DR. HERMAN J. EDELING

NEUROSURGEON / MEDICO-LEGAL PRACTITIONER / MEDIATOR

M.B., B.Ch. (Wits): F.C.S. (S.A.) (Neuro): HPCSA Reg No: MP 180408: PR 2401002

Consulting Rooms 85 St Patrick Road Houghton Johannesburg. Postal Address
PO Box 1158
Houghton
2041

Gauteng - Republic of South Africa

Telephone: 011-648-5101 Email: edeling@emlct.com

COVID-19 – Blind Faith or Open Minds Critical Thinking in Times of Crisis

Dear friends and colleagues,

- 1. Have I gone mad or has the world gone mad? How is it that, in addition to fear of the pandemic and economic hardship due to lockdown, we now seem to live in a world of rampant confusion. We are subjected to diametrically opposed opinions, all strongly expressed, by individuals who are regarded as experts.
- 2. How can it be, and why is it, that experts have such diametrically opposed opinions?
 - 2.1. On the one hand we have the "fashionable opinions". These are generally propagated by politicians, experts appointed by politicians, institutions we have traditionally trusted, pharmaceutical companies, the mainstream media and celebrities. Many who propagate these "fashionable opinions" are well-funded.
 - 2.2. On the other hand we have the "unfashionable opinions". These are generally propagated by independent experts, as well as other concerned individuals, who are generally unfunded, and who go out on a limb on their own time and their own dime. These independent experts and other voices are almost automatically vilified and censored.

- 3. In the face of this fear and confusion, do we choose to adopt blind faith in the "fashionable opinions", to adopt blind faith in the "unfashionable opinions", to bury our heads in the sand, or to open our minds and apply our God-given critical thinking skills.
- 4. Out of concern for my fellow man I communicate these thoughts from experience as an "expert witness" in medico-legal disputes.
 - 4.1. In medico-legal practice it is commonplace, virtually the norm for some unknown reason, for experts on opposite sides of litigated disputes to disagree. The law has developed a sound system for evaluating expert opinions. This system is based on the simple concept that experts are required to provide for the Court a "summary of opinions and reasons therefore".
 - 4.2. Through the well-established process of leading evidence and crossexamination in Court, the judge is able to critically evaluate the reasons for the opinions of differing experts, and then to decide on a rational and legally sound basis which if any of the opinions to accept.
 - 4.3. The crux of the matter is that any "opinion" put forward by any "expert" should be supported by "reasons". Reasons are made up of "facts" relevant to the case in point, that are subjected to a process of objective "logical analysis", in the light of established general or scientific "knowledge", leading to "conclusions" that are sound and reproducible. In this manner courts are able to decide which "expert opinion" to accept and which to reject.
- 5. The same principles apply to the "scientific method". Scientific knowledge develops from observation, questioning, research, forming hypotheses, experimentation, logical analysis, conclusion, communication with others and replication by others.

- 6. Medical practitioners understand and accept the value and reliability of "evidence based medicine". Scientific medical evidence is graded according to the degree of reliability, from most reliable to least reliable, as follows:
 - 6.1. <u>Class I evidence</u>: Prospective randomised controlled trials (PR CT) the gold standard of clinical trials. However, some may be poorly designed, lack sufficient patient numbers, or suffer from other methodological inadequacies.
 - 6.2. <u>Class II evidence</u>: Clinical studies in which the data has been collected prospectively, and retrospective analyses which were based on clearly reliable data. Types of studies so classified include: observational studies, cohort studies, prevalence studies, and case-controlled studies.
 - 6.3. <u>Class III evidence</u>: Most studies based on retrospectively collected data. Evidence used in this class includes clinical series, data bases or registries, case reviews and case reports.
 - 6.4. Class IV evidence: Expert opinion.
- 7. In any situation in which one needs to make a decision or solve a problem, it is marvellous when Class I evidence is available. Of course in many real life situations, such as a pandemic, there is no Class I evidence. Alternatively any relevant Class I evidence can be applied only to a limited portion of the problem at hand.
- 8. This is why society needs experts, who are suitably endowed with scientific knowledge (the available Class I, Class II and Class III evidence), who are able to expeditiously find existing scientific knowledge with which they are not endowed, who are able to apply logical analysis to the facts of the light thereof, and who are able to conduct relevant research.

- 9. Of course, any expert who is to be believed or trusted, should be willing to explain and share their reasons for any opinion freely, transparently and honestly. The problem that plagues countless areas of decision-making and problem-solving, especially in the current COVID-19 confusion, is the prevalence of experts who are not independent, objective and/or honest.
- 10. Crucial questions about the benefits and risks of any intervention, irrespective of the class of available evidence, relate to the duration of the data collection, i.e. was the study short-term, medium-term or long-term. It goes without saying that in the early stages of a new pandemic there cannot be any long-term evidence. Any expert or authority who proclaims "this intervention is safe", while ignoring potential long-term risks, is naïve, brainwashed or dishonest.
- 11. We would do well to ponder over the words of two ancient scientists:
 - 11.1. In the Greek tradition, Socrates, the wandering philosopher, warned his disciples against seeking the advice of sophists. These were philosophers paid to instruct the nobility. In Socrates' own view, knowledge could only come from the arduous experience of self-knowledge. The famous phrase gnoti seautón, "know thyself," was inscribed at the Oracle of Delphi.
 - 11.2. In words attributed to Buddha Siddhartha Guatama Shakyamuni: "Do not believe in anything simply because you have heard it. Do not believe in anything simply because it is spoken and rumoured by many. Do not believe in anything simply because it is found written in your religious books. Do not believe in anything merely on the authority of your teachers and elders. Do not believe in traditions because they have been handed down for many generations. But after observation and analysis, when you find that anything agrees with reason and is conducive to the good and benefit of one and all, then accept it and live up to it."
 - 11.3. https://www.faena.com/aleph/buddha-socrates-and-the-importance-of-thinking-for-ourselves

- 12. In the present global multidimensional crisis we should demand transparency from government and health authorities. We should demand a stop to censorship and ad hominem attacks. We should demand open, rational and transparent discussion and debate.
 - 12.1. In relation to opinions and instructions we should ask:
 - 12.1.1. What are the reasons for your opinion?
 - 12.1.2. What are the reasons for your instruction?
 - 12.1.3. For what reasons do you disagree with the alternative opinions of X and/or Y?
 - 12.2. Given the alarming reports of serious short-term complications and even deaths associated with mRNA vaccines; as well as the absence of any knowledge of long-term risks; and considering that mRNA vaccines are being administered as part of human research based on emergency authorisation; we should demand daily statistics on:
 - 12.2.1. The number (and proportion) of vaccinated individuals with any serious health issue.
 - 12.2.2. The number (and proportion) of vaccinated individuals admitted to hospital for any reason.
 - 12.2.3. The number (and proportion) of vaccinated individuals who have died for any reason.
 - 12.2.4. The number (and proportion) of hospitalised individuals who have been vaccinated.

12.3. The statistics should be readily available, considering the established habit of publishing daily statistics on COVID-19 related positive PCR tests, new cases, hospitalisations, recoveries, active cases and deaths.

Sincerely,

Herman J. Edeling

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