology products, all successfully gaining regulatory approval at the same time, in a record timeframe? Now every emerging and existing disease can have a vaccine solution – just as Gates [1, 2], Fauci [2], Daszak et al wanted. [4, 5]

January 30

Cochrane review: masks make "little or no difference"

On January 30, 2023 the Cochrane collaboration "published an incredibly thorough and comprehensive review of the masking literature." Their systematic review paper looked at *physical interventions to interrupt or reduce the spread of respiratory viruses*. They concluded that "wearing masks in the community probably makes **little or no difference** to the outcome of influenza-like illness (ILI)/COVID-19 like illness compared to not wearing masks...[or] ...the outcome of laboratory-confirmed influenza/SARS-CoV-2 compared to not wearing masks". [1, 2, 3, 4]

This is an update of a November 2020 review and lead author Professor Tom Jefferson said "*the evidence really didn't change from 2020 to 2023. There's still no evidence that masks are effective during a pandemic.*" [5]

The WHO already knew this as they published a systematic review in September 2019 effectively concluding mask are ineffective for stopping the spread of influenza or preventing, a respiratory virus.

January 31

FDA petition to amend mRNA label: including inaccurate notion of "efficacy against infection and transmission"

On January 31, 2023 the **Coalition Advocating for Adequately Labeled Medicines** (CAALM) petitioned the FDA to "amend current product labeling" for Pfizer-BioNTech's and Moderna's COVID-19 mRNA vaccines. The petition was heavily cited.

Stating *"incomplete, inaccurate, or misleading labeling of any medical product can negatively impact the health and safety of Americans, with **global ramifications** considering the **international importance of FDA decisions.**"*

They noted *"[t]here is a widespread (but inaccurate) notion that efficacy against **infection and transmission** have been established by substantial evidence, and that these vaccines contribute to **herd immunity.**"* Statements that have been inaccurately repeated by "authorities".

On April 18, 2023 the FDA responded in a letter [1] with the alarming statement: *"FDA authorization and licensure **standards for vaccines do not** require demonstration of the **prevention of infection or transmission**...Similarly, a vaccine can meet the EUA standard **without any evidence** that the vaccine prevents infection or transmission."* [pg 11]

[So what is the purpose of a vaccine?

If a vaccine doesn't prevent infection or stop transmission how does it contribute to herd immunity?

Define "protection"! Isn't reducing symptoms (it this is protection) put the product in the category of a drug? Then the product would undergo a more stringent regulatory pathway, and the manufactures be open to liability claims.]

February 1

February 2023

February 6

The Norfolk Blueprint – questions for the COVID-19 commission

On February 6, 2023 eight leading scientist known as The Norfolk Group released **The Norfolk Blueprint** comprising 80 pages of scientific questions that "need to be answered" by the US COVID-19 commission to address the failure of the public health establishment during the pandemic. [1, 2, 3]

February 8

ATAGI no longer recommend boosters for children under 18 yrs

On February 8, 2023 Australia's vaccine advisory committee, ATAGI, no longer recommends a COVID-19 booster dose "for children and adolescents aged **under the age of 18** who do not have any risk factors for severe COVID-19."

In August 3, 2022 ATAGI began recommending COVID-19 vaccines for children as young as 6 months of age, it was already recommended for >5 years. But for other age groups "COVID-19 vaccine can be co-administered with influenza and other vaccines."

February 10

CDC adds COVID-19 vaccine to childhood vaccine schedule – to help "normalise" it!

On February 10, 2023 the CDC adds COVID-19 vaccines to the US **childhood immunization schedule**, not for health or community transmission reasons (which it doesn't target) but to help "normalize" the COVID-19 vaccine and sends a "powerful message" everyone **over six months of age** to "stay up to date" with recommended COVID-19 vaccines. [1, 2, 3, 4]

It comes as the FDA are considering switching the COVID-19 vaccine to a yearly schedule similar to the flu shot program, and as ACIP were considering the bivalent shot as a primary series.

Since 1986, any vaccine on the childhood schedule means the vaccine manufacturer is exempt of liability!

On October 19, 2022 the ACIP committee began discussing adding COVID-19 vaccines to the childhood schedule, for "the prevention of COVID-19" [5] Stating it "is an important step toward **inclusion** of COVID 19 vaccines in routine vaccination program "and that "equitable access to COVID 19 vaccines for all ages and populations remains **critically important.**"

This schedule vaccine-type addition allows the CDC to "begin the steps necessary to **award contracts** for COVID-19 vaccines", which the United States Governments (USG) response had been funding nationally while under "emergency" status.

February 15

Florida mRNA "Health Alert" – life-threatening conditions increased >4,400%

On February 15, 2023 the Florida Dept. of Health released a "Health Alert" to notify the "health care sector and public" of "a **substantial increase** in Vaccine Adverse Event Reporting System (VAERS) reports from Florida after the COVID-19 vaccine rollout" of which reports of "**life-threatening conditions increased over 4,400%**". [1]

This unprecedented, "novel increase" prompted the Surgeon General to write a letter to the FDA and CDC informing them of the need for "unbiased research", and requested the "agencies promote transparency in health care professionals to **accurately communicate the risks these vaccines pose.**"

The report noted Florida's findings are "consistent" with emerging scientific publications that are uncovering such life-threatening and debilitating adverse event risks. He included a recent study which showed "excess risk of serious adverse events" associated with mRNA COVID-19 vaccines included "coagulation disorders, acute cardiac injuries, Bell's palsy, and encephalitis. This risk was **1 in 550** individuals, which is much higher than other vaccines." In Oct 2022 Florida recommended young males to refrain from taking the mRNA vaccine due to an 84% increase in cardiac-related deaths in males aged 18-39.

February 20

Nearly 70% of the worlds population has had at least one COVID-19 shot. Low income countries have low vax rate and low COVID-19 deaths.

By February 20, 2023 as reported on Our World in Data website 69.5% of the worlds population had received at least one dose of a COVID-19 vaccine. Worldometer has the current global population of 8.017 billion.

In total 13.29 billion doses have been administered globally since December 2, 2020, accounting for all first dose, second dose and booster doses.

According to the World Bank and using Worldometer stats on February 21, 2023, "Low Income Countries" account for 7.9% of the global population (~636 million out of ~8.017 billion). Low Income (LI) countries have 26.9% of the people receiving at least one dose of the vaccine (~170 million people), and in those countries, cumulatively 43,527 people (~0.0068% LI population) have died from COVID-19, compared to world in total ~5.572 billion people have been jabbed, and 6.791 million people (~0.0847% current world population) have died from COVID-19. Low-income countries, with lower vaccination rates have lower comparative COVID-19 death rate compared to the rest of the world.

February 28

10 myths told by designated experts — now debunked

On February 28, 2023, Public health researcher Dr Marty Makary from Johns Hopkins University published online the article titled "*10 myths told by Covid experts — now debunked*". For nearly 3 years, credentialed science and medical experts have been trying to make the public, and officials, aware of the actual data-driven science supporting a **counter**-COVID-19 narrative, claims which the fact checkers said was "misinformation" as it went against the government-sanctioned narrative.

The following narratives are **now debunked**:

1. Natural immunity offers little protection compared to vaccinated immunity.
2. Masks prevent Covid transmission.
3. School closures reduce Covid transmission.
4. Myocarditis from the vaccine is less common than from the infection.

5. Young people benefit from a vaccine booster.
6. Vaccine mandates increased vaccination rates.
7. Covid originating from the Wuhan Lab is a conspiracy theory.
8. It was important to get the 2nd vaccine dose 3 or 4 weeks after the 1st dose.
9. Data on the bivalent vaccine is "crystal clear."
10. One in five people get long Covid.

March 1

March 2023

March 1

The Lockdown Files begin

On March 1, 2023 the first installment of The Lockdown Files was released by UK's Telegraph . Telegraph has obtained "more than 100,000 WhatsApp messages sent between ministers, officials and others – show how the Government used scare tactics to force compliance and push through lockdowns."

Isabel Oakeshott was contracted to write Matt Hancock's memoirs [@43:30], but instead she broke that contract and supplied Hancock's WhatsApp messages to The Telegraph because the public "deserve to know" officials were not actually "following the science" but **a political power agenda**. [1, 2]

The behind the scene text exchanges "shed new light" on the topics of lockdowns, testing, school closures, face masks, care home deaths all in relation to the COVID-19 "pandemic".

March 10

Silicon Valley Bank: largest bank collapse since 2008 financial crisis

On March 10, 2023 California Regulator, the Department of Financial Protection and Innovation, shut down **Silicon Valley Bank (SVB)** "due to the bank losing over 60% of its value after the company disclosed major losses from security sales" due to rising interest rates, and the Federal Deposit Insurance Corporation (FDIC) was appointed the receiver. This is the largest bank failure since the 2008 financial crisis. [4, 6]

SVB, the 17th largest US bank, holds \$173 billion of deposits, FDIC insures up to \$250,000 per depositor, but 90% of depositors had more than this figure held in the bank. The CEO allegedly sold \$3.5 million in stocks in the preceding 2 weeks.

Silicon valley start-up companies use SVB – it is said that if the government doesn't "bail out" the bank, an "extinction level event" for start-up's as 10 years of innovation could be lost. Big Tech invests elsewhere. [1, 2, 3, 5]

The Treasury Department stepped in on Sunday March 12, 2023 “to guarantee that all customers of the failed Silicon Valley Bank would have access to their full deposits on Monday”, Biden “assured” no public bail out, that it would come “from the fee’s that the banks deposit into the insurance fund” and also stated the SVB bank management would be fired. Venture Capitalists sponsor 99+% of depositors, who could foot their bill...and not the tax payer [13]

- Trading halted on 30 banks when the markets opened. [7, 12]
- Federal reserve to review itself for “regulatory failure”. [8]
- Biden blames Trump for banks failure!
- Late Sunday March 12, 2023 regulators also shut down **Signature Bank** following \$10 billion in deposits withdrawn. [9, 10, 11] A shady bank!
- SVB had only one qualified board member, the rest were Dem “mega-donors”, and for 9 months prior to collapse, now head of “risk management”. [13]
- SVB had a debt-to-equity ratio of 185:1, and in Q4 2020 was ‘technically insolvent’.
- It was bailed out [14]

“This is the beginning of a deflationary cycle. SVB just happens to be the headline. Fed response will cause relief near term but over time this will just continue to get worse...we are in a recession that will continue to get worse.” stated Ed Dowd

March 12

German health minister admits vaccine injury is 1 per 10,000 doses

On March 12, 2023, German Health Minister, Prof. Dr. Karl Lauterbach went on a German news and admitted that COVID-19 vaccine injury is occurring at a **rate of 1 per 10,000 doses**, with no way of helping the injured. With 2 doses per vaccine that equates to 1 in every 5000 people. [1, 2]

“We need to get faster at recognizing the vaccine injuries, and we’re slowly gaining a clear understanding of the situation. ...according to the latest research data, severe vaccine injuries are very rare. The incidence is less than one per 10,000 vaccinations. So it’s not like injury is common.”!

It is reported that “more than 300,000 cases of vaccine side effects have accumulated in the Ministry’s own system, and more and more people are lodging compensation claims against the stat”

Pfizer’s public documents define “rare” side effects as 1 in 10,000 to as few as 1 in 1,000 doses.

March 23

China’s first mRNA COVID-19 vaccine approved for emergency use

On March 22, 2023 China has approved, for emergency use, its **first** COVID-19 vaccine based on **mRNA technology**, 3 months after the country lifted strict 'zero covid' containment measures in Dec 2022, following massive lockdown protests. The mRNA vaccine (SYS6006) was developed by CSPC Pharmaceutical Group, a Chinese firm based in the northern Chinese city of Shijiazhuang. [1]

The SYS6006 vaccine covers the Omicron subvariant "BA.5's core mutation at the spike mutation positions", the trials was done as a **booster** shot in previously vaccinated trial participants. [2]

Jin Dong-yan, a Hong Kong virologist, said "there is strong scientific evidence that mRNA vaccines do much better than non-MRA vaccines,". "Until now, China has approved only inactivated vaccines made by Sinovac Biotech and Sinopharm Group, two Beijing-based drugmakers."

A Chinese CDC official said in April 2021 that Chinese mRNA-based vaccines had "entered the clinical trial stage". [3]

March 28

WHO: vaccine guidance for the "Omicron era" – BA.5 bivalent now considered "primary series"

On March 28, 2023 following the WHO's Strategic Advisory Group of Experts on Immunization (SAGE) meeting, they updated the COVID-19 vaccination guidance with a roadmap for prioritizing the vaccines in the "the Omicron era". [1]

With an "overall decline in disease severity", and with a "high level of [herd] immunity" globally, in all age groups, as a result of either infection [natural immunity], vaccine-induced immunity, or hybrid immunity, the guidance is now based on a "simplified" priority classification of low, medium and high risk grouping. [1]

Healthy children and adolescents are now "low priority" for COVID-19 vaccination, even though "primary and booster doses are safe and effective in children and adolescents" – but a high priority for children is their routine vaccinations.

Vaccinating pregnant "persons" to "protects both them and the fetus", is a priority as "the burden of severe COVID-19 in infants under 6 months is still higher than in children aged 6 months to 5 years" [!!!]

SAGE make no mention of COVID-19 vaccine risks or mounting injuries, particularly in the working age groups and children or pregnancy.

"SAGE also updated their recommendations on bivalent COVID-19 vaccines, now recommending that countries can consider using BA.5 bivalent mRNA vaccine for the **primary series**", not just a booster!

March 30

Former President Trump is indicted

On Thursday March 30, 2023 Donald J. Trump became the first former president to ever be criminally indicted for undisclosed charges.

The unprecedented [7, 8, 10] indictment came as a result of ,Soros backed, Manhattan District Attorney Alvin Bragg's investigation into so-called 'hush payments' to porn star Stormy Daniels and Playboy centerfold Karen McDougal, allegedly on behalf of Trump ahead of the 2016 election. [1, 2, 3, 4, 5, 12] Federal regulators said the payment violated no law, so "looks like it's politically motivated"! [9]

You have to squint and hang upside down for hours to make this case look like "the law

Twitter Files journalist Matt Taibbi, a Democrat, summed up this "indictment" in a tweet

Trump responded in a statement [11, 20]:

*This is **Political Persecution** and **Election Interference** at the highest level in history...*

From the time I came down the golden escalator at Trump Tower, and even before I was sworn in as your President of the United States, the Radical Left Democrats – the enemy of the hard-working men and women of this Country – have been engaged in a Witch-Hunt to destroy the Make America Great Again movement. You remember it just like I do: Russia, Russia, Russia; the Mueller Hoax; Ukraine, Ukraine, Ukraine; Impeachment Hoax 1; Impeachment Hoax 2; the illegal and unconstitutional Mar-a-Lago raid; and now this.

Trump is leading the polls in his run for re-election in 2024! Tucker Carlson on "equal justice". Trump's lawyer, Joseph Tacopina responds.

I think any first-year law student could get this dismissed in front of any objective judge...

says Professor Alan Dershowitz

Trump's "witch hunt" makes headlines to distract from what is truly going on – Biden crimes, Banking crisis & the dollar collapse, Excess Deaths and unprecedented disabilities, J6 revelations, etc. [6]

Is this action to inflame The People, because they want them to go kinetic ?

Leading up to Easter, on Tuesday **April 4, 2023**, Former President Donald Trump appeared in Manhattan Supreme Court in front of Judge Juan Merchan. The 16-page indictment was unsealed, "34 felony counts of falsifying business records in connection with a scheme that directed hush money payments to two women before the 2016 presidential election". [13]. The "34 counts center on just **three separate payouts**; Bragg ran the number up by counting every document Trump signed", and they "don't even actually specify the felony crimes."

"The gist of the case against President Trump lies in some accounting entries that were supposedly made years ago in the Trump Organization" [14, 15] All counts "depend on linking them to campaign-law violation...Otherwise, the fraud is just a misdemeanor crime that's long past the statute of limitations." [19]

Not guilty

Former President Trump said [13, 17, 18]

Fox News reporter Peter Doocy asked Karine Jean-Pierre if Biden is concerned he will also be indicted [for his alleged crimes] after a local DA set a precedent by indicting a former president."

Trump's legal team "may well have a "selective enforcement" excuse: No Republican county DA, notably, tried anything like this over the Hillary Clinton campaign's falsification of records to fund the Steele Dossier in an effort to turn the 2016 election"!

DA Alvin Bragg wanted to make good on his campaign promise to "get Trump," – it's political. [16, 21]

April 1

April 2023

April 3

Switzerland withdraws all COVID-19 vaccination recommendations

On April 3, 2023 Switzerland's Federal Office of Public Health announced they **no longer recommend COVID-19 vaccination** for any one, "in principle", until further review. "People at especially high risk can receive a vaccination following an individual consultation with their doctor", who now "bear the risk of liability for vaccination damage". [1] Entering the country exempt of vaccination.

The "Swiss drug regulator is in the process of being sued for negligence in approving the injections". It is increasingly becoming known that the COVID-19 vaccines and the resultant spike protein are causing more harm than good. [2]

At the time, the US CDC still recommended everyone as young as 6 months of age to "stay up to date with COVID-19 vaccines."! [3]

April 10

US ends Pandemic Emergency

On April 10, 2023 after 3 years the United States terminated its "national emergency related to the COVID-19 pandemic" a month earlier than planned. [1, 2, 3, 4, 5, 6]

President Trump declared the National Emergency on Friday 13th March, 2020.

"Biden signed the legislation behind closed doors on the eve of his trip Tuesday to Northern Ireland and the White House acknowledged the milestone without fanfare in a brief late-afternoon email that read: "On Monday, April 10, 2023, the President signed into law: H.J.Res. 7, which terminates the national emergency related to the COVID-19 pandemic."" [7]

All of the pandemic measures did not curb deaths in the US, compared to Sweden who did not lockdown.

April 16

Paper: Vaccines Alone Cannot Slow the Evolution of SARS-CoV-2

On April 16, 2023 Van Egeren *et al* published in the journal *Vaccines* the paper titled *Vaccines Alone Cannot Slow the Evolution of SARS-CoV-2*.

After performing “meticulous calculations of spread and virulence according to ecological pressures and continued propagation of the outbreak. They have concluded that it is impossible for frequent injections of either the same or modified [COVID-19 vaccine] boosters to be successful” writes Dr Peter McCullough. “Even with perfect compliance the vaccine campaign is destined for failure” and to date in the US “only 16% of adults are risking any more booster shots”. [1]

April 18

FDA admits a “vaccine” does not have to prevent infection or transmission!

On April 18, 2023 the FDA responded to a January 2023 CAALM’s petition regarding mRNA vaccine labelling, they wrote in a letter [1] an alarming admission:

*“FDA authorization and licensure **standards for vaccines do not** require demonstration of the **prevention of infection or transmission**...There is no requirement that the vaccine also prevents infection with the pathogen that can cause the disease or transmission of that pathogen to others...Similarly, a vaccine can meet the EUA standard **without any evidence** that the vaccine prevents infection or transmission.”* [pg 11]

April 18

FDA: Monovalent mRNA vaccines no longer authorised in US, bivalent only

On April 18, 2023 the FDA announced [1] it amended the emergency use authorizations (EUAs) so that “**monovalent** Moderna and Pfizer-BioNTech COVID-19 vaccines **are no longer authorized for use in the United States**”, only the bivalent (original and omicron BA.4/BA.5 strains) vaccines will be authorized, so as “to simplify the vaccination schedule for most individuals”. [2]

The bivalent products were never authorized for primary dose, especially not to new borns and babies, they were only considered as boosters, and on the back of 8 mice. Without any clinical trials for safety or efficacy, the FDA has approved the bivalent vaccine for unvaccinated adults, whom were never part of the bivalent “trials” – they’ve already adopted the “flu vaccine” model. [3]

April 24

TGA grants Full Registration of Moderna Spikevax – first COVID-19 vaccine

On 21 April, 2023 Australia's product regulator the "TGA approved Moderna Australia's application to transition its COVID-19 vaccine, SPIKEVAX (elasomeran), **from provisional to full registration**. This is the **first** COVID-19 vaccine to have received full registration", the announcement was made on April 24, 2023. [1]

This full registration is for "elasomeran" the Wuhan variant and not "davesomeran" the omicron variant! [3]

Currently the TGA adverse reporting system DAEN has 7,442 adverse event reports and 36 deaths for this vaccine. [2]

On August 9, 2021 provisional registration was granted to Moderna. According to the black triangle scheme the product should be under monitoring for minimum of 5 years – 2026!

May 1

May 2023

May 1

US ends COVID-19 vaccination travel requirement

On May 1, 2023 the Biden-Harris administration ended the requirement to be vaccinated for COVID-19 in order to enter the United States.

They claim the "vaccination campaign has saved millions of lives", they the US performed the worst in the world under Dr Fauci's leadership.

May 3

TGA announce lifting of ivermectin ban

On May 3, 2023 Australia's TGA announced they were removing the 'off-label' use prescribing restrictions from ivermectin "because there is sufficient evidence that the safety risks to individuals and public health is low when prescribed by a general practitioner in the current health climate." TGA enacted the ban on September 10, 2021 but due to a "sharp rise in prescriptions". [1, 2]

The removal comes into effect June 1, 2023 but TGA still discourages off-label prescribing of ivermectin for COVID-19, no mention of its use in treating vaccine injury.

May 5

WHO declares COVID-19 is no longer a global emergency

On Friday May 5, 2023 the World Health Organization's Director General Dr Tedros Adhanom Ghebreyesus announced an end to the Public Health Emergency of International Concern (PHEIC) as recommended by the Emergency Committee, thus he declared "COVID-19 [is] over as a global health emergency", but they still consider it a "global health threat" or pandemic! [1, 2, 3, 4, 5, 6, 7, 8, 9]

A "pandemic" and a declared PHEIC are two different things. On March 11, 2020 the WHO declared COVID-19 a pandemic, yet it was on January 30, 2020 that the WHO declared a PHEIC for "the novel coronavirus outbreak". The definition of pandemic was downgraded in May 2009 to be any disease across the world, no matter it's lethality!

The day before The Coronation of King Charles III, who is a strong advocate of a "new economic model"...

May 5

CDC Director, Rochelle Walensky to resign

On May 5, 2023 in a very brief statement the White House announced that CDC Director, Rochelle Walensky will "leave" her position, stating she "guided President Joe Biden's response to the COVID-19 pandemic from his first day in office". Effective June 30, 2023 she will no longer be the CDC director.

[1, 2, 3, 4, 5, 6, 7] She was a prominent spokesperson for the COVID-19 vaccine (including for pregnant women) over the past 2 years, and may never have been sworn in officially! [8]

Walensky's 'resignation' comes just days after an April 29, 2023 bombshell report was released revealing information from recently dropped Pfizer FOIA documents – information with a director of the CDC should have known. The "Pfizer mRNA COVID "Vaccine" Caused Dire Fetal and Infant Risks, Including Death". [9, 10] *"If you are thinking about getting vaccinated **there is no bad time** to get vaccinated. Get vaccinated while you're thinking about having a baby, before you're thinking about having a baby, while you're pregnant with your baby, or after you've delivered your baby. There's no bad time."* said Dr. Walensky as CDC Director when she would/should have known the dire consequences of doing so.

May 6

The Coronation: King Charles III is crowned in Westminster Abbey

On May 6, 2023 The Coronation ceremony, crowning King Charles III as King of England in Westminster Abbey, London, England was held. [1, 2, 3, 4]

- Charles acceded to the throne on 8 September 2022, upon the death of his mother, Queen Elizabeth II.
- On September 11, 2022 King Charles III was "officially proclaimed as the ruling monarch of Australia by Governor-General David Hurley."

On May 5, 2023, just one day before the coronation, the 3 year-long COVID-19 public “health emergency” was declared over by the World Health Organization.

May 11

US HHS declares end to Public Health Emergency

On May 11, 2023 the U.S. Department of Health and Human Services (HHS) Secretary Xavier Becerra, officially declared an end of the COVID-19 Public Health Emergency (PHE), which was announced two days earlier. [1, 2, 3]

“At the end of the COVID-19 PHE on May 11, Americans will continue to be able to access COVID-19 vaccines at no cost, just as they have during the COVID-19 PHE, due to the requirements of the CDC *COVID-19 Vaccination Program Provider Agreement* people will also continue to be able to access COVID-19 treatments just as they have during the COVID-19 PHE.” [4]

May 15

Durham: Intel community had NO actual evidence to base their Trump-Russia collusion probe

On May 12, 2023 **Special Counsel John Durham** submitted to the US Attorney General and Congress a 306 page final report [1] titled “*Report on matters related to intelligence activities and investigations arising out of the 2016 Presidential campaigns*”, he report was released to the public on May 15, 2023, with no indictments or arrests. [2, 3, 8, 9]

After four years, Durham declared the July 2016 origins of the FBI’s **Crossfire Hurricane**, Russia collusion probe [colloquially known as Russiagate] to be “flawed” and based on **no verified intelligence or evidence**. [4, 10, 11, 12, 13]

“*Neither U.S. law enforcement nor the Intelligence Community appears to have possessed any actual evidence of collusion in their holdings at the commencement of the Crossfire Hurricane investigation,*” Durham wrote

The report concluded:

“...that the Department and the FBI **failed to uphold their important mission of strict fidelity to the law** in connection with certain events and activities described in this report.”

“*In other words, they didn’t follow the law*” states Rep. Jim Jordan Durham specifically faulted the FBI for relying on evidence from the campaign of 2016 Democrat presidential nominee Hillary Clinton, including the now-discredited Steele dossier [which she paid for]. He stated the “*investigation also revealed that senior FBI personnel displayed a serious lack of analytical rigor towards the information that they received...*” Particularly with “*significant reliance on investigative leads provided or funded (directly or indirectly) by Trump’s political*

opponents". Even when they "*learned of significant and potentially contrary intelligence.*"

He highlighted "a dual system of justice, noting the FBI **never** opened a counterintelligence probe of Clinton's campaign, despite receiving intelligence she had authorized a dirty trick to paint Trump as a stooge for Russian President Vladimir Putin to impact the outcome of the [2016] election".

In April 2018 the Washington Post and The New York Times jointly shared the Pulitzer Prize for their coverage of the Intel-Community-fueled claims that Trump conspired with Russia to win the 2016 Presidency. Former President Trump has repeatedly asked Pulitzer to revoke the awards in light of Durham's incremental revelations. In July 2022 the Pulitzer board rejected the request, which in turn Trump sued them for defamation. [5]

- July 2016 the FBI opened Crossfire Hurricane investigation.
- In March 2019, special counsel **Robert Mueller** and his team of investigators found no evidence of collusion between Trump and Russia, thus concluding the Mueller investigation, with 34 other indictments.
- In May 2019 Durham began work as lead investigator into **the origins** of the Trump-Russia collusion investigation by the FBI—Crossfire Hurricane. [6, 7]
- In October 2020 John Durham was appointed as **Special Counsel** by Attorney General William Barr – to ensure the investigation could continue following the 2020 Presidential election

The media-fueled weight of these now "debunked", "flawed" and "biased" allegations, started by the intelligence community in July 2016, during Trump's Presidential campaign. Influencing the outcome of the 2016 Presidential election?

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Patents Relating to the Pandemic

1986-1990

NIAID Grant AI 23946 leading to patent U.S. 7,279,327 "Methods for Producing Recombinant Coronavirus" Filed 2002 and issued 2007

<https://patents.google.com/patent/US7279327B2/ru>

The paper first published from the NIAID grant is

<https://europepmc.org/backend/ptpmcrender.fcgi?accid=PMC7109931&blobtype=pdf>

1990 Pfizer files U.S. Patent 6,372,224 on a vaccine for the S-protein on coronavirus November 14, 2000 which was abandoned April 2010 making it public domain. 1990s Work focused on CoV association with cardiomyopathy (see above) Early reference to

the “emergence” of CoV as a respiratory pathogen in

https://link.springer.com/content/pdf/10.1007%2F978-1-4615-1899-0_91.pdf

2000

Ralph Baric AI23946 and GM63228 from the National Institutes of Health actively working recombinant CoV 2001 National Institute of Health, Allergy and Infectious diseases. “Reverse Genetics with a Coronavirus Infectious cDNA Construct.”

4/1/2001-3/31/005 \$1.0 million total costs/yr. RS Baric, PI 2002 Asia CoV SARS outbreak 2003 April 25, 2003 CDC Patent filed and ultimately becomes US7,220,852 (the patent on the RNA sequence) and 7,776,521 (the patent on the testing methodology. These patents give the U.S. Department of Health and Human Services the ability to control the commercial exploitation of SARS coronavirus. Dr. Anthony Fauci appointed to the Bill and Melinda Gates Foundation’s Global Grand Challenges Scientific Advisory Board (served through 2010). April 28, 2003 Sequoia Pharmaceuticals \$953K for pathogen response and patent US7,151,163
<https://www.sbir.gov/node/305319>

July 21, 2003 Ralph Baric’s team (using AI23946 and GM63228) file U.S. Patent 7,618,802 which issued on November 17, 2009.

<https://patents.google.com/patent/US7618802B2> Dana Farber Cancer Institute files U.S. Patent 7,750,123 on a monoclonal antibody to neutralize SARS CoV. This research is supported by several NIH grants including National Institutes of Health Grants A128785, A148436, and A1053822. 2004 January 6, 2004 – SARS and Bioterrorism linked at Bioterrorism and Emerging Infectious Diseases: antimicrobials, therapeutics and immune modulators.

<https://tks.keystonesymposia.org/index.cfm?e=web.meeting.program&meetingid=706> At this conference, the term “The New Normal” was introduced by Merck FAUCI AND BARIC start making money!!! National Institutes of Health, Allergy and Infectious Diseases. SARS Reverse Genetics. AI059136-01. \$1.7 million total costs, RS Baric, PI. 10% effort.

4/1/04- 3/31/09. The project develops a SARS-CoV full length infectious cDNA, the development of SARS-CoV replicon particles expressing heterologous genes, and seeks to adapt SARS-CoV to mice, producing a pathogenic mouse model for SARS-CoV infection. Fauci/COVID-19 Dossier CC-BY-NC-SA Dr. David E. Martin 18 National Institutes of Health, Allergy and Infectious Diseases. R01. Remodeling the SARS Coronavirus Genome Regulatory Network. RS Baric, PI 10% effort.

7/1/04-6/30/09. \$2.1 million November 22, 2004 University of Hong Kong patents SARS associated spike protein on CoV and pursues patent US 7,491,489 2005 DARPA gets in on the game Synthetic Coronaviruses. Biohacking: Biological Warfare Enabling Technologies, June 2005. Washington, DC. DARPA/MITRE sponsored event. Invited Speaker Review timeline from https://www.youtube.com/watch?v=rO_EeYBOiOU and <https://www.davidmartin.world/wp-content/uploads/2020/04/20APRBotWslides.pdf>

2008

Biodefense Grant U54 AI057157 commences with \$10,189,682 to UNC Chapel Hill
https://taggs.hhs.gov/Detail/AwardDetail?arg_awardNum=U54AI057157&arg_ProgOfficeCode=104

2009

Biodefense Grant U54 AI057157 continues with \$5,448,656 to UNC Chapel Hill (non-competitive grant from NIAID)

2010

Biodefense Grant U54 AI057157 continues with \$8,747,142 to UNC Chapel Hill (non-competitive grant from NIAID) Patent issuance for SARS coronavirus patents peak post the Asia outbreak at 391 issued patents.

August 6, 2010, Moderna (prior to its establishment) files U.S. Patent 9,447,164 which attracted the investment of (and “inventorship” for) venture capitalists at Flagship Ventures. This patent grew out of the work of Dr. Jason P. Schrum of Harvard Medical School supported by National Science Foundation Grant #0434507. While the application claims priority to August 2010, the application didn’t get finalized until October, 2015. On November 4, 2015, the USPTO issued a non-final rejection on this original patent rejecting all claims.

https://www.nsf.gov/awardsearch/showAward?AWD_ID=0434507 with reference to the grant funding in

https://molbio.mgh.harvard.edu/szostakweb/publications/Szostak_pdfs/Schrom_et_al_JACS_2009.pdf

2011

Crucell joined the Janssen Pharmaceutical Companies of Johnson & Johnson in February taking with it all of its SARS technology. Biodefense Grant U54 AI057157 continues with \$7,344,820 to UNC Chapel Hill (non-competitive grant from NIAID)

2012

MERS isolated in Egypt Biodefense Grant U54 AI057157 continues with \$7,627,657 to UNC Chapel Hill (non-competitive grant from NIAID) 2013 Biodefense Grant U54 AI057157 continues with \$7,226,237 to UNC Chapel Hill (non-competitive grant from NIAID) 2014 April 23, 2014, Moderna files patent on nucleic acid vaccine with Patents US9872900 and US10022435 Fauci/COVID-19 Dossier CC-BY-NC-SA Dr. David E. Martin 19 2015 Moderna signs a vaccine development agreement with NIAID and executes it with the lead on the mRNA-1273 lead developer and inventor Giuseppe Ciaramella.

<https://www.documentcloud.org/documents/6935295-NIH-Moderna-Confidential-Agreements.html>

2016

NIH through Scripps Institute and Dartmouth College file patent application WO 2018081318A1 "Prefusion Coronavirus Spike Proteins and their Use" disclosing mRNA technology that overlaps (and is used in tandem with) Moderna's technology.

<https://patents.google.com/patent/WO2018081318A1/en>

Lead Inventor Barney Scott Graham was well known to Moderna as he's the person at NIH that Moderna "e-mailed" to get the sequence for SARS CoV-2 according to Moderna's report here ("In January 2020, once it was discovered that the infection in Wuhan was caused by a novel coronavirus, Bancel quickly emailed Dr. Barney Graham, deputy director of the Vaccine Research Center at the National Institutes of Health, asking him to send the genetic sequence for the virus.")

<https://www.wsws.org/en/articles/2020/05/26/vacc-m26.html> In addition,

co-inventor Jason McLellan worked with Graham on a vaccine patent jointly owned with the Chinese government filed in Australia in 2013

<https://patents.google.com/patent/AU2014231357A1/en?inventor=Jason+MCLELLA>.

2017

August – Sanofi buys Protein Science Corp with considerable SARS patent holdings

2018

June – Sanofi buys Ablynx with considerable SARS patent holdings 2019 March, <https://wyss.harvard.edu/news/sherlock-biosciences-licenses-wyss-technology-to-createaffordable-molecular-diagnostics/> funded by Open Philanthropy – the same organization that would be the financial sponsor of the Event 201 "table-top" exercise that laid out the entire "pandemic" plan in October 2019.

The following pages are a small sample of the numerous patents related to COVID.

Click [here](#) to access the full pdf.

The Commercial Actors

SARS coronavirus is a new topic for many individuals. Since 1999, the ability to manipulate and exploit coronavirus for a variety of purposes has attracted the attention of individuals, institutions and commercial organizations in public, private, and not-for-profit sectors. The following is the list of over 5,100 patents and patent applications filed for the express purpose of controlling some aspect of the SARS coronavirus.

PATENT	Title	Owner	Pri- ori- ty	File d Dat e	Issu e Dat e
US9995706	Amperometric gas sensor	Steris Corporation	25- Jun- 12	30- Sep- 14	12- Jun- 18
US9995705	Amperometric gas sensor	Steris Corporation	25- Jun- 12	30- Sep- 14	12- Jun- 18
US9994558	Multicyclic compounds and methods of using same	Karyopharm Therapeutics Inc.	20- Sep- 13	19- Sep- 14	12- Jun- 18
US9994550	Heterocyclic modulators of lipid synthesis for use against cancer and viral infections	3-V Biosciences, Inc.	7- Jan- 14	7- Jan- 15	12- Jun- 18
US9993543	Immunogenic compositions comprising silicified virus and methods of use	Portland State University	31- Jan- 13	31- Jan- 14	12- Jun- 18
US9982257	Chiral control	WAVE LIFE SCIENCES LTD.	13- Jul-12	12- Jul- 13	29- May- 18
US9982241	Recombinant HCMV and RHCMV vectors and uses thereof	Oregon Health & Science University	14- May- 10	1- Oct- 15	29- May- 18
US9982025	Monomeric griffithsin tandemers	The United States of America, as represented by the Secretary, Department of Health and Human Services	5- Jun- 13	5- Jun- 14	29- May- 18
US9981036	Compositions, comprising improved Il-12 genetic constructs and vaccines, immunotherapeutics and methods of using the same	THE TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA	12- Dec- 11	26- Feb- 16	29- May- 18
US9975885	Broad-spectrum non-covalent coronavirus protease inhibitors	PURDUE RESEARCH FOUNDATION	28- Apr- 16	28- Apr- 17	22- May- 18
US9974850	Immunogenic compositions and uses thereof	BOARD OF REGENTS, THE UNIVERSITY OF TEXAS SYSTEM	25- Mar- 15	25- Mar- 16	22- May- 18
US9974848	Tetanus toxoid and CCL3 improve DC vaccines	Duke University	14- Nov- 13	14- Nov- 14	22- May- 18
US9974845	Combination of vaccination and inhibition of the PD-1 pathway	CureVac AG	22- Feb- 13	21- Feb- 14	22- May- 18
US9970061	Bioagent detection oligonucleotides	IBIS BIOSCIENCES, INC.	27- Dec- 11	27- Dec- 12	15- May- 18
US9969793	Compositions and methods for the treatment of immunodeficiency	ADMA Biologics, Inc.	28- Oct- 14	13- Nov- 17	15- May- 18
US9963718	LCMV-GP-VSV-pseudotyped vectors and tumor-infiltrating virus-producing cells for the therapy of tumors	VRATHERAPEUTICS GMBH	8- Oct- 08	7- Apr- 17	8- May- 18
US9963611	Composition for use in decreasing the transmission of human pathogens	Innox Technologies, Incorporated	29- May- 09	21- May- 10	8- May- 18
US9963427	Dithiol mucolytic agents	PARION SCIENCES, INC.	23- Aug- 13	11- Mar- 16	8- May- 18
US9962439	Injectable vaccine composition	NITTO DENKO CORPORATION	3- Oct- 13	2- Oct- 14	8- May- 18
US9957302	Treating cancer with viral nucleic acid	Mayo Foundation for Medical Education and Research	20- Feb- 07	6- Jul- 15	1- May- 18
US9957300	Virus-like particles, methods of preparation, and immunogenic compositions	Emory University	17- May- 02	4- May- 15	1- May- 18
US9957238	Arylalkyl-and aryloxyalkyl-substituted epithelial sodium channel blocking compounds	Parion Sciences, Inc.	13- Dec- 13	1- Mar- 17	1- May- 18
US9951317	Highly efficient influenza matrix (M1) proteins	NOVAVAX, INC.	11- Jul-03	6- Oct- 16	24- Apr- 18

US9951124	Antibody producing non-human mammals	MERUS N.V.	27-Jun-08	25-Jan-13	24-Apr-18
US9951122	Antibodies against influenza virus and methods of use thereof	BURNHAM INSTITUTE FOR MEDICAL RESEARCH	6-Dec-07	12-Aug-13	24-Apr-18
US9950062	Compounds and compositions as TLR activity modulators	GLAXOSMITHKLINE BIOLOGICALS SA	2-Sep-09	1-Sep-10	24-Apr-18
US9945856	Coronavirus, nucleic acid, protein, and methods for the generation of vaccine, medicaments and diagnostics	AMSTERDAM INSTITUTE OF VIRAL GENOMICS B.V.	18-Aug-03	13-Aug-14	17-Apr-18
US9945780	Use of a fluorescent material to detect failure or deteriorated performance of a fluorometer	GEN-PROBE INCORPORATED	14-Jun-12	7-Jun-13	17-Apr-18
US9944928	Construction of pool of interfering nucleic acids covering entire RNA target sequence and related compositions	York Yuan Yuan Zhu	23-Jul-07	2-Jul-15	17-Apr-18
US9944695	Antibody producing non-human mammals	Merus N.V.	27-Jun-08	30-Apr-14	17-Apr-18
US9944686	Treatment of tumors with recombinant interferon alpha	SUPERLAB FAR EAST LIMITED	28-Feb-01	5-Sep-13	17-Apr-18
US9944649	Compounds and compositions as toll-like receptor 7 agonists	Novartis Ag	1-May-14	29-Apr-15	17-Apr-18
US9943614	Cationic steroid antimicrobial diagnostic, detection, screening and imaging methods	BRIGHAM YOUNG UNIVERSITY	17-Jun-08	16-Jun-09	17-Apr-18
US9938300	Isothiazolopyrimidinones, pyrazolopyrimidinones, and pyrolopyrimidinones as ubiquitin-specific protease 7 inhibitors	Forma Therapeutics, Inc.	5-Feb-15	4-Feb-16	10-Apr-18
US9938275	Substituted imidazoquinolines, imidazopyridines, and imidazonaphthyridines	3M Innovative Properties Company	18-Jun-04	23-Jan-17	10-Apr-18
US9938258	Substituted 2,3-dihydrobenzofuranyl compounds and uses thereof	Karyopharm Therapeutics Inc.	29-Nov-12	27-Nov-13	10-Apr-18
US9932351	Thienopyrimidinones as ubiquitin-specific protease 7 inhibitors	Forma Therapeutics, Inc.	5-Feb-15	4-Feb-16	3-Apr-18
US9932323	Therapeutic hydroxypyridinones, hydroxypyrimidinones and hydroxypyridazinones	Rutgers, The State University of New Jersey	11-Sep-12	13-Jan-17	3-Apr-18
US9931316	Antiviral activity from medicinal mushrooms and their active constituents	Not Available	31-Mar-15	14-Sep-15	3-Apr-18
US9926340	NAD analogs and methods of using said NAD analogs in determining ribosylation of proteins with PARP mutants	Biolog Life Science Institute Forschungslabor und Biochemica-Vertrieb GmbH	8-Apr-15	1-Apr-16	27-Mar-18
US9925215	Anionically modified polyallylamine derivative, use of anionically modified polyallylamine derivative as medicine, particularly for prophylaxis and treatment of infections of respiratory tract caused by human metapneumovirus (hMPV), human rhinoviruses (HRV), and infection by influenza virus type A (IAV) and pharmaceutical composition comprising the anionically modified polyallylamine derivative	UNIWERSYTET JAGIELLONSKI	29-Jul-14	25-Oct-17	27-Mar-18
US9920314	Compositions for and methods of identifying antigens	President and Fellows of Harvard College	21-Feb-06	6-May-15	20-Mar-18
US9920128	Synthetic antiserum for rapid-turnaround therapies	The Johns Hopkins University	28-Jan-15	20-Jan-16	20-Mar-18
US9919034	Methods of treating and prophylactically protecting mammalian patients infected by viruses classified in Baltimore group V	TAMIR BIOTECHNOLOGY, INC.	28-Mar-14	10-Jun-15	20-Mar-18
US9915613	Systems and methods for distinguishing optical signals of different modulation frequencies in an optical signal detector	GEN-PROBE INCORPORATED	24-Feb-11	21-Mar-14	13-Mar-18
US9914976	Methods and compositions for prostate cancer metastasis	FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY (FA)	25-Mar-11	27-May-16	13-Mar-18
US9913801	Treatment of evolving bacterial resistance diseases including <i>Klebsiella pneumoniae</i> with liposomally formulated glutathione	YOUR ENERGY SYSTEMS, LLC	15-Feb-13	15-Mar-13	13-Mar-18
US9909176	Efficient deep sequencing and rapid genomic speciation of RNA viruses (vRNAseq)	The Johns Hopkins University	8-Sep-14	1-Sep-15	6-Mar-18
US9908946	Generation of binding molecules	Merus N.V.	26-Sep-11	16-Sep-15	6-Mar-18
US9908675	Powdered pouch and method of making same	MONOSOL, LLC	16-Apr-12	19-Jul-16	6-Mar-18

US9907796	Methods of treating tumoral diseases, or bacterial or viral infections	INHIBIKASE THERAPEUTICS, INC.	4- Oct- 12	15- Sep- 16	6- Mar- 18
US9895692	Sample-to-answer microfluidic cartridge	Micronics, Inc.	29- Jan- 10	5- Aug- 15	20- Feb- 18
US9895411	Analog of CSA and methods of using same	BOARD OF REGENTS OF THE UNIVERSITY OF NEBRASKA	29- Jun- 10	29- Jun- 11	20- Feb- 18
US9895341	Inflammation and immunity treatments	Ocean Spray Cranberries, Inc.	1- Apr- 11	30- Mar- 12	20- Feb- 18
US9894888	Transgenic immunodeficient mouse expressing human SIRP-alpha	INSTITUT PASTEUR	26- Mar- 12	26- Mar- 13	20- Feb- 18
US9890419	Nanoreporters and methods of manufacturing and use thereof	NanoString Technologies, Inc.	23- Dec- 05	20- May- 16	13- Feb- 18
US9890408	Multiple displacement amplification	BIOSCIENCE INC.	15- Oct- 09	15- Oct- 10	13- Feb- 18
US9890362	Compositions, methods and uses for inducing viral growth	Takeda Vaccines, Inc.	5- Dec- 08	19- Sep- 14	13- Feb- 18
US9890361	Methods for increasing the infectivity of viruses utilizing alkyl-modified fatty acids	LIFE TECHNOLOGIES CORPORATION	26- Jan- 12	25- Jan- 13	13- Feb- 18
US9890206	H1N1 flu virus neutralizing antibodies	Medigen Biotechnology Corporation	20- Aug- 15	20- Aug- 15	13- Feb- 18
US9890169	Triazolone compounds as HNE inhibitors	CHIESI FARMACEUTICI S.P.A.	14- Dec- 15	12- Dec- 16	13- Feb- 18
US9890124	Benzazepine sulfonamide compounds	Hoffmann-La Roche Inc.	15- Dec- 15	14- Jun- 17	13- Feb- 18
US9889194	Immunogenic composition for MERS coronavirus infection	New York Blood Center, Inc.	1- Mar- 13	28- Feb- 14	13- Feb- 18
US9885092	Materials and methods for detection of HPV nucleic acids	QIAGEN GAITHERSBURG INC.	24- Feb- 11	23- Feb- 12	6- Feb- 18
US9885082	Embodiments of a probe and method for targeting nucleic acids	University of Idaho	19- Jul-11	19- Jul- 12	6- Feb- 18
US9885037	Chiral control	WAVE LIFE SCIENCES LTD.	13- Jul-12	12- Jul- 13	6- Feb- 18
US9884895	Methods and compositions for chimeric coronavirus spike proteins	The University of North Carolina at Chapel Hill	20- Mar- 14	20- Mar- 15	6- Feb- 18
US9884876	Anti-viral compounds, pharmaceutical compositions, and methods of use thereof	Kineta, Inc.	9- May- 14	8- May- 15	6- Feb- 18
US9884129	Release of agents from cells	The Brigham and Women's Hospital, Inc.	15- Oct- 09	5- Jan- 15	6- Feb- 18
US9884032	Esters of short chains fatty acids for use in the treatment of immunogenic disorders	PROPONENT BIOTECH GMBH	3- Oct- 12	3- Mar- 16	6- Feb- 18
US9884026	Modular particles for immunotherapy	YALE UNIVERSITY	1- Nov- 13	31- Oct- 14	6- Feb- 18
US9880151	Method of determining, identifying or isolating cell-penetrating peptides	Phylogica Limited	23- May- 11	23- May- 12	30- Jan- 18
US9879026	Substituted spirocycles	Boehringer Ingelheim International GmbH	12- Sep- 14	29- Nov- 16	30- Jan- 18
US9879003	Host targeted inhibitors of dengue virus and other viruses	Dana-Farber Cancer Institute, Inc.	11- Apr- 12	15- Mar- 13	30- Jan- 18
US9878988	Dendrimer like amino amides possessing sodium channel blocker activity for the treatment of dry eye and other mucosal diseases	PARION SCIENCES, INC.	29- May- 12	5- Jan- 16	30- Jan- 18
US9873678	Chemical compounds	AstraZeneca AB	18- Mar- 14	17- Mar- 15	23- Jan- 18
US9873674	C-Ret inhibitors and uses thereof	CORNELL UNIVERSITY	21- Sep- 12	19- Sep- 13	23- Jan- 18
US9872900	Nucleic acid vaccines	ModernaTX, Inc.	23- Apr- 14	5- Apr- 16	23- Jan- 18
US9872898	Compositions and methods for treating and preventing porcine reproductive and respiratory syndrome	Ohio State Innovation Foundation	24- Apr- 12	3- Oct- 16	23- Jan- 18
US9872895	TLRS ligands, therapeutic methods, and compositions related thereto	Emory University	24- Sep- 10	20- Sep- 11	23- Jan- 18

US9868952	Compositions and methods for β -Coeresistance-proof β C SIRNA therapeutics for influenza	Simaomics, Inc.	8-Jul-12	7-Jul-13	16-Jan-18
US9868740	Pyrimidinone compounds which are HNE inhibitors	CHIESI FARMACEUTICI S.p.A.	12-Jun-14	12-Jun-14	16-Jan-18
US9868736	Deubiquitinase inhibitors and methods for use of the same	THE REGENTS OF THE UNIVERSITY OF MICHIGAN	10-Oct-13	10-Oct-14	16-Jan-18
US9867882	Carbohydrate conjugates as delivery agents for oligonucleotides	Alnylam Pharmaceuticals, Inc.	4-Dec-07	25-Aug-15	16-Jan-18
US9867877	Methods for preparing squalene	NOVARTIS AG	12-May-10	22-Nov-16	16-Jan-18
US9862706	Compounds	CHIESI FARMACEUTICI S.p.A.	31-May-16	26-May-17	9-Jan-18
US9861614	Nuclear transport modulators and uses thereof	Karyopharm Therapeutics Inc.	9-May-12	23-Jun-15	9-Jan-18
US9856254	Alkoxy substituted imidazoquinolines	3M Innovative Properties Company	3-Oct-03	13-Jun-16	2-Jan-18
US9856241	Substituted benzofuranyl and benzoxazolyl compounds and uses thereof	Karyopharm Therapeutics Inc.	3-Jul-13	3-Jul-14	2-Jan-18
US9856228	Peptidyl nitril compounds as dipeptidyl peptidase I inhibitors	PROZYMEX A/S	9-Sep-13	8-Sep-14	2-Jan-18
US9856224	Stable sodium channel blockers	PARION SCIENCES, INC.	30-Jun-14	30-Jan-17	2-Jan-18
US9855287	Anti-viral azide containing compounds	LIFE TECHNOLOGIES CORPORATION	28-Jul-10	20-Aug-15	2-Jan-18
US9855284	Pharmaceutical compositions and methods	Pop Test Oncology LLC	3-Aug-15	6-Dec-16	2-Jan-18
US9849143	Broad spectrum antiviral and methods of use	The Burlington HC Research Group, Inc.	17-Apr-06	16-Feb-17	26-Dec-17
US9845342	Fusion proteins, recombinant bacteria, and methods for using recombinant bacteria	Spogen Biotech Inc.	17-Sep-14	17-Sep-15	19-Dec-17
US9840731	Preservation of biological materials in non-aqueous fluid media	Gentegra, LLC	14-Mar-13	14-Mar-14	12-Dec-17
US9840719	Variant AAV and compositions, methods and uses for gene transfer to cells, organs and tissues	The Children's Hospital of Philadelphia	22-Jul-13	22-Jul-14	12-Dec-17
US9840491	Quinazolinones and azaquinazolinones as ubiquitin-specific protease 7 inhibitors	FORMA Therapeutics, Inc.	5-Feb-15	4-Feb-16	12-Dec-17
US9839687	Acetylenedicarboxyl linkers and their uses in specific conjugation of a cell-binding molecule	SUZHOU M-CONJ BIOTECH CO., LTD.	15-Jul-15	15-Jul-15	12-Dec-17
US9834812	Probe kit for detecting a single strand target nucleotide sequence	Fondazione Istituto Italiano Di Tecnologia	27-Dec-12	27-Dec-13	5-Dec-17
US9834791	CRISPR-related methods and compositions with governing gRNAs	Editas Medicine, Inc.	7-Nov-13	7-Nov-14	5-Dec-17
US9834757	Hand, foot, and mouth vaccines and methods of manufacture and use thereof	Takeda Vaccines, Inc.	7-Nov-14	6-Nov-15	5-Dec-17
US9834595	Amino acid sequences directed against envelope proteins of a virus and polypeptides comprising the same for the treatment of viral diseases	Ablynx N.V.	5-Jun-08	29-Oct-15	5-Dec-17
US9833504	Virus-like particles and process for preparing same	Folia Biotech Inc.	13-May-11	1-May-12	5-Dec-17
US9833492	Combinations of a caspase inhibitor and an antiviral agent	Centre National de la Recherche Scientifique	2-Nov-07	15-May-15	5-Dec-17
US9832998	Antiviral compositions	Long Island University	30-May-07	19-Mar-15	5-Dec-17
US9828382	Pyrimidinone compounds as human neutrophil elastase inhibitors	Chiesi Farmaceutici S.p.A.	18-Dec-12	10-May-16	28-Nov-17
US9828379	Pyrrolo-pyrrole carbamate and related organic compounds, pharmaceutical compositions, and medical uses thereof	ABIDE THERAPEUTICS, INC.	3-Jul-13	1-Jul-14	28-Nov-17
US9828370	Compositions and methods for inhibiting kinases	INHIBIKASE THERAPEUTICS, INC.	23-Apr-15	22-Apr-16	28-Nov-17
US9828346	N-myristoyl transferase inhibitors	University of Dundee	2-Sep-08	31-Aug-15	28-Nov-17

US9828342	Isatin derivatives, pharmaceutical compositions thereof, and methods of use thereof	CITY OF HOPE	24-Feb-12	25-Feb-13	28-Nov-17
US9827190	Intradermal delivery of immunological compositions comprising toll-like receptor 7 agonists	GLAXOSMITHKLINE BIOLOGICALS SA	1-Feb-13	30-Jan-14	28-Nov-17
US9822339	Means and methods for influencing the stability of antibody producing cells	ACADEMISCH MEDISCH CENTRUM BIJ DE UNIVERSITEIT VAN AMSTERDAM	9-Dec-05	26-Aug-15	21-Nov-17
US9822173	Heterodimeric immunoglobulins	AMGEN INC.	21-Nov-12	21-Nov-13	21-Nov-17
US9822165	Hydrocarbon stapled stabilized alpha-helices of the HIV-1 GP41 membrane proximal external region	DANA-FARBER CANCER INSTITUTE, INC.	18-Jun-09	18-Jun-10	21-Nov-17
US9822155	Method of preventively treating a subject at the risk of developing infections of a respiratory virus	Xiangxue Group (Hong Kong) Company Limited	9-May-13	23-Jul-16	21-Nov-17
US9822127	GAK modulators as antivirals	The Board of Trustees of the Leland Stanford Junior University	23-Jul-14	23-Jul-15	21-Nov-17
US9822065	Benzazepine dicarboxamide compounds	Hoffmann-La Roche Inc.	6-Mar-15	14-Feb-17	21-Nov-17
US9821052	Reverse genetics systems	Seqirus UK Limited	31-Jul-09	30-Jul-10	21-Nov-17
US9821051	Reducing hospitalization in elderly influenza vaccine recipients	Seqirus UK Limited	28-Oct-10	21-Oct-11	21-Nov-17
US9816078	Compositions for increasing polypeptide stability and activity, and related methods	SOLIS BIODYNE OÅs	19-Nov-09	11-Mar-16	14-Nov-17
US9815886	Compositions and methods for the treatment of immunodeficiency	ADMA BIOLOGICS, INC.	28-Oct-14	8-Jan-15	14-Nov-17
US9815805	Certain (2S)-N-[[[1S]-1-cyano-2-phenylethyl]-1,4-oxazepane-2-carboxamides as dipeptidyl peptidase 1 inhibitors	ASTRAZENECA AB	24-Jan-14	8-Nov-16	14-Nov-17
US9814777	Targeting lipids	Arbutus Biopharma Corporation	4-Dec-07	22-Oct-13	14-Nov-17
US9810683	Use of live cell interferometry with reflective floor of observation chamber to determine changes in mass of mammalian cells	The Regents of the University of California	6-May-09	25-Nov-13	7-Nov-17
US9809845	Methods and reagents for amplifying nucleic acids	The United States of America, as represented by the Secretary, Department of Health and Human Services	6-Aug-12	6-Aug-12	7-Nov-17
US9809796	Animal protein-free media for cultivation of cells	Baxalta GmbH	29-Oct-04	18-May-17	7-Nov-17
US9809632	Universal protein tag for double stranded nucleic acid delivery	University of Washington Through its Center for Commercialization	23-Oct-13	22-Oct-14	7-Nov-17
US9809591	Heterocyclic modulators of lipid synthesis	3-V Biosciences, Inc.	8-Mar-11	5-Oct-15	7-Nov-17
US9808490	Induced hepatocytes and uses thereof	ACCELERATED BIOSCIENCES CORP.	26-Nov-14	25-Nov-15	7-Nov-17
US9803236	Microarray-based assay integrated with particles for analyzing molecular interactions	CapitalBio Corporation	6-Aug-10	6-Aug-10	31-Oct-17
US9803197	Particle-nucleic acid conjugates and therapeutic uses related thereto	Emory University	25-Jun-12	27-Feb-13	31-Oct-17
US9802937	Substituted pyrazolo[4,3-D]pyrimidines as kinase inhibitors	ORIGENIS GMBH	21-Apr-11	23-Apr-12	31-Oct-17
US9802919	Compounds	CHIESI FARMACEUTICI S.p.A.	31-May-16	26-May-17	31-Oct-17
US9801948	Antimicrobial compositions and methods of use thereof	Yale University	21-Sep-11	21-Sep-12	31-Oct-17
US9801947	Methods and compositions for enhancing immune response	3M INNOVATIVE PROPERTIES COMPANY	10-Apr-03	6-Oct-14	31-Oct-17
US9801935	Soluble needle arrays for delivery of influenza vaccines	SEQIRUS UK LIMITED	20-Aug-10	11-Oct-16	31-Oct-17
US9801897	Delivery of RNA to trigger multiple immune pathways	GLAXOSMITHKLINE BIOLOGICALS SA	6-Jul-10	6-Jul-11	31-Oct-17
US9797000	Non-target amplification method for detection of RNA splice-forms in a sample	QIAGEN GAITHERSBURG INC.	1-May-09	30-Apr-10	24-Oct-17
US9796979	Oligonucleotide modulators of the toll-like receptor pathway	Quark Pharmaceuticals Inc.	3-Mar-11	28-Jul-16	24-Oct-17

US9796735	Boron-containing small molecules	Anacor Pharmaceuticals, Inc.	20-Jun-07	7-Nov-14	24-Oct-17
US9795669	Lipidated immune response modifier compound compositions, formulations, and methods	3M INNOVATIVE PROPERTIES COMPANY	17-Aug-10	15-Dec-15	24-Oct-17
US9795668	Delivery of self-replicating RNA using biodegradable polymer particles	GlaxoSmithKline Biologicals S.A.	6-Jul-10	23-Nov-15	24-Oct-17
US9795666	High-yield transgenic mammalian expression system for generating virus-like particles	Academia Sinica	5-Sep-06	11-Feb-15	24-Oct-17
US9791437	Multianalyte assay	Nexus Dx, Inc.	30-Apr-07	15-Jun-15	17-Oct-17
US9789180	D-amino acid derivative-modified peptidoglycan and methods of use thereof	The Regents of the University of California	30-Nov-12	31-Mar-16	17-Oct-17
US9786050	Stain-free histopathology by chemical imaging	The Board of Trustees of the University of Illinois	15-Mar-13	14-Mar-14	10-Oct-17
US9783595	Neutralizing GP41 antibodies and their use	The United States of America, as represented by the Secretary, Department of Health and Human Services	7-Nov-11	2-Aug-16	10-Oct-17
US9782470	Method of obtaining thermostable dried vaccine formulations	Merck Sharp & Dohme Corp.	16-Oct-13	13-Oct-14	10-Oct-17
US9782434	Methods of treating or preventing inflammation and hypersensitivity with oxidative reductive potential water solution	Sonoma Pharmaceuticals, Inc.	20-Jan-06	7-Jul-15	10-Oct-17
US9770504	Generating peptoid vaccines	The Board of Regents of the University of Texas System	3-May-13	2-May-14	26-Sep-17
US9770463	Delivery of RNA to different cell types	GLAXOSMITHKLINE BIOLOGICALS SA	6-Jul-10	7-Jun-11	26-Sep-17
US9765395	System and method for DNA sequencing and blood chemistry analysis	Nanomedical Diagnostics, Inc.	28-Apr-14	10-Apr-15	19-Sep-17
US9765133	Antibody producing non-human mammals	Merus N.V.	27-Jun-08	29-Apr-14	19-Sep-17
US9765071	Substituted imidazo ring systems and methods	3M INNOVATIVE PROPERTIES COMPANY	25-Nov-03	14-Mar-16	19-Sep-17
US9764027	Outer membrane vesicles	GLAXOSMITHKLINE BIOLOGICALS SA	18-Sep-12	18-Sep-13	19-Sep-17
US9759723	B-cell antigen presenting cell assay	University of Pittsburgh ^h & ^c of the Commonwealth System of Higher Education	8-Apr-10	21-Mar-16	12-Sep-17
US9758840	Parasite detection via endosymbiont detection	IBIS BIOSCIENCES, INC.	14-Mar-10	11-Mar-11	12-Sep-17
US9758820	Organism identification panel	BioFire Diagnostics, LLC	2-Apr-07	1-Apr-08	12-Sep-17
US9758775	TAL effector-mediated DNA modification	Iowa State University Research Foundation, Inc.	10-Dec-09	14-Apr-14	12-Sep-17
US9758568	Oligopeptide-free cell culture media	Baxalta GmbH	4-Jan-06	16-Nov-15	12-Sep-17
US9758553	Yeast strain for the production of proteins with terminal alpha-1,3-linked galactose	MERCK SHARP & DOHME CORP.	30-May-08	2-Jul-14	12-Sep-17
US9757478	Mutant protease biosensors with enhanced detection characteristics	Promega Corporation	11-May-10	7-Jan-16	12-Sep-17
US9757470	Peptides for assisting delivery across the blood brain barrier	Children's Medical Center Corporation	22-May-06	30-Apr-14	12-Sep-17
US9757446	Influenza virus vectors and uses therefor	FLUGEN, INC.	17-Mar-14	13-Mar-15	12-Sep-17
US9757407	Treatment of viral infections by modulation of host cell metabolic pathways	The Trustees of Princeton University	1-Jun-07	21-Dec-15	12-Sep-17
US9751945	Sortase-modified VHH domains and uses thereof	Whitehead Institute for Biomedical Research	13-Apr-12	15-Apr-13	5-Sep-17
US9750798	Bunyaviruses with segmented glycoprotein precursor genes and methods for generating these viruses	STICHTING WAGENINGEN RESEARCH	21-May-13	21-May-14	5-Sep-17
US9750797	Sustained release vaccine composition	VRBAC CORPORATION	16-Jun-04	16-Jun-05	5-Sep-17
US9750690	Circulation of components during microfluidization and/or homogenization of emulsions	NOVARTIS AG	3-Dec-09	5-Sep-14	5-Sep-17

US9746985	System and method for detecting, collecting, analyzing, and communicating event-related information	Georgetown University	25-Feb-08	20-Apr-11	29-Aug-17
US9746459	Antigen presenting cell assay	University of Pittsburgh&C*Of the Commonwealth System of Higher Education	8-Apr-10	11-Oct-13	29-Aug-17
US9745306	2-((4-amino-3-(3-fluoro-5-hydroxyphenyl)-1H-pyrazolo[3,4-D]pyrimidin-1-yl)methyl)-3-(2-(trifluoromethyl)benzyl) quinazolin-4(3H)-one derivatives and their use as phosphoinositide 3-kinase inhibitors	Respivert Limited	15-Mar-13	14-Mar-14	29-Aug-17
US9744231	Quality control methods for oil-in-water emulsions containing squalene	NOVARTIS AG	8-Nov-06	27-Aug-13	29-Aug-17
US9744229	Vaccines and immunotherapeutics using IL-28 and compositions and methods of using the same	THE TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA	4-Apr-08	28-Apr-14	29-Aug-17
US9744183	Nucleic acid prodrugs and methods of use thereof	WAVE LIFE SCIENCES LTD.	6-Jul-09	6-Jul-10	29-Aug-17
US9738894	Short interfering RNA (siRNA) analogues	Roche Innovation Center Copenhagen A/S	21-Mar-03	28-Mar-16	29-Aug-17
US9738624	Nuclear transport modulators and uses thereof	Karyopharm Therapeutics Inc.	21-Jun-13	20-Jun-14	22-Aug-17
US9737618	Adeno-associated virus (AAV) glades, sequences, vectors containing same, and uses thereof	The Trustees of the University of Pennsylvania	30-Sep-03	20-Jul-15	22-Aug-17
US9737593	Carbon nanotube compositions and methods of use thereof	Yale University	19-Mar-08	15-Mar-13	22-Aug-17
US9730997	Alphavirus vectors for respiratory pathogen vaccines	Novartis Vaccines and Diagnostics, Inc.	21-May-04	20-Aug-14	15-Aug-17
US9730912	Pharmaceutical compounds	ASTEX THERAPEUTICS LIMITED	12-Oct-06	12-Oct-07	15-Aug-17
US9727810	Spatially addressable molecular barcoding	Cellular Research, Inc.	27-Feb-15	26-Feb-16	8-Aug-17
US9726607	Systems and methods for detecting multiple optical signals	GEN-PROBE INCORPORATED	10-Mar-05	3-Mar-14	8-Aug-17
US9725770	Methods and compositions for identification of source of microbial contamination in a sample	The Regents of the University of California	6-Mar-12	6-Mar-13	8-Aug-17
US9725487	Compositions and methods for measles virus inhibition	Autoimmune Technologies, LLC	4-Nov-03	13-May-15	8-Aug-17
US9719106	Tissue preferential codon modified expression cassettes, vectors containing same, and uses thereof	The Trustees of the University of Pennsylvania	29-Apr-13	29-Apr-14	1-Aug-17
US9719083	Bioagent detection methods	IBIS BIOSCIENCES, INC.	8-Mar-09	8-Mar-10	1-Aug-17
US9718774	Indole carboxamide derivatives as P2X7 receptor antagonist	IDORSIA PHARMACEUTICALS LTD	12-Dec-12	11-Dec-13	1-Aug-17
US9717755	Method of treating inflammation	Cytosorbents Corporation	1-Apr-10	1-Apr-11	1-Aug-17
US9717749	Production of stable non-polyadenylated RNAs	Massachusetts Institute of Technology	16-Oct-12	16-Oct-13	1-Aug-17
US9717732	Drug combination	VERONA PHARMA PLC	15-Mar-13	17-Mar-14	1-Aug-17
US9714411	Animal protein-free media for cultivation of cells	Baxalta GmbH	29-Oct-04	30-Jul-15	25-Jul-17
US9714283	Compositions and methods for the treatment of immunodeficiency	ADMA BIOLOGICS, INC.	28-Oct-14	2-Jul-15	25-Jul-17
US9714226	Hydrazide containing nuclear transport modulators and uses thereof	Karyopharm Therapeutics Inc.	29-Jul-11	13-Nov-15	25-Jul-17
US9713641	Anti-TIGIT antigen-binding proteins and methods of use thereof	Potenza Therapeutics, Inc.	13-Feb-17	13-Feb-17	25-Jul-17
US9713606	Methods for treating pulmonary emphysema using substituted 2-Aza-bicyclo[2.2.1]heptane-3-carboxylic acid (benzyl-cyano-methyl)-amides inhibitors of cathepsin C	Boehringer Ingelheim International GmbH	14-Mar-13	1-Dec-15	25-Jul-17
US9708375	Inhibitory polypeptides specific to WNT inhibitors	Amgen Inc.	15-Mar-13	14-Mar-14	18-Jul-17
US9707278	Methods of modulating immune responses by modifying Akt3 bioactivity	Augusta University Research Institute, Inc.	17-Apr-14	17-Apr-15	18-Jul-17

US9701736	Influenza hemagglutinin-specific monoclonal antibodies for preventing and treating influenza virus infection	New York Blood Center, Inc.	20- Oct- 10	9- Oct- 14	11- Jul- 17
US9701638	Therapeutic hydroxyquinolones	Rutgers, The State University of New Jersey	9- Nov- 12	8- Nov- 12	11- Jul- 17
US9700616	Arranging interaction and back pressure chambers for microfluidization	NOVARTIS AG	3- Dec- 09	22- Mar- 16	11- Jul- 17
US9700614	Intranasal vaccination dosage regimen	Eurodine Vaccines AB	17- Dec- 12	17- Dec- 13	11- Jul- 17
US9700558	Drug combination of PDE3/PDE4 inhibitor and muscarinic receptor antagonist	VERONA PHARMA PLC	15- Mar- 13	17- Mar- 14	11- Jul- 17
US9696247	Sample fixation and stabilisation	RNASSIST LTD.	1- Mar- 13	28- Feb- 14	4- Jul- 17
US9695445	Method for production of reprogrammed cell using chromosomally unintegrated virus vector	ID Pharma Co., Ltd.	16- Jul-08	29- Jul- 15	4- Jul- 17
US9695135	Therapeutic catechols	Rutgers, The State University of New Jersey	12- May- 14	11- May- 15	4- Jul- 17
US9695134	3,5-diamino-6-chloro-N-(n-(4-phenylbutyl)carbamimidoyl)pyrazine-2-carboxamide compounds	Parion Sciences, Inc.	17- Dec- 12	8- Jan- 15	4- Jul- 17
US9689018	Mixed cell diagnostic systems for detection of respiratory, herpes and enteric viruses	Diagnostic Hybrids, Inc.	24- Apr- 98	4- Aug- 14	27- Jun- 17
US9688982	Methods and compositions for the treatment of cancer or other diseases	CITY OF HOPE	26- Jan- 07	11- Oct- 13	27- Jun- 17
US9687536	Methods and compositions for intranasal delivery	SHIN NIPPON BIOMEDICAL LABORATORIES, LTD.	15- Apr- 10	15- Apr- 11	27- Jun- 17
US9683256	Biological specimen collection and transport system	Longhorn Vaccines and Diagnostics, LLC	1- Oct- 07	15- Dec- 15	20- Jun- 17
US9683017	Inhibitory peptides of viral infection	UNIVERSITY TENNESSEE RESEARCH FOUNDATION	17- Jul-14	16- Jul- 15	20- Jun- 17
US9682133	Disrupted adenovirus-based vaccine against drugs of abuse	CORNELL UNIVERSITY	17- Mar- 10	17- Mar- 11	20- Jun- 17
US9677089	Adeno-associated virus (AAV) serotype 8 sequences, vectors containing same, and uses therefor	The Trustees of the University of Pennsylvania	17- Dec- 01	30- Mar- 16	13- Jun- 17
US9676867	Chimeric T cell receptor comprising carbonic anhydrase IX (G250) antibody	Dana-Farber Cancer Institute Inc.	2- Dec- 05	8- May- 13	13- Jun- 17
US9676857	Soluble engineered monomeric Fc	The United States of America, as represented by the Secretary, Department of Health and Human Services	16- Mar- 12	14- Mar- 13	13- Jun- 17
US9676727	Myxovirus therapeutics, compounds, and uses related thereto	Children's Healthcare of Atlanta, Inc.	24- Oct- 11	7- Jul- 16	13- Jun- 17
US9675550	Methods for inducing an immune response via buccal and/or sublingual administration of a vaccine	BOARD OF REGENTS, THE UNIVERSITY OF TEXAS SYSTEM	26- Jul-10	25- Jan- 13	13- Jun- 17
US9670507	Directed evolution and in vivo panning of virus vectors	The University of North Carolina at Chapel Hill	30- Apr- 08	28- Jun- 16	6- Jun- 17
US9670166	Substituted bicyclic dihydropyrimidinones and their use as inhibitors of neutrophil elastase activity	Boehringer Ingelheim International GmbH	6- Feb- 13	5- Aug- 16	6- Jun- 17
US9669092	Antagonism of the VIP signaling pathway	Emory University	2- Feb- 11	31- Jan- 12	6- Jun- 17
US9669089	Nucleic acid comprising or coding for a histone stem-loop and a poly(A) sequence or a polyadenylation signal for increasing the expression of an encoded pathogenic antigen	CureVac AG	15- Feb- 12	15- Feb- 13	6- Jun- 17
US9669088	Vaccination with multiple clades of H5 influenza A virus	Seqirus UK Limited	26- Nov- 07	25- Nov- 08	6- Jun- 17
US9661856	Synergy of plant antimicrobials with silver	The Arizona Board of Regents on Behalf of The University of Arizona	24- Aug- 12	26- Aug- 13	30- May- 17
US9657278	Methods to produce bunyavirus replicon particles	Stichting Dienst Landbouwkundig Onderzoek	20- Sep- 10	10- Jul- 15	23- May- 17
US9657076	GM-CSF and IL-4 conjugates, compositions, and methods related thereto	Children's Healthcare of Atlanta, Inc.	23- Oct- 12	23- Oct- 13	23- May- 17
US9657048	Enantiomers of the 1&C7,6&C3-isomer of neplanocin A	Auburn University	4- Aug- 14	4- Aug- 15	23- May- 17